STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

for STATE FORMULA GRANT PROGRAMS under the Individuals with Disabilities Education Act

For reporting on FFY 2021

Connecticut



PART B DUE February 1, 2023

U.S. DEPARTMENT OF EDUCATION WASHINGTON, DC 20202

Introduction

Instructions

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for students with disabilities and to ensure that the State Educational Agency (SEA) and Local Educational Agencies (LEAs) meet the requirements of IDEA Part B. This introduction must include descriptions of the State's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

Intro - Indicator Data

Executive Summary

Additional information related to data collection and reporting

Number of Districts in your State/Territory during reporting year

170

General Supervision System:

The systems that are in place to ensure that IDEA Part B requirements are met, e.g., monitoring, dispute resolution, etc.

Connecticut's General Supervision System (GSS) is comprised of two focus areas:

- 1. Compliance monitoring
- 2. Program improvement

The following CSDE activities comprise the compliance monitoring prong of the GSS:

Data Collections

The CSDE Performance Office conducts the data collections required under the IDEA. All data regarding children with disabilities are collected via multiple unique but "linked" data collection systems. Part of the state's responsibility for ensuring the accuracy of the federally reported data includes auditing the data reported by districts on students with disabilities. Districts are monitored according to a three-year monitoring cycle for the Parent Survey, Assessment Modifications/Accommodations Audit, and as needed, a focused IDEA compliance review (File Review). Processes for the collection of required data will be revised moving forward as the state implemented its new Connecticut Special Education Data System (CT-SEDS) on July 1, 2022.

Dispute Resolution Processes:

Complaint Resolution Process

The complaint resolution process identifies and timely corrects noncompliance in an LEA's implementation of federal and state special education requirements and identifies components of an LEA's special education programming that need

improvement (e.g., policies, procedures). The CSDE publication, Complaint Resolution Process, describes the complaint resolution process in detail. This publication can be found at the CSDE's website.

Mediation

Mediation is a voluntary process offered to a parent and an LEA as a means to reach an agreement with respect to any matter relating to the proposal or refusal to initiate or change the identification, evaluation, or educational placement of the child, or the provision of a free appropriate public education.

Advisory Opinions

Connecticut provides that any party that requests a due process hearing, may also request an advisory opinion. The advisory opinion regulations require the agreement of both parties to participate in the process. The process, which is

completed in one day, allows the parties to state their positions to a hearing officer with limits on the number of witnesses the parties may present and the amount of time each party has to present their positions.

Due Process Hearings

The CSDE operates a single-tiered hearing system. That is, special education due process hearings are conducted at the state level; there is no local hearing. CGS Section 10-76h and its corresponding regulations establish the due process

hearing system, which is managed by the CSDE. Hearing officers are appointed by the CSDE and approved by the State Board of Education. They may not be an employee of a public agency involved in the education or care of the child and

may not have a personal or professional interest which would conflict with his or her objectivity in the hearing.

Fiscal Management

Mechanisms are in place to provide oversight in the distribution and use of IDEA Part B and other federal funds to support students with disabilities, at the state and local level. The BSE collaborates with the Bureau of Fiscal Services (BFS) and electronic Grant Management System (eGMS) to ensure proper methods of administration are in place, such as: distribution and compliance with allocations; monitoring and enforcement of obligations imposed; systems to monitor risk with examination of deficiencies; and as needed technical assistance. Annual audits of LEAs are conducted in accordance with the Single Audit Act, as risk factors are examined through a fiscal risk rubric. If a concern is identified and rises to the point of review, the Fiscal Review Team determines if further action(s) is required. The IDEA Program/Fiscal Compliance Review Process examines evidence and Corrective Action(s) plans to verify proper use of IDEA Part B/federal funds as related to the fiscal requirements of the IDEA.

IDEA Compliance File Reviews

For this monitoring activity, CSDE staff annually review a random sample of special education documentation (including student IEPs) from approximately 60 Connecticut LEAs using a standardized rubric to verify compliance with IDEA requirements. All 170 Connecticut LEAs have been assigned to one of three cohorts and each cohort participates in this prescribed process on a 3-year rotating cycle that is aligned with other state survey and monitoring activities. In FFY 2021, the focus of this monitoring activity was on verifying the correction of noncompliance related to: timely annual reviews and re-evaluations; secondary transition; and the use of "developmental delay" as a child's primary disability beyond age six. With the

implementation of CT-SEDS, current monitoring procedures will be reviewed and revised as needed.

Significant Disproportionality

The IDEA requires states to collect and examine data on an annual basis to determine whether significant disproportionality based on race or ethnicity is occurring in a district with respect to (1) the identification of children for special education and related services; (2) identification in six specific disability categories; (3) educational settings of less than 40 percent time with nondisabled peers and separate schools/residential facilities; and (4) discipline including in-school suspensions, out-of-school suspensions/expulsions, and total disciplinary removals. In Connecticut, the criteria used to determine those districts that demonstrate significant disproportionality in the four areas listed above includes: a relative risk index (RRI) equal to 3.0 and above for 3 consecutive years; a minimum cell size of 10; a minimum n-size of 30; and a reasonable progress standard of a 0.2 RRI reduction in both the second and third year of the analysis. A district that demonstrates significant disproportionality must review and revise, as necessary, its policies, procedure and practices under in the area(s) of significant disproportionality and publicly report on the revision of policies, practices, and procedures. Additionally, the district must set-aside 15 percent of its total IDEA Part B funds for Comprehensive Coordinated Early Intervening Services (CCEIS).

The following CSDE activities comprise the program improvement prong of the GSS:

Approval Process for Private Special Education Programs (APSEP)

Connecticut Regulations and Statutes grant the State Board of Education (SBOE) the authority to regulate and supervise the education of all children requiring special education who are residing in or attending any facility, private or public, receiving money from the state. In light of these statutory powers, the Commissioner of Education evaluates the suitability and efficacy of such private facilities prior to the disbursement of state funds and grants to local educational agencies utilizing such facilities for special education purposes. Principles adopted by the SBOE, which include specific standards, serve as the basis on which special education programs in private facilities (private programs) in Connecticut shall be approved. The principles are applicable to private programs in Connecticut-based private day and residential schools, hospitals, rehabilitation centers and treatment centers.

LRE Initiative

The CSDE gathers current data relative to disability category, time with nondisabled peers, race, age, gender, geographic region, prevalence rate and achievement scores data for students in the continuum of settings to examine trends and variables to understand causal factors. The CSDE has also partnered with Stetson and Associates and the CEEDAR center to develop and implement trainings throughout the state.

State Systemic Improvement Plan (SSIP)

Connecticut's SSIP is focused on early literacy instruction and reading achievement. The foundation of the State's theory of action is the evidence-based practice of Data-based Individualization (DBI).

See the Indicator 17 section of this report for more information.

Technical Assistance System:

The mechanisms that the State has in place to ensure the timely delivery of high quality, evidenced based technical assistance and support to LEAs.

Technical assistance activities are critical for ensuring the implementation of IDEA requirements and distributing best practices to LEA personnel and families. The BSE conducts a number of technical assistance activities to help promote compliance and best practices in the provision of special education services across Connecticut.

For example, the BSE regularly publishes its Bureau Bulletin, which provides updates to LEA personnel and families regarding special education policy and practice, upcoming BSE activities and professional development and/or technical assistance opportunities. Additionally, the Bureau Chief of Special Education issues memoranda to special education directors regarding guidance about the provision of special education services or new/revised BSE practices. In a final example, the Commissioner of Education issues "C-Letters" to superintendents regarding guidance about education policy or new/revised CSDE practices.

The BSE works closely with the state's parent training and information (PTI) center which is currently administered by the Connecticut Parent Advocacy Center (CPAC). Weekly meetings between BSE and CPAC leadership allow for the regular exchange of information and ideas on how to best support LEAs and families by providing timely and meaningful TA. Furthermore, data on direct TA to families provided by CPAC staff is collected by the PTI Center and reviewed monthly during the school year by the entire BSE staff as a means to identify trend issues and develop appropriate supports.

The BSE also provides a great deal of technical assistance directly to LEA personnel and families regarding the provision of special education services through telephone and e-mail contacts. The BSE has developed an organization system to manage the voluminous number of contacts received each week through a "BSE Contact List". Each BSE consultant accepts contacts from a group of LEAs in order to ensure the timely response to inquiries and establish a regular contact between the BSE and LEA personnel and families from a particular district. These communications serve as an opportunity to provide technical assistance, establish a collaborative relationship between the CSDE and its constituents and promote both compliance and best practices regarding special education processes and services. Finally, as needed, BSE consultants conduct trainings for LEA administrators and personnel on specific topics related to special education

In FFY 2021, in preparation for the launch of CT-SEDS, the BSE hosted an 11 part preview series demonstrating the functionality of the new IEP/data system. This was complemented by the development of various user manuals, quick guides, and other resources to support district staff with understanding and navigating the system and assist in the transition to CT-SEDS. Additionally, the CSDE Performance Office staff was providing extensive technical assistance to districts preparing data uploads to prepopulate the CT-SEDS system with student-level information/documents in order for work to begin immediately upon the "Go Live" launch date of July 1, 2022.

Professional Development System:

The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities.

The CSDE recognizes the importance of high quality professional development offerings for district personnel. The CSDE also recognizes the importance of parent/family training to empower parents and families in their role in the special education process. Therefore, the CSDE partners with the State Education Resource Center (SERC), the Regional Educational Service Center (RESC) Alliance, the Connecticut Parent Advocacy Center (CPAC) and other organizations to ensure that regularly scheduled, relevant professional development offerings and parent/family trainings are available to the public to address various topics (both compliance-focused and results-focused) related to special education.

During FFY 2020, a comprehensive professional learning opportunity titled "Connecticut IEP Quality Training" was developed and piloted. After some minor revisions, this professional learning series was offered to districts in FFY 2021. This series of trainings includes both synchronous and asynchronous modules that cover topics such as Quality IEP Development, Secondary Transition, Progress Monitoring, Prior Written Notice, and Parent

Training. Evaluation data solicited from participants indicate a very high level of satisfaction with the content and usefulness of the training.

In the spring of 2022, a five topic webinar series was developed and presented to district staff interested in a preview of the new CT-SEDS system. The five preview series included: an eleven part IEP series; a two part Section 504 series; a three part Administrative Training series; a five part Specific Learning Disability (SLD) series; and one Restraint and Seclusion session. These online sessions were designed to review special education requirements and assist with the transition from current district practice to the new special education IEP/data system.

Finally, the CSDE's Differentiated Monitoring and Support Team looks regularly at the patterns and trends across monitoring activities and uses the information to determine the need for specific future offerings with the SERC, the RESC Alliance, and other service delivery providers.

Broad Stakeholder Input:

The mechanisms for soliciting broad stakeholder input on the State's targets in the SPP/APR and any subsequent revisions that the State has made to those targets, and the development and implementation of Indicator 17, the State's Systemic Improvement Plan (SSIP).

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

Apply stakeholder involvement from introduction to all Part B results indicators (y/n)

YES

Number of Parent Members:

30

Parent Members Engagement:

Describe how the parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.

The Part B results indicator data targets were set during the previous year. As such, our stakeholders did not see the need to revise our targets at this time. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize. During our stakeholder process, additional feedback and information was collected including data analysis, review and revision of improvement strategies, and evaluating progress. In addition to our State Advisory Panel, parent input was obtained through the Connecticut Parent Advocacy Leadership Groups. Live, virtual sessions were held in English and Spanish and included small group discussions and documentation of parent feedback with a particular focus on assessing the state's current improvement strategies and documenting recommendations for adjustments to improve progress toward previously established targets.

Activities to Improve Outcomes for Children with Disabilities:

The activities conducted to increase the capacity of diverse groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities.

On July 1, 2022, the CSDE launched a new Individualized Education Program document and a Special Education Data System (CT-SEDS). In preparation for this launch in FFY 2021, the CSDE created a preview series of recorded videos describing the components of the new IEP and the IEP Team process (CT-SEDS Preview Series).

Additionally, IEP Quality Training Modules (CT IEP Quality Training | (ct.ieptraining.org) were created and designed to build the capacity of diverse groups of educators and parents and provide a foundation of knowledge and information to improve outcomes for children with disabilities. These synchronous and asynchronous resources include the main components of the IEP process as well as a module specifically for parents with student's ages 3 through 21. Over 3500 educators and parents have participated in this training during the previous year.

In addition to the initiative described above, we continue to collaborate with our Parent Training and Information Center to share information and resources with diverse groups of parents. CPAC has incorporated SPP-APR informational materials within their Parent Leadership Training program.

The CSDE supports the inclusion of parents with diverse backgrounds as important and valued members of the State's APR Indicator stakeholder groups and think they will be better positioned to participate meaningfully in discussions on the development of implementation activities if they have a solid understanding of Connecticut's new IEP document (and related documents) and special education processes.

Soliciting Public Input:

The mechanisms and timelines for soliciting public input for setting targets, analyzing data, developing improvement strategies, and evaluating progress.

As of January 2022, The CSDE SPP/APR Overview Website (https://portal.ct.gov/SDE/Special-Education/State-Performance-Plan-SPP-and-Annual-Performance-Report-APR) has been updated to include the results of SPP/APR stakeholder process on target setting, data analysis, development of the improvement strategies, and evaluation. The webpage contains an overview of the SPP/APR including a summary video. Additionally, the CSDE posted the feedback/recommendations/suggestions that diverse groups of stakeholders have provided throughout the process. There is also an opportunity for stakeholders to comment on the feedback and/or submit additional recommendations.

• The CSDE Special Education Division Director held a series of meetings with the following groups: Center for Children's Advocacy (CCA), Special Education Equity of Kids of Connecticut, (SEEK), Connecticut Legal Aid, Connecticut Council of Administrators of Special Education (ConnCASE), Office of Child Advocate, LEA Advisory Group, Council of Approved Private Special Education Facilities (CAPSEF), Connecticut Associate of Public

School Superintendents (CAPSS), Connecticut Association of Schools (CAS) (Principals) and CPAC (Connecticut Parent Advocacy Center).

- A broad/representative group of 66 stakeholders was assembled to participate in live, virtual sessions with the goal of building their capacity and soliciting feedback. Input was received in the form of live comments, instant polls, small group discussions, and surveys.
- One hundred Youth Advisory Council students from 10 school districts participate in virtual session designed to build capacity and solicit participant feedback. Updates are incorporated in the planning and programming of the Youth Advisory Council activities prior to, during, and after the submission of the SPP/APR.
- Virtual sessions were held with the State Advisory Council (State Advisory Panel) to build capacity and solicit participant feedback. Input was received in the form of live questions/comments, and small group discussions.
- Virtual meetings were held with the Connecticut Parent Advocacy Center (CPAC) Parent Leadership group. The sessions were designed to build capacity and solicit participant feedback. Input was received in the form of live questions/comments, and small group discussions. Sessions were held in English and Spanish.
- The Connecticut State Board of Education was provided with updates.
- The CSDE Newsletter, Superintendent Updates, LEA Email Notifications, and the Special Education Bureau Bulletin were utilized to share/disseminate information.

Making Results Available to the Public:

The mechanisms and timelines for making the results of the target setting, data analysis, development of the improvement strategies, and evaluation available to the public.

As of January 2022, The CSDE SPP/APR Overview Website (https://portal.ct.gov/SDE/Special-Education/State-Performance-Plan-SPP-and-Annual-Performance-Report-APR) has been updated to include the results of SPP/APR stakeholder process on target setting, data analysis, development of the improvement strategies, and evaluation.

The webpage contains an overview of the SPP/APR including a summary video. Additionally, the CSDE posted the feedback/recommendations/suggestions that diverse groups of stakeholders have provided throughout the process. There is also an opportunity for stakeholders to comment on the feedback and/or submit additional recommendations.

Reporting to the Public

How and where the State reported to the public on the FFY 2020 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2020 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP/APR, including any revision if the State has revised the targets that it submitted with its FFY 2020 APR in 2022, is available.

The CSDE reports to the public on the FFY 2020 performance of each local education agency (LEA) located in the state on the targets in the SPP/APR through the District Annual Performance Reports. The FFY 2020 District APR reports are posted on the CSDE's website at: (http://edsight.ct.gov/SASPortal/main.do) From the top navigation menu: (Select > Overview - Select > Special Education Annual Performance Reports).

In July 2022, the State's updated SPP/APR was posted in the Special Education section of the CSDE Web site at: (https://portal.ct.gov/SDE/Special-Education/State-Performance-Plan-SPP-and-Annual-Performance-Report-APR/Documents).

Information regarding the FFY 2020 District Annual Performance Reports and revised SPP/APR is provided to each LEA, the state's parent training and information (PTI) center, and various parent/advocacy organizations throughout the state.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

Intro - Required Actions

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with Individualized Education Programs (IEPs) exiting special education due to graduating with a regular high school diploma. (20 U.S.C. 1416 (a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma in the numerator and the number of all youth with IEPs who exited high school (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), and compare the results to the target. Provide the actual numbers used in the calculation.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma. If the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma are different, please explain.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	85.74%

FFY	2016	2017	2018	2019	2020
Target >=	72.90%	75.60%	78.20%	78.20%	87.65%
Data	65.21%	66.71%	64.95%	67.80%	87.65%

Targets

FFY	25.000/		2023	2024	2025	
Target >=			85.50%	85.50%	86.00%	

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

Prepopulated Data

Source	Date Description		Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	4,507

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	05/25/2022 Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)		21
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	S009; Data exited special education by reaching		28
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	593

FFY 2021 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
4,507	5,149	87.65%	85.00%	87.53%	Met target	No Slippage

Graduation Conditions

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma.

Graduation with a regular high school diploma is defined as receipt of Connecticut's approved state issued diploma. Graduation with a General Educational Development (GED) or a Certificate of Completion does not constitute graduation with a regular high school diploma. For the classes graduating from 2004-2022, a minimum of twenty credits is required for graduation with a regular high school diploma, including no fewer than four of which shall be in English, not fewer than three in mathematics, not fewer than three in social studies, including at least a one-half credit course on civics and American government, not fewer than two in science, not fewer than on in the arts or vocational education and not fewer than one in physical education. For the class of 2023 and each graduating class thereafter, a minimum of twenty-five credits is required for graduation with a regular high school diploma, including not fewer than nine credits in the humanities, including civics and the arts, not fewer than nine credits in science, technology, engineering and mathematics, not fewer than one credit in physical education and wellness, not fewer than one credit in health and safety education, not fewer than on credit in world languages, and a one credit mastery-based diploma assessment. The same rules are applicable for youth with IEPs.

Are the conditions that youth with IEPs must meet to graduate with a regular high school diploma different from the conditions noted above? (yes/no)

NO

Provide additional information about this indicator (optional)

It is important that the reader not compare the current data reported for SY 2019-2020 and 2020-2021 to the presented historic data in the prepopulated chart. The prepopulated historic data are based upon the 4-year cohort rate graduation calculation that is no longer used to measure this indicator. With the new requirements in the OSEP APR Measurement Table, the historic data do not reflect the graduation rate definition now required in this indicator.

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with IEPs who exited special education due to dropping out. (20 U.S.C. 1416 (a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS009.

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), and compare the results to the target.

Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) graduated with a state-defined alternate diploma; (c) received a certificate; (d) reached maximum age; or (e) dropped out.

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved but are known to be continuing in an educational program.

Use the annual event school dropout rate for students leaving a school in a single year determined in accordance with the National Center for Education Statistic's Common Core of Data.

Provide a narrative that describes what counts as dropping out for all youth. Please explain if there is a difference between what counts as dropping out for all students and what counts as dropping out for students with IEPs.

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	12.02%

FFY	2016	2017	2018	2019	2020
Target <=	13.60%	13.30%	13.00%	12.70%	11.18%
Data	12.85%	12.50%	12.69%	13.11%	11.18%

Targets

FFY	2021	2022 2023		2024	2025	
Target <=	12.00%	12.00%	12.00%	12.00%	12.00%	

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	4,507

Source	Date	Description	Data
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	21
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	28
SY 2020-21 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/25/2022	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	593

FFY 2021 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
593	5,149	11.18%	12.00%	11.52%	Met target	No Slippage

Provide a narrative that describes what counts as dropping out for all youth

The dropout definition for students with disabilities is consistent with the rules used for all Connecticut students. Specifically, students who drop out are defined as: (1) 16-and 17-year-old students who notify the school of their intention to withdraw, with parental permission; (2) 18-year-old students who notify the school of their intention to withdraw; (3) students who enroll in a GED program; and (4) students who withdraw from the school, without notifying the district, and for whom no transfer information or transcript is requested by another school.

Is there a difference in what counts as dropping out for youth with IEPs? (yes/no)

NO

If yes, explain the difference in what counts as dropping out for youth with IEPs.

Provide additional information about this indicator (optional)

It is important that the reader not compare the current data reported for SY 2019-2020 and 2020-2021 to the presented historic data in the prepopulated chart. The prepopulated historic data are based upon the old 4-year cohort rate dropout calculation which is no longer used for this indicator. With the new requirements in the OSEP APR Measurement Table, the historic data do not reflect the dropout rate definition now required in this indicator.

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS185 and 188.

Measurement

A. Participation rate percent = [(# of children with IEPs participating in an assessment) divided by the (total # of children with IEPs enrolled during the testing window)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The participation rate is based on all children with IEPs, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3A: Provide separate reading/language arts and mathematics participation rates for children with IEPs for each of the following grades: 4, 8, & high school. Account for ALL children with IEPs, in grades 4, 8, and high school, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	Α	Grade 4	2020	92.70%
Reading	В	Grade 8	2020	86.10%
Reading	С	Grade HS	2020	68.72%
Math	А	Grade 4	2020	92.78%
Math	В	Grade 8	2020	83.63%
Math	С	Grade HS	2020	70.16%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

04/05/2023

Reading Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	6,226	6,782	5,866
b. Children with IEPs in regular assessment with no accommodations	4,058	4,829	1,937
c. Children with IEPs in regular assessment with accommodations	1,550	1,176	2,631
d. Children with IEPs in alternate assessment against alternate standards	447	415	382

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

04/05/2023

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	6,220	6,785	5,862
b. Children with IEPs in regular assessment with no accommodations	2,847	3,263	1,937
c. Children with IEPs in regular assessment with accommodations	2,731	2,644	2,631
d. Children with IEPs in alternate assessment against alternate standards	444	411	380

^{*}The children with IEPs count excludes children with disabilities who were reported as exempt due to significant medical emergency in row a for all the prefilled data in this indicator.

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Α	Grade 4	6,055	6,226	92.70%	95.00%	97.25%	Met target	No Slippage
В	Grade 8	6,420	6,782	86.10%	95.00%	94.66%	Did not meet target	No Slippage

Gro		Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C	Gı	Grade HS	4,950	5,866	68.72%	95.00%	84.38%	Did not meet target	No Slippage

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Α	Grade 4	6,022	6,220	92.78%	95.00%	96.82%	Met target	No Slippage
В	Grade 8	6,318	6,785	83.63%	95.00%	93.12%	Did not meet target	No Slippage
С	Grade HS	4,948	5,862	70.16%	95.00%	84.41%	Did not meet target	No Slippage

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

Interactive reports containing performance information (both participation and achievement) at the state, district and school levels for all students and subgroups (including students with disabilities) can be found at: http://edsight.ct.gov/SASPortal/main.do

From the top navigation menu: (select > Performance and the appropriate assessment (e.g., Smarter Balanced, SAT, Alternate Assessments). All data is downloadable in EXCEL format.

An excel spreadsheet detailing information regarding the number and percent of children with disabilities who were provided accommodations in order to participate on regular statewide assessments at the state, district and school levels is also available at the above link. While on the Smarter Balanced or SAT participation and performance page, scroll down under the chart an look for the Accommodation Reports link.

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

None

3A - OSEP Response

3A - Required Actions

Indicator 3B: Proficiency for Children with IEPs (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3B. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

Measurement

B. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the regular assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3B: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the regular assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	Reading A Grade 4		2020	15.28%
Reading	В	Grade 8	2020	13.90%
Reading	С	Grade HS	2020	19.86%
Math	А	Grade 4	2020	12.91%
Math	В	Grade 8	2020	6.55%
Math	С	Grade HS	2020	7.48%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	15.50%	16.00%	16.50%	17.00%	17.50%
Reading	B >=	Grade 8	13.75%	14.50%	15.25%	16.00%	16.75%
Reading	C >=	Grade HS	20.00%	20.50%	21.00%	21.50%	22.00%
Math	A >=	Grade 4	13.00%	14.00%	15.00%	16.00%	17.00%
Math	B >=	Grade 8	6.75%	7.50%	8.25%	9.00%	9.75%
Math	C >=	Grade HS	7.50%	8.00%	8.50%	9.00%	9.50%

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress

of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	5,608	6,005	4,568
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	797	703	282
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	197	96	530

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	5,578	5,907	4,568
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	692	341	107
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	131	32	217

FFY 2021 SPP/APR Data: Reading Assessment

Gr ou p	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A	Grade 4	994	5,608	15.28%	15.50%	17.72%	Met target	No Slippage
В	Grade 8	799	6,005	13.90%	13.75%	13.31%	Did not meet target	No Slippage

Gr ou p	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
С	Grade HS	812	4,568	19.86%	20.00%	17.78%	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

The impact of COVID-19 on the experiences and learning of students with disabilities in High School were of greater degree than that of students in grades 4 and 8. It is not surprising that we noticed greater than predicted drops in the performance of HS aged students with disabilities on the SAT Reading assessment. We anticipate the data to improve in the FFY 2022 year with all districts and schools back to in-person learning.

FFY 2021 SPP/APR Data: Math Assessment

Gr ou p	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Α	Grade 4	823	5,578	12.91%	13.00%	14.75%	Met target	No Slippage
В	Grade 8	373	5,907	6.55%	6.75%	6.31%	Did not meet target	Slippage
С	Grade HS	324	4,568	7.48%	7.50%	7.09%	Did not meet target	Slippage

Provide reasons for slippage for Group B, if applicable

The impact of COVID-19 on the experiences and learning of students with disabilities in the area of MATH in Middle School were of greater degree than that of students in grades 4. It is not surprising that we noticed greater than predicted drops in the math performance of MS aged students with disabilities on the math assessment. We anticipate the data to improve in the FFY 2022 year with all districts and schools back to in-person learning.

Provide reasons for slippage for Group C, if applicable

The impact of COVID-19 on the experiences and learning of students with disabilities in High School were of greater degree than that of students in grades 4 and 8. It is not surprising that we noticed greater than predicted drops in the performance of HS aged students with disabilities on the SAT Math assessment. We anticipate the data to improve in the FFY 2022 year with all districts and schools back to in-person learning.

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

Interactive reports containing performance information (both participation and achievement) at the state, district and school levels for all students and subgroups (including students with disabilities) can be found at: http://edsight.ct.gov/SASPortal/main.do

From the top navigation menu: (select > Performance and the appropriate assessment (e.g., Smarter Balanced, SAT, Alternate Assessments). All data is downloadable in EXCEL format.

An excel spreadsheet detailing information regarding the number and percent of children with disabilities who were provided accommodations in order to participate on regular statewide assessments at the state, district and school levels is also available at the above link. While on the Smarter Balanced or SAT participation and performance page, scroll down under the chart an look for the Accommodation Reports link.

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

None

3B - OSEP Response

3B - Required Actions

Indicator 3C: Proficiency for Children with IEPs (Alternate Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3C. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

Measurement

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against alternate academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the alternate assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3C: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the alternate assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	Α	Grade 4	2020	27.39%
Reading	В	Grade 8	2020	19.13%
Reading	С	Grade HS	2020	37.76%
Math	А	Grade 4	2020	28.09%
Math	В	Grade 8	2020	42.39%
Math	С	Grade HS	2020	36.47%

Targets

Subject	Group	Group Name	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	28.00%	30.50%	33.00%	35.50%	38.00%
Reading	B >=	Grade 8	20.00%	22.50%	25.00%	27.50%	30.00%
Reading	C >=	Grade HS	38.00%	39.00%	40.00%	41.00%	42.00%
Math	A >=	Grade 4	29.00%	31.00%	33.00%	35.50%	38.00%
Math	B >=	Grade 8	43.00%	44.00%	45.50%	47.00%	48.50%
Math	C >=	Grade HS	35.50%	36.00%	36.50%	37.00%	38.00%

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	447	415	382
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	134	90	126

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	444	411	380
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	134	185	131

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Α	Grade 4	134	447	27.39%	28.00%	29.98%	Met target	No Slippage
В	Grade 8	90	415	19.13%	20.00%	21.69%	Met target	No Slippage

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
С	Grade HS	126	382	37.76%	38.00%	32.98%	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

The impact of Covid on the experiences and learning of students with disabilities in High School were of greater degree than that of students in grades 4 and 8. It is not surprising that we noticed greater than predicted drops in the performance of HS aged students with disabilities on the alternate Reading assessment. We anticipate the data to improve in the FFY 2022 year with all districts and schools back to normal in-person learning.

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Alternate Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Alternate Assessment	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Α	Grade 4	134	444	28.09%	29.00%	30.18%	Met target	No Slippage
В	Grade 8	185	411	42.39%	43.00%	45.01%	Met target	No Slippage
С	Grade HS	131	380	36.47%	35.50%	34.47%	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

The impact of Covid on the experiences and learning of students with disabilities in High School were of greater degree than that of students in grades 4 and 8. It is not surprising that we noticed greater than predicted drops in the performance of HS aged students with disabilities on the alternate Math assessment. We anticipate the data to improve in the FFY 2022 year with all districts and schools back to normal in-person learning.

Regulatory Information

The SEA, (or, in the case of a district-wide assessment, LEA) must make available to the public, and report to the public with the same frequency and in the same detail as it reports on the assessment of nondisabled children: (1) the number of children with disabilities participating in: (a) regular assessments, and the number of those children who were provided accommodations in order to participate in those assessments; and (b) alternate assessments aligned with alternate achievement standards; and (2) the performance of children with disabilities on regular assessments and on alternate assessments, compared with the achievement of all children, including children with disabilities, on those assessments. [20 U.S.C. 1412 (a)(16)(D); 34 CFR §300.160(f)]

Public Reporting Information

Provide links to the page(s) where you provide public reports of assessment results.

Interactive reports containing performance information (both participation and achievement) at the state, district and school levels for all students and subgroups (including students with disabilities) can be found at: http://edsight.ct.gov/SASPortal/main.do

From the top navigation menu: (select > Performance and the appropriate assessment (e.g., Smarter Balanced, SAT, Alternate Assessments). All data is downloadable in EXCEL format.

An excel spreadsheet detailing information regarding the number and percent of children with disabilities who were provided accommodations in order to participate on regular statewide assessments at the state, district and school levels is also available at the above link. While on the Smarter Balanced or SAT participation and performance page, scroll down under the chart an look for the Accommodation Reports link.

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

None

3C - OSEP Response

3C - Required Actions

Indicator 3D: Gap in Proficiency Rates (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Participation and performance of children with IEPs on statewide assessments:

- A. Participation rate for children with IEPs.
- B. Proficiency rate for children with IEPs against grade level academic achievement standards.
- C. Proficiency rate for children with IEPs against alternate academic achievement standards.
- D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

3D. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2021-2022 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2021-2022 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), *i.e.*, a link to the Web site where these data are reported.

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2021-2022 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2021-2022 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	Α	Grade 4	2020	31.84
Reading	В	Grade 8	2020	37.46
Reading	С	Grade HS	2020	39.51
Math	А	Grade 4	2020	27.37
Math	Math B Grade 8		2020	28.20
Math	С	Grade HS	2020	29.63

Targets

Out to at	0	Group	2024	2000	2000	2004	2225
Subject	Group	Name .	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	42.00	42.00	41.50	41.00	31.00
Reading	B <=	Grade 8	46.00	46.00	45.25	44.50	37.00
Reading	C <=	Grade HS	46.00	46.00	45.25	44.50	39.00
Math	A <=	Grade 4	40.00	40.00	39.50	39.00	27.00
Math	B <=	Grade 8	40.00	40.00	39.50	39.00	28.00
Math	C <=	Grade HS	36.00	36.00	35.50	35.00	29.00

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of

the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

FFY 2021 Data Disaggregation from EDFacts

Data Source:

SY 2021-22 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

04/05/2023

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	34,954	37,675	35,087
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	5,608	6,005	4,568
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	17,275	18,725	19,203
d. All students in regular assessment with accommodations scored at or above proficient against grade level	197	96	530
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	797	703	282
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	197	96	530

Data Source:

SY 2021-22 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

04/05/2023

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	34,875	37,402	35,087
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	5,578	5,907	4,568
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	15,925	12,988	12,092
d. All students in regular assessment with accommodations scored at or above proficient against grade level	131	32	217
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	692	341	107
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	131	32	217

FFY 2021 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Α	Grade 4	17.72%	49.99%	31.84	42.00	32.26	Met target	No Slippage
В	Grade 8	13.31%	49.96%	37.46	46.00	36.65	Met target	No Slippage
С	Grade HS	17.78%	56.24%	39.51	46.00	38.46	Met target	No Slippage

FFY 2021 SPP/APR Data: Math Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Α	Grade 4	14.75%	46.04%	27.37	40.00	31.28	Met target	No Slippage
В	Grade 8	6.31%	34.81%	28.20	40.00	28.50	Met target	No Slippage
С	Grade HS	7.09%	35.08%	29.63	36.00	27.99	Met target	No Slippage

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Data Source

State discipline data, including State's analysis of State's Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

Measurement

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) that have a significant discrepancy, as defined by the State, in the rates of suspensions and expulsions for more than 10 days during the school year of children with IEPs) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable))] times 100.

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

- --The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or
- --The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts that met the minimum n and/or cell size requirement, if applicable). If significant discrepancies occurred, describe how the State educational agency reviewed and, if appropriate, revised (or required the affected local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with applicable requirements.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data	
2005	21.30%	

FFY	2016	2017	2018	2019	2020
Target <=	9.50%	9.00%	9.00%	9.00%	5.00%
Data	6.47%	7.65%	9.41%	8.24%	2.35%

Targets

FFY	2021	2022	2023	2024	2025
Target <=	5.00%	20.00%	15.00%	12.50%	10.00%

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

FFY 2021 SPP/APR Data

Has the state established a minimum n/cell-size requirement? (yes/no)

NO

Number of LEAs that have a significant discrepancy	Number of LEAs in the State	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
1	170	2.35%	5.00%	0.59%	Met target	No Slippage

Choose one of the following comparison methodologies to determine whether significant discrepancies are occurring (34 CFR §300.170(a))

Compare the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the State

State's definition of "significant discrepancy" and methodology

For Indicator 4A, the Connecticut State Department of Education (CSDE) determined that a district had a significant discrepancy by comparing the suspension/expulsion rates for children with individualized education programs (IEPs) among districts in the state. The state calculated the rates of suspensions and expulsions greater than 10 days in a school year for children with IEPs for each district within the state. Connecticut has defined "significant discrepancy" as a district suspending or expelling greater than 2 percent (2.0%) of its children with disabilities for more than 10 days in a school year. Connecticut does not use a minimum "n" size for this analysis, and no districts were excluded from the calculation.

Connecticut established a state bar of 2.0 % to compare suspension/expulsion rates among districts; this was established in FFY 2011. The CSDE derived the 2.0 % threshold by calculating the suspension and expulsion rates of each district and ranking all districts in the state using the 2010-11 discipline data, and then convened the Indicator 4 stakeholder group to discuss options. The advisory group reviewed the historic discipline data and recommended applying 1.75 standard deviations above the mean, which the CSDE accepted and used to set the 2.0 % bar when comparing the ranked district suspension/expulsion rates for students with disabilities. The advisory group further recommended that the same bar be used for both indicators 4A and 4B. This state bar was reviewed with the Indicator 4 stakeholder group in the fall of 2021 and no changes were recommended.

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

The CSDE analyzed district suspension and expulsion data submitted electronically through the ED 166 Discipline data system. CSDE consultants from the Bureau of Data Collection, Research and Evaluation, the Bureau of Special Education, and the Office of Student Support Services met to review district suspension and expulsion data and the process for addressing districts with a significant discrepancy. The CSDE contacted the 1 district identified as having a significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs. The CSDE conducted the review outlined in 34 C.F.R. Section 300.170(b) by requiring districts to provide additional data and information to the CSDE through a self-assessment. The completed self-assessment addressed the district's policies, procedures and practices related to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. CSDE staff reviewed the self-assessments through a desk audit and clarified any self-assessment responses with individual districts.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
0	0	0	0

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4A - Prior FFY Required Actions

None

4A - OSEP Response

4A - Required Actions

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Data Source

State discipline data, including State's analysis of State's Discipline data collected under IDEA Section 618, where applicable. Discrepancy can be computed by either comparing the rates of suspensions and expulsions for children with IEPs to rates for nondisabled children within the LEA or by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State.

Measurement

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of suspensions and expulsions of more than 10 days during the school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2021 SPP/APR, use data from 2020-2021), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

- --The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or
- --The rates of suspensions and expulsions for children with IEPs to nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

Because the measurement table requires that the data examined for this indicator are lag year data, States should examine the 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2020-2021 school year, those 100 LEAs would have reported 618 data in 2020-2021 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2021-2022, suspension/expulsion data from those 15 new LEAs would not be in the 2020-2021 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2021 SPP/APR submission, States must use the number of LEAs reported in 2020-2021 (which can be found in the FFY 2020 SPP/APR introduction).

Indicator 4B: Provide the following: (a) the number of LEAs that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of long-term suspensions and expulsions (more than 10 days during the school year) for children with IEPs; and (b) the number of those LEAs in which policies, procedures or practices contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with (OSEP) Memorandum 09-02, dated October 17, 2008.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance. Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NC

Historical Data

Baseline Year	Baseline Data	
2016	0.00%	

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

FFY 2021 SPP/APR Data

Has the state established a minimum n/cell-size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement.

12

Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	158	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

Connecticut's methodology compares the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs disaggregated by race/ethnicity among LEAs in the State.

In Connecticut, significant discrepancy for Indicator 4B is defined as follows: Greater than 2.0% of students with disabilities in any racial/ethnic group in a district suspended or expelled out-of-school (OSS) for any serious offense for a cumulative total of greater than ten days in a school year.

Connecticut established a state bar of 2.0% to compare suspension/expulsion rates among districts; this was established in FFY 2011. The CSDE derived the 2.0% threshold by calculating the suspension and expulsion rates of each district and ranking all districts in the state using the 2010-11 discipline data, and then convened the Indicator 4 stakeholder group to discuss options. The advisory group reviewed the historic discipline data disaggregated by race/ethnicity for all SWDs in the state and recommended applying 1.75 standard deviations above the mean, which the CSDE accepted and used to set the 2.0% bar when comparing the ranked district suspension/expulsion rates for students with disabilities. The advisory group further recommended that the same bar be used for both indicators 4A and 4B, as there should be no difference in the rates of suspension/expulsion by race. This state bar was reviewed with the Indicator 4 stakeholder group in the fall of 2021 and no changes were recommended.

Connecticut applied a minimum "n" size requirement in the calculation of significant discrepancy in the rates of suspension and expulsion for greater than 10 days in a school year for children with IEPs:

- · Minimum of 5 students with disabilities in the district were suspended/expelled for > 10 days (Rule A)
- · Minimum of 10 students with disabilities in the district in each race category (Rule B).

In the 2020-21 school year, 0 districts were identified as having a significant discrepancy by race or ethnicity in the suspension/expulsion rate of children with disabilities of greater than 10 days in a school year.

Zero districts were found to have non-compliant policies, procedures, or practices. Target met.

Connecticut's minimum 'n' size requirement excluded 12 districts from the calculation of rates. Districts excluded under minimum "n" Rule A = 12. Districts excluded under minimum "n" Rule B = 0 Districts. Therefore, the number of districts assessed for Significant Discrepancy = 158 Districts. The number of districts with rates > 2.0% = 0 Districts. The Connecticut State Department of Education (CSDE) analyzed district suspension and expulsion data submitted electronically through the ED166 Discipline data system. CSDE consultants from the Bureau of Data Collection, Research and

Evaluation, Division of Family and Student Support Services and the Bureau of Special Education reviewed suspension and expulsion data and the process for addressing districts with a significant discrepancy. Data for Indicator 4B are not taken from sampling. Data collected are valid and reliable, as ensured through a series of verification checks after the electronic submission of the data.

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2021 using 2020-2021 data)

Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

In the 2020-21 school year, 0 districts were identified as having a significant discrepancy by race or ethnicity in the suspension/expulsion rate of children with disabilities of greater than 10 days in a school year. Therefore, the CSDE did not require any districts to review or revise policies, procedures or practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that these policies, procedures and practices comply with IDEA.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
0	0	0	0

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4B - Prior FFY Required Actions

None

4B - OSEP Response

4B- Required Actions

Indicator 5: Education Environments (children 5 (Kindergarten) - 21)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served:

- A. Inside the regular class 80% or more of the day;
- B. Inside the regular class less than 40% of the day; and
- C. In separate schools, residential facilities, or homebound/hospital placements.

(20 U.S.C. 1416(a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS002.

Measurement

- A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
- B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.
- C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)]times 100.

Instructions

Sampling from the State's 618 data is not allowed.

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6.Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA, explain.

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2016	2017	2018	2019	2020
Α	2019	Target >=	68.00%	68.00%	68.10%	68.20%	67.00%
Α	67.50%	Data	67.33%	67.69%	66.75%	67.50%	67.64%
В	2019	Target <=	6.10%	6.10%	6.00%	6.00%	7.20%
В	6.64%	Data	5.50%	5.67%	6.11%	6.64%	7.10%
С	2019	Target <=	8.40%	8.40%	8.30%	8.30%	7.30%
С	7.34%	Data	8.03%	7.88%	7.69%	7.34%	7.26%

Targets

FFY	2021	2022	2023	2024	2025
Targe t A >=	67.25%	67.50%	68.00%	68.50%	69.00%
Targe t B <=	7.20%	7.20%	7.20%	7.20%	7.20%
Targe t C <=	7.25%	7.20%	7.15%	7.10%	7.05%

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	Total number of children with IEPs aged 5 (kindergarten) through 21	80,182
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	54,535
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	5,951
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	5,013
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	149
SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/06/2022	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	215

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA. NO

FFY 2021 SPP/APR Data

Educat	ion Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
IEPs age	per of children with ed 5 (kindergarten) 21 inside the class 80% or more	54,535	80,182	67.64%	67.25%	68.01%	Met target	No Slippage
IEPs age	per of children with ed 5 (kindergarten) 21 inside the class less than 40% by	5,951	80,182	7.10%	7.20%	7.42%	Did not meet target	Slippage
IEPs age through schools, or home	per of children with ed 5 (kindergarten) 21 inside separate residential facilities, bound/hospital ints [c1+c2+c3]	5,377	80,182	7.26%	7.25%	6.71%	Met target	No Slippage
Part	Reasons for slippage, if applicable							
В	Historically, OSEP has agreed that indicator 5B is very difficult to plan for around a target considering that the only way to reduce placements into segregated settings under ind. 5C, is to first transition students from separate and residential settings back to public schools in the 0-40% regular class (5B) Environments category. CT demonstrated a significant drop in the percentage of students in 5C (more than 0.5%). In an effort to bring students back to the regular school setting, students were transitioned into separate class setting and therefore the 5B percentage increased.							

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

The State must revise its FFY 2025 target for sub-indicator B to reflect improvement over the FFY 2019 baseline.

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 3, 4, and aged 5 who are enrolled in a preschool program attending a:

- A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and
- B. Separate special education class, separate school or residential facility.
- C. Receiving special education and related services in the home.

(20 U.S.C. 1416(a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS089.

Measurement

- A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.
- B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.
- C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

Instructions

Sampling from the State's 618 data is not allowed.

States must report five-year-old children with disabilities who are enrolled in preschool programs in this indicator. Five-year-old children with disabilities who are enrolled in kindergarten are included in Indicator 5.

States may choose to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age.

For Indicator 6C: States are not required to establish a baseline or targets if the number of children receiving special education and related services in the home is less than 10, regardless of whether the State chooses to set one target that is inclusive of children ages 3, 4, and 5, or set individual targets for each age. In a reporting period during which the number of children receiving special education and related services in the home reaches 10 or greater, States are required to develop baseline and targets and report on them in the corresponding SPP/APR.

For Indicator 6C: States may express their targets in a range (e.g., 75-85%). Describe the results of the calculations and compare the results to the target.

If the data reported in this indicator are not the same as the State's data reported under IDEA section 618, explain.

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data - 6A, 6B

Part	FFY	2016	2017	2018	2019	2020
Α	Target >=	77.50%	77.75%	78.00%	78.00%	65.00%
Α	Data	72.64%	71.18%	69.65%	64.49%	65.36%
В	Target <=	11.00%	10.75%	10.50%	10.50%	22.20%
В	Data	16.43%	18.28%	19.00%	22.51%	22.15%

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

Targets

Please select if the State wants to set baseline and targets based on individual age ranges (i.e. separate baseline and targets for each age), or inclusive of all children ages 3, 4, and 5.

Inclusive Targets

Please select if the State wants to use target ranges for 6C.

Target Range not used

Baselines for Inclusive Targets option (A, B, C)

Part	Baseline Year	Baseline Data
Α	2019	64.49%
В	2019	22.51%
С	2020	0.54%

Inclusive Targets - 6A, 6B

FFY	2021	2022	2023	2024	2025
Target A >=	60.00%	61.50%	63.00%	64.50%	66.00%
Target B <=	25.00%	24.50%	24.00%	23.50%	22.50%

Inclusive Targets - 6C

FFY	2021	2022	2023	2024	2025
Target C <=	2.50%	2.50%	2.50%	2.50%	2.50%

Prepopulated Data

Data Source:

SY 2021-22 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

07/06/2022

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	2,599	3,227	95	5,921
a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	1,688	2,191	71	3,950
b1. Number of children attending separate special education class	559	621	12	1,192
b2. Number of children attending separate school	16	30	0	46
b3. Number of children attending residential facility	2	0	0	2
c1. Number of children receiving special education and related services in the home	12	14	0	26

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA. NO

FFY 2021 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	3,950	5,921	65.36%	60.00%	66.71%	Met target	No Slippage
B. Separate special education class, separate school or residential facility	1,240	5,921	22.15%	25.00%	20.94%	Met target	No Slippage
C. Home	26	5,921	0.54%	2.50%	0.44%	Met target	No Slippage

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and
- C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416 (a)(3)(A))

Data Source

State selected data source.

Measurement

Outcomes:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

- a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.
- b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
- c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.
- d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100. e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

Summary Statements for Each of the Three Outcomes:

Summary Statement 1: Of those preschool children who entered the preschool program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 1: Percent = [(# of preschool children reported in progress category (c) plus # of preschool children reported in category (d)) divided by (# of preschool children reported in progress category (a) plus # of preschool children reported in progress category (b) plus # of preschool children reported in progress category (c) plus # of preschool children reported in progress category (d))] times 100.

Summary Statement 2: The percent of preschool children who were functioning within age expectations in each Outcome by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 2: Percent = [(# of preschool children reported in progress category (d) plus # of preschool children reported in progress category (e)) divided by (the total # of preschool children reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

Instructions

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See <u>General Instructions</u> on page 2 for additional instructions on sampling.)

In the measurement include, in the numerator and denominator, only children who received special education and related services for at least six months during the age span of three through five years.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements. States have provided targets for the two Summary Statements for the three Outcomes (six numbers for targets for each FFY).

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three outcomes.

In presenting results, provide the criteria for defining "comparable to same-aged peers." If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS), then the criteria for defining "comparable to same-aged peers" has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2016	2017	2018	2019	2020
A1	2008	Target >=	55.50%	57.00%	58.50%	85.00%	85.00%
A1	58.30%	Data	73.25%	88.80%	89.75%	89.68%	87.30%

A2	2008	Target >=	51.50%	53.00%	54.50%	68.00%	63.00%
A2	54.20%	Data	68.66%	71.99%	71.20%	65.76%	66.03%
B1	2008	Target >=	64.50%	65.00%	65.50%	85.00%	85.00%
B1	61.70%	Data	85.77%	91.61%	90.84%	90.58%	88.80%
B2	2008	Target >=	31.50%	32.00%	33.50%	68.00%	66.00%
B2	33.00%	Data	68.97%	74.25%	73.24%	70.21%	68.00%
C1	2008	Target >=	51.00%	51.00%	51.00%	90.00%	93.50%
C1	50.50%	Data	80.00%	95.96%	96.21%	96.73%	96.09%
C2	2008	Target >=	25.00%	26.00%	27.00%	65.00%	60.00%
C2	26.50%	Data	57.50%	68.79%	69.04%	62.99%	61.42%

Targets

FFY	2021	2022	2023	2024	2025
Target A1 >=	85.00%	86.00%	87.00%	88.00%	89.00%
Target A2 >=	64.00%	65.00%	66.00%	67.00%	68.00%
Target B1 >=	86.00%	87.00%	88.00%	89.00%	90.00%
Target B2 >=	67.00%	68.00%	69.00%	70.00%	71.00%
Target C1 >=	94.00%	94.50%	95.00%	95.50%	96.00%
Target C2 >=	61.00%	62.00%	63.00%	64.00%	65.00%

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

FFY 2021 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

3,003

Outcome A: Positive social-emotional skills (including social relationships)

Outcome A Progress Category	Number of children	Percentage of Children
a. Preschool children who did not improve functioning	86	2.86%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	89	2.96%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	879	29.27%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	417	13.89%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,532	51.02%

Outcome A	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. Calculation:(c+d)/(a+b+c+d)	1,296	1,471	87.30%	85.00%	88.10%	Met target	No Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. Calculation: (d+e)/(a+b+c+d+e)	1,949	3,003	66.03%	64.00%	64.90%	Met target	No Slippage

Outcome B: Acquisition and use of knowledge and skills (including early language/communication)

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	347	11.56%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3	0.10%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	640	21.31%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,776	59.14%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	237	7.89%

Outcome B	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. Calculation: (c+d)/(a+b+c+d)	2,416	2,766	88.80%	86.00%	87.35%	Met target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. Calculation: (d+e)/(a+b+c+d+e)	2,013	3,003	68.00%	67.00%	67.03%	Met target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	60	2.00%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	37	1.23%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,101	36.66%

Outcome C Progress Category	Number of Children	Percentage of Children
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,098	36.56%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	707	23.54%

Outcome C	Numerator	Denominator	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. Calculation:(c+d)/(a+b+c+d)	2,199	2,296	96.09%	94.00%	95.78%	Met target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. Calculation: (d+e)/(a+b+c+d+e)	1,805	3,003	61.42%	61.00%	60.11%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
C2	Connecticut has seen demonstrated challenges in this area. with children making growth but not reaching age appropriate skills levels by age 6. The decline of one percent over the past 3 years leads us to believe that challenges in instruction and the provision of access to developmentally appropriate experiences during the COVID health care pandemic are likely to have had a significant impact on young children's growth and development. Our expectation to see growth in the 2022-23 school year in these areas is strong now that children are back to in-person learning experiences, are having exposure to developmentally appropriate experiences, as well as direct instruction to scaffold their learning.

Does the State include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years? (yes/no)

YES

Sampling Question	Yes / No
Was sampling used?	NO

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COS) process? (yes/no)

If no, provide the criteria for defining "comparable to same-aged peers."

The CSDE's decisions regarding data analysis and reporting are based upon the validity of the Brigance items which provide reference points for skills and behaviors expected of children within certain age bands. The Brigance test items are a result of extensive research and multiple validation studies. The items within each sub-test of the Brigance IED-III are hierarchically ordered to reflect the typical developmental trend of the increasing acquisition of children's skills over time.

In order to assist test administrators with the interpretation of results when the test is administered as a criterion referenced assessment, certain items within each sub-test were determined by the developers of the Brigance IED-III to serve as age-specific benchmarks of skill acquisition. In conjunction with information gathered from validation and standardization studies, the Brigance IED-III developers determined the developmental age notations ascribed to specific items by compiling information from a comprehensive research base in the area of infant and early childhood development (a detailed bibliography is provided on pages 292-294 of the Brigance IED-III assessment).

The ages (in months) ascribed to specific items increase from benchmark item to benchmark item. This corresponds to and reflects the hierarchical order of the items within each sub-test. Due to the inclusion of age-related benchmark items, the Brigance IED-III permits conclusions to be drawn about a child's performance on a sub-test relative to their chronological age and provides for comparison of skills and behaviors expected of a child's chronological age.

The CSDE uses the instrument's age-related benchmarks to determine comparable to same-age peers in the data analysis.

List the instruments and procedures used to gather data for this indicator.

The Connecticut State Department of Education (CSDE) established a statewide data system to collect data on the developmental and functional progress of 3-, 4- and 5-year-old children with IEPs in the preschool grade. Information obtained through a statewide data collection system are used to report on the three early childhood outcome measurement areas: positive social-emotional skills, including social relationships; acquisition and use of knowledge and skills, including early language/communication and early literacy; and use of appropriate behaviors to meet needs. The CSDE selected a

single statewide assessment instrument, the Brigance Diagnostic Inventory of Early Development III© (Brigance), a criterion-referenced assessment instrument, for the collection and reporting of early childhood outcome data.

The CSDE selected a subset of Brigance sub-tests which correlate to the early childhood outcome questions for federal reporting. The CSDE sent the list of selected sub-tests to the Brigance IED-III test developer and publisher for review and approval. Feedback from both the developer and publisher of the Brigance IED-III was that the sub-tests selected were sufficiently varied and representative of the instrument, hence not compromising either the intent or the integrity of the instrument and were felt to sufficiently answer the federal questions regarding child progress. The Brigance subtests selected by the CSDE are required to be administered to all children 3, 4 and 5-years of age with an IEP entering the preschool grade and receiving special education and related services. The assessment, specifically the state's required sub-tests of the assessment instrument, are used to collect data at a child's entry to and exit from special education at the preschool grade level.

Provide additional information about this indicator (optional)

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

(20 U.S.C. 1416(a)(3)(A))

Data Source

State selected data source.

Measurement

Percent = [(# of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities) divided by the (total # of respondent parents of children with disabilities)] times 100.

Instructions

Sampling of parents from whom response is requested is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See <u>General Instructions</u> on page 2 for additional instructions on sampling.)

Describe the results of the calculations and compare the results to the target.

Provide the actual numbers used in the calculation.

If the State is using a separate data collection methodology for preschool children, the State must provide separate baseline data, targets, and actual target data or discuss the procedures used to combine data from school age and preschool data collection methodologies in a manner that is valid and reliable.

While a survey is not required for this indicator, a State using a survey must submit a copy of any new or revised survey with its SPP/APR.

Report the number of parents to whom the surveys were distributed and the number of respondent parents. The survey response rate is automatically calculated using the submitted data.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, include in the State's analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process. States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

If the analysis shows that the demographics of the children for whom parents responding are not representative of the demographics of children receiving special education services in the State, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State distributed the survey to parents (e.g., by mail, by e-mail, on-line, by telephone, in-person through school personnel), and how responses were collected.

States are encouraged to work in collaboration with their OSEP-funded parent centers in collecting data.

8 - Indicator Data

o maioator bata	
Question	Yes / No
Do you use a separate data collection methodology for preschool children?	NO

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

Historical Data

Baseline Year	Baseline Data
2018	83.62%

FFY	2016	2017	2018	2019	2020
Target >=	87.75%	88.00%	88.25%	85.00%	85.00%

Data 87.55% 85.92% 83.62% 87.42% 85.52%

Targets

FFY 2021		2022	2023	2024	2025	
Target >=	85.00%	85.00%	85.00%	85.00%	85.00%	

FFY 2021 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
957	1,172	85.52%	85.00%	81.66%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

Post-COVID, families were over surveyed due to a multitude of issues and initiatives that required data in the spring/summer of 2022. Connecticut has two main issues with our response rate in the survey conducted in the spring of 2022, 1) lack of email and phone numbers available to the state in the spring of 2022 and 2) survey exhaustion across all facets of public education regarding the impact of COVID on all grants, initiatives and mental health.

Additionally, the state of Connecticut embarked on a launch of a new statewide IEP system in the spring of 2022, which went live on July 1, 2022. In preparation for the launch of the new IEP system, the state needed to collect a great deal of data it otherwise would not have required of each of the local school districts. The reporting and collection of these data took priority across all other collections in order to facilitate the launch of the new IEP system in a timely manner. As a result of the extensive collection of required data to facilitate the launch of the new IEP system, districts were not required, as in years past, to provide the state with a separate data collection of parent phone numbers and email addresses. The only purpose of that collection is for the outreach for the parent survey. Therefore, since not required to support the launch of the new statewide system for over 85,000 students with IEPs, the parent data collection was dropped for the 2021-2022 school year. The impact of this decision was that nearly 75% fewer parents responded to the state survey. This issue and the associated negative impact on the parent survey data and lower response rate is a one-time event, and it confirms the importance of using multiple means to contact parents. The State fully expects the data to improve for FFY 2022.

Since the State did not report preschool children separately, discuss the procedures used to combine data from school age and preschool surveys in a manner that is valid and reliable.

Connecticut does not use a separate data collection methodology for preschool children. All parents of students ages 3-21 are included in the survey. All surveys were collected in the same manner from all parents regardless of the age/grade of the student with disabilities. There are no issues with the combination of data because the surveys are identical, and all procedures for distribution and collection were also identical. No data were combined because all data were obtained from one survey, one administration and one database.

The number of parents to whom the surveys were distributed.

19,850

Percentage of respondent parents

5.90%

Response Rate

FFY	2020	2021
Response Rate	23.12%	5.90%

Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

As mentioned in the explanation of slippage, the state of Connecticut embarked on a launch of a new statewide IEP system in the spring of 2022, which went live on July 1, 2022. With the launch of this new system, the state will have immediate access to the most current and up-to-date contact information for all families, including email and phone numbers. In previous years, the state conducted a separate collection of contact information for selected families in the survey sample. However, this collection was conducted in the winter prior to late spring survey outreach by the vendor. This process to obtain parent contact information resulted in out-of-date mailing addresses and phone numbers before the survey was ever sent. Therefore Connecticut's long-term plan to increase the response rate will be implemented with the spring 2023 survey when the state has access to the most up-to-date contact information. We expect that access to the most current and up-to-date contact information will address the inability to reach the families in our cities that have housing instability and more likely to change addresses multiple times throughout the school year.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

While a parent survey regarding the perception of schools to support parents' involvement in their student's education is not generally seen as a topic that would result in nonresponse bias (NRB), NRB can still occur for several reasons. First, surveys that are poorly designed often lead to nonresponses. For this reason, Connecticut uses 25 items from the National Center for Special Education Accountability Monitoring (NCSEAM) Item Bank for this survey. Since these survey items have been designed and researched using the highest standards in instrument design, we can conclude the survey itself is not a reason for NRB. Next, having a select group of parents responding to a survey by failing to reach all members of a population may also contribute to NRB. Connecticut's extensive outreach prior to survey distribution via mail, telephone and email along with provision of the survey in six

languages is specifically designed to counter this type of NRB. Furthermore, since the use of multiple mediums has been shown to increase survey response rates and prevent NRB, the survey is made available in a variety of formats including mail, paper, email, and text. The length of survey collection periods can also impact response rates. Connecticut's survey is collected in several phases over the course of several weeks with multiple reminders to non-responsive families about the importance of completing the survey. While it's not always possible to completely eliminate the effects of NRB, it's possible to minimize the effects by using a smart survey design and distribution methodology. Connecticut's survey is designed to be relatively short and require minimal time and effort to complete and submit. Furthermore, the survey is distributed in such a manner that it reaches and is accessible to the vast majority of the identified population. Lastly, Connecticut extensively communicates about the importance and confidentiality of the survey with families as per recommended practice in NRB avoidance.

Include the State's analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services. States must include race/ethnicity in their analysis. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

Gender / Survey / Statewide / Difference Male ---- 67.3% / 65.6% / 1.7% Female -- 32.7% / 34.3% / -1.6%

Race/Ethnicity / Survey / Statewide / Difference

Al/AN ------ 0.2% / 0.2% / 0.0% Asian ----- 3.6% / 2.5% / 1.1% Black ----- 55.6% / 44.8% / 10.8% White ----- 55.6% / 44.8% / 10.8% Hispanic --- 27.1% / 33.1% / -6.0% NH/OPI ---- 0.2% / 0.1% /-0.1% 2+ Races --- 5.4% / 4.1% / 1.3%

Geographic Location/ Survey / Statewide / Difference

City, Midsize ------ 5.97% / 16.46% / -10.5% City, Small ------ 15.19% / 13.16% / 2.0% Suburb, Large ---- 44.80% / 45.55% / -0.4% Suburb, Midsize---17.72% / 11.92% / 5.80% Town, Fringe ------ 5.89% / 3.34% / 2.6% Rural, Fringe ------ 8.79% / 8.88% / -0.1% Rural, Distant ----- 1.62% / 0.69% / 1.0%

The responses collected from districts in this year's survey sample were analyzed for representativeness by gender, race/ethnicity and geographic location as compared to the total statewide population of students with disabilities. The state's analysis of representativeness of respondent parents used a +/6% discrepancy.

The +/- 6% discrepancy test of gender identified no concerns with the representativeness of respondent parents. Survey respondents were underrepresentative of Black and Hispanic/Latino families and over-representative of white/Caucasian families of students with disabilities in Connecticut, which is further supported when looking at the geographic location analysis which showed and under representation of respondents from Midsize City locations. This determination was supported by the +/- 6% discrepancy.

The demographics of the parents responding are representative of the demographics of children receiving special education services. (yes/no)

NO

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics

As mentioned in earlier sections, Connecticut recently launched a new state-wide electronic special education system that will be required for all districts. Under our existing data collection, the state collects our 10/1 child count data through a stand-alone system from each of our district vendor systems and we only collect the data necessary for all regulatory state and federal collections. Our current contact information is incomplete, subject to human error and not collected in a reasonable timeframe associated with the mailing. With the launch of our new system in 2022-23, CT will have access to all parent contact information on an on-demand basis. This new capability should ensure cleaner and more comprehensive contact information within a tighter timeline for provision to our survey vendor. Which in-turn, should allow Connecticut to reach more families, when there is less of a gap in the timeline from collection to mailing. This new system should eventually have a direct impact on our response rates and our ability to reach all families.

Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

The state's analysis of representativeness of respondent parents used both a +/- 6% discrepancy. See Connecticut's response to "the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services" for a complete description of our metrics.

Sampling Question	Yes / No
Was sampling used?	YES
If yes, has your previously approved sampling plan changed?	NO

Describe the sampling methodology outlining how the design will yield valid and reliable estimates.

Connecticut Special Education Parent Survey: Sampling Plan 2021-2022 through 2025-2026 Connecticut is continuing to use the same stratified random sampling approach with a combination of census and simple random sampling of parents of students with disabilities within each participating district. All 170 districts in Connecticut (CT) responsible for the implementation of the Individuals with Disabilities Education Improvement Act (IDEA, 2004) have been placed into one of three cohorts. The cohort design was purposeful and stratified to ensure that the cohort of districts included in any given year would be representative of the state overall.

District stratification is based upon enrollment size, racial demographics and regional "feeder" school alignment. Step three of the stratification used racial demographics and enrollment to randomly assign the remaining school districts to each of the three cohorts. At each step of assignment, each cohort was monitored to ensure representativeness of the cohort was maintained for the variables of age, race/ethnicity, grade, gender and disability type. When designing this system, we stratified the districts by all required breakout variables including age, race/ethnicity, grade, gender and disability type. We then used that stratification to place districts into one of the three cohorts and further tested the cohort's representativeness against the breakout variables for multiple years of child count data to ensure that when using any year of state data each cohort would continue to be representative at the state level. The process tested positively in each of the last eight survey years.

CT will be maintaining our survey as a mailing to approximately 20,000 families per year. In the approved sampling process, CT will census mail surveys to 70 percent of our districts in each cohort cycle. Under the approved sampling plan, 51 districts that will be sampled. This means that for the 51 districts where a simple random sample is drawn for survey mailing, we will survey 50 percent of all district students with disabilities. This design is purposeful oversampling of our under-represented black and Hispanic families. CT is confident in the statistical merit of this approach when applied with the 2022-2023 parent cohort using the new statewide special education system with real-time parent contact information.

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	NO
If yes, provide a copy of the survey.	

Provide additional information about this indicator (optional)

8 - Prior FFY Required Actions

In the FFY 2021 SPP/APR, the State must report whether its FFY 2021 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

Response to actions required in FFY 2020 SPP/APR

8 - OSEP Response

The State has submitted a revised sampling plan for this indicator and OSEP's evaluation of the plan indicates that it is approvable.

8 - Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

Compliance indicator: Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.

(20 U.S.C. 1416(a)(3)(C))

Data Source

State's analysis, based on State's Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification.

Massuramant

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in special education and related services and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2021	2022	2023	2024	2025	
Target	0%	0%	0%	0%	0%	

FFY 2021 SPP/APR Data

Has the state established a minimum n and/or cell size requirement? (yes/no)

If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.

0

Number of districts with disproportionate representation of racial/ethnic groups in special education and related services	Number of districts with disproportionate representation of racial/ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
0	0	170	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

Define "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

The state of Connecticut adopted the same formula for assessing significant disproportionality for this indicator. We are calculating a risk ratio and applying a minimum cell size of 10 and a minimum N-size of 30. These minimums do not exclude a district from the calculation, they simply trigger the required use of the alternate risk ratio when the cell or N-size is violated for the comparison group. Upon violation, the district-level data are compared to the state-level data. The threshold for the identification of disproportionate representation is a risk ratio greater than or equal to 3.0. We are only using one year of data for the assessment of disproportionate representation.

Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.

Each year, the CSDE requires districts with identified disproportionate representation (i.e., RR's greater than or equal to 3.0) to conduct an analysis of their policies, procedures and practices using a state-designed self-assessment based upon compliance with the requirements in 34 C.F.R. Sections 300.111, 300.201, and 300.301 through 300.311. Upon a desk audit review of each district's responses to the 52 indicators of the self-assessment by CSDE staff, it is determined if each of the districts is correctly implementing the related regulatory requirements and has appropriate identification policies, procedures and practices. If the CSDE finds that the disproportionate representation it identified of racial and ethnic groups in special education and related services is the result of inappropriate identification, the CSDE would report the finding in its SPP/APR and assign corrective actions accordingly.

For FFY 2021, zero districts were contacted regarding disproportionate representation using the CSDE's definition because zero met the numeric criteria for further review.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected	
0	0	0	0	

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

Compliance indicator: Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

(20 U.S.C. 1416(a)(3)(C))

Data Source

State's analysis, based on State's Child Count data collected under IDEA section 618, to determine if the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

Massuramant

Percent = [(# of districts, that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups, with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification) divided by the (# of districts in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2021 reporting period (i.e., after June 30, 2022).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA. Provide these data at a minimum for children in the following six disability categories: intellectual disability, specific learning disabilities, emotional disturbance, speech or language impairments, other health impairments, and autism. If a State has identified disproportionate representation of racial and ethnic groups in specific disability categories other than these six disability categories, the State must include these data and report on whether the State determined that the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in specific disability categories and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NC

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2016	2017	2018	2019	2020
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%

FFY 2021 SPP/APR Data

Has the state established a minimum n and/or cell size requirement? (yes/no)

YES

If yes, the State may only include, in both the numerator and the denominator, districts that met the State-established n and/or cell size. Report the number of districts excluded from the calculation as a result of the requirement.

0

Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial/ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts that met the State's minimum n and/or cell size	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
17	0	170	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

Define "disproportionate representation." Please specify in your definition: 1) the calculation method(s) being used (i.e., risk ratio, weighted risk ratio, e-formula, etc.); and 2) the threshold at which disproportionate representation is identified. Also include, as appropriate, 3) the number of years of data used in the calculation; and 4) any minimum cell and/or n-sizes (i.e., risk numerator and/or risk denominator).

The state of Connecticut adopted the same formula for assessing significant disproportionality to this indicator. We are calculating a risk ratio and applying a minimum cell size of 10 and a minimum N-size of 30. These minimums do not exclude a district from the calculation, they simply trigger the required use of the alternate risk ratio when the cell or N-size is violated for the comparison group. Upon violation, the district-level data are compared to the state-level data. The threshold for the identification of disproportionate representation is a risk ratio greater than or equal to 3.0. We are only using one year of data for the assessment of disproportionate representation.

Describe how the State made its annual determination as to whether the disproportionate overrepresentation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

Each year, the CSDE requires districts with identified disproportionate representation (i.e., RR's greater than or equal to 3.0) to conduct an analysis of their policies, procedures and practices using a state-designed self-assessment based upon compliance with the requirements in 34 C.F.R. Sections 300.111, 300.201, and 300.301 through 300.311. Upon a desk audit review of each district's responses to the 52 indicators of the self-assessment by CSDE staff, it is determined if each of the districts is correctly implementing the related regulatory requirements and has appropriate identification policies, procedures and practices. If the CSDE finds that the disproportionate representation it identified of racial and ethnic groups in special education and related services is the result of inappropriate identification, the CSDE would report the finding in its SPP/APR and assign corrective actions accordingly.

For FFY 2021, 17 districts were initially contacted regarding disproportionate representation using the CSDE's definition in 21 identified areas. The CSDE required the 17 districts to conduct an analysis of their policies, procedures and practices using the state-designed self-assessment based upon compliance with the requirements in 34 C.F.R. Sections 300.111, 300.201, and 300.301 through 300.311. Upon review of the self-assessment by CSDE staff via desk audit, it was verified that each of the districts was correctly implementing the related regulatory requirements and had appropriate identification policies, procedures and practices; and that the disproportionate representation was not due to inappropriate identification.

Provide additional information about this indicator (optional)

10 of the 21 areas of disproportionate representation were in the racial category of black.

8 of the 21 areas of disproportionate representation were in the racial category of Hispanic.

3 of the 21 areas of disproportionate representation were in the racial category of white.

8 of the 21 areas of disproportionate representation were in the disability category of Learning Disabled.

- 5 of the 21 areas of disproportionate representation were in the disability category of Speech/Language Impairment.
- 2 of the 21 areas of disproportionate representation were in the disability category of Other Health Impairment. 2 of the 21 areas of disproportionate representation were in the disability category of Intellectual Disabilities.
- 2 of the 21 areas of disproportionate representation were in the disability category of Intellectual Disabilities. 3 of the 21 areas of disproportionate representation were in the disability category of Emotional Disturbance.
- 1 of the 21 areas of disproportionate representation were in the disability category of Autism.

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected	
0	0	0	0	

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

Compliance indicator: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.

(20 U.S.C. 1416(a)(3)(B))

Data Source

Data to be taken from State monitoring or State data system and must be based on actual, not an average, number of days. Indicate if the State has established a timeline and, if so, what is the State's timeline for initial evaluations.

Measurement

a. # of children for whom parental consent to evaluate was received.

b. # of children whose evaluations were completed within 60 days (or State-established timeline).

Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

Percent = [(b) divided by (a)] times 100.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Note that under 34 CFR §300.301(d), the timeframe set for initial evaluation does not apply to a public agency if: (1) the parent of a child repeatedly fails or refuses to produce the child for the evaluation; or (2) a child enrolls in a school of another public agency after the timeframe for initial evaluations has begun, and prior to a determination by the child's previous public agency as to whether the child is a child with a disability. States should not report these exceptions in either the numerator (b) or denominator (a). If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in b.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2018	93.48%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	99.11%	99.58%	93.48%	96.97%	98.52%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or Stateestablished timeline)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
15,821	15,628	98.52%	100%	98.78%	Did not meet target	No Slippage

Number of children included in (a) but not included in (b)

193

Account for children included in (a) but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

Evaluations for a total of 193 children (across 37 districts) did not meet the state 45-school day timeline. The range of days beyond were from 1 to 268. There were several reasons for evaluations to not be completed within the timeline.

First, there were evaluations that were late in FFY 2021 because of circumstances related to COVID-19 and short-term school closures in the interest of public safety. This created scheduling conflicts, and additionally, many students and/or staff were unavailable for testing due to quarantine requirements. However, not all late evaluations were due to COVID-19 related issues. Other late timelines were due to: independent evaluations not being completed on time due to lack of available evaluators; inability to access multi-lingual evaluators or assessment instruments for non-native English speakers. Lastly, the extensive retirements and vacancies in all areas of public education further exasperated the lack of available staff to participate in all aspects of the evaluation process.

Indicate the evaluation timeline used:

The State established a timeline within which the evaluation must be conducted

What is the State's timeline for initial evaluations? If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in (b).

Pursuant to Regulations of Connecticut State Agencies (RCSA) §10-76d-13, once a district receives a written referral for special education evaluation, it has 45-school days to complete an initial evaluation, exclusive of the time required to obtain parental consent. The State timeline encompasses the entire eligibility determination process including reviewing the referral, obtaining written parental consent for evaluation, conducting a comprehensive evaluation, determining eligibility, obtaining written parental consent for the provision of special education services and implementing an individualized education program (IEP) if the student is found eligible.

Exceptions for going beyond the timeline include the following:

- Documented request by parent to reschedule or delay the eligibility determination PPT meeting after agreeing to attend at a particular time and date.
- Parent repeatedly fails or refuses to produce the child for evaluation.
- Student hospitalized/extended absence with medical documentation that student was not available for evaluation.
- Student placed in diagnostic placement for the purpose of determining eligibility.
- Eligibility Determination PPT cancelled due to inclement weather/emergency closing.
- Child referred from the Birth to Three system, had a 90-day transition conference, and either had an IEP in place by their 3rd birthday or was found not eligible.
- Documented agreement to extend the evaluation timeline for the purpose of determining a Specific Learning Disability (ED637 form).

What is the source of the data provided for this indicator?

State database that includes data for the entire reporting year

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

The data used to report Indicator 11 are statewide data that are inclusive of every school district in the state that is responsible for the provision of special education and related services. Data are not obtained from sampling. Data reported for this indicator are valid and reliable. Evaluation Timelines data are collected annually from all districts via a web-based data collection tool. Data are collected for all children for whom consent to evaluate was received, including children placed by parents in private, non-public, and religiously affiliated schools, between July 1, 2021 and June 30, 2022.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
39	39		0

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

There were 39 districts determined to be out of compliance with Indicator 11 based on FFY 2020 (2020-21) evaluation timelines data.

All 39 districts were required to submit statements of assurance that each had reviewed its policies, procedures and practices specific to conducting and completing initial evaluations for any factors that may have contributed to untimely completion of initial evaluations and submit any revisions for review by BSE staff via desk audit.

The 39 districts were also required to provide monitored submissions of subsequent evaluation timelines data during 2021-22 for review by CSDE staff.

During the monitored submission process, all 39 districts reached the 100% target for timely initial evaluations and were found to be implementing the specific regulatory requirements in 34 C.F.R. Section 300.301 and Regulations of Connecticut State Agencies Section 10-76d-13, which the CSDE verified using the special education SIS database.

Through the actions detailed above, the CSDE was able to verify within one year that each of the 39 districts is correctly implementing the regulatory requirements for initial evaluations, consistent with OSEP Memo 09-02.

Describe how the State verified that each individual case of noncompliance was corrected

There were 39 districts determined to be out of compliance with Indicator 11 based on FFY 2020 (2020-21) evaluation timelines data.

The 39 districts were required to submit to the CSDE the following information for each child determined eligible beyond the timeline during FFY 2020:

- -the student's State Assigned Student Identifier (SASID);
- -dates of referral, written parental consent for evaluation, and review of evaluation results:
- -the reason for the delay;
- -the extent to which the delay may have resulted in the denial of a free and appropriate public education (FAPE), if any; and
- -any action items taken to address the late evaluation and IEP implementation.

The CSDE used the special education SIS database to verify that the initial evaluation was completed (and an IEP implemented for every student determined eligible for special education and related services and for whom the parent provided written consent for the provision of services) for each of the 205 children whose initial evaluation exceeded the state timeline. BSE staff also reviewed any actions taken by the district to address the late evaluation and IEP implementation such as compensatory education or services, staff training, or revisions to clerical procedures.

Through the actions detailed above, the CSDE was able to verify within one year that each of the 205 initial evaluations was completed, although late, unless the child was no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

11 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

11 - OSEP Response

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

(20 U.S.C. 1416(a)(3)(B))

Data Source

Data to be taken from State monitoring or State data system.

Measurement

- a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
- b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
- c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
- d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
- e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.
- f. # of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Percent = [(c) divided by (a - b - d - e - f)] times 100.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Category f is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child's third birthday under 34 CFR §303.211 or a similar State option.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	91.90%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	99.85%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	3,128
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	529

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	1,899
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	317
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	264
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	118

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	1,899	1,900	99.85%	100%	99.95%	Did not meet target	No Slippage

Number of children who served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

In the case of the one student that did not receive FAPE by age three, the birth to three referral was submitted to the district, who passed on the referral to the staff member in charge of processing early childhood referrals. However the staff member was out on maternity leave; and the oversight was not discovered by the LEA until the teacher's return from leave. The referral process was expedited as soon as identified. The student's IEP implementation was delayed by a total of 17 school days.

Attach PDF table (optional)

What is the source of the data provided for this indicator?

State database that includes data for the entire reporting year

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data.

The data used to report on this indicator represent the statewide data collected from every school district in the state that provides special education and related services to the population of eligible students beginning at age 3. No sampling was utilized for reporting on this indicator. Data are valid and reliable as verified by a series of validation checks built into the statewide data collection system.

The statewide special education data collection system is called the Special Education Data Application and Collection (SEDAC). Data utilized were obtained by the Connecticut State Department of Education (CSDE) through the electronic submission of special education data by each school district in the state. Data submitted are child-specific with each child having a unique student identification number called a State Assigned Student Identification Number (SASID). The CSDE began assigning a SASID number to all children in the state's Part C program in the school year 2006-07. By the school year 2007-08, all infants and toddlers receiving Part C services had a SASID assigned by the CSDE. That student identification number assigned by the CSDE stays with the child during the receipt of their early intervention services and is reassigned to the child by the CSDE at age 3 or at whatever age and point in time the child becomes enrolled and begins receiving a public education.

Data used in the analysis reflect the Section 618 data that identifies the number of 3-year-old children receiving special education and related services. The CSDE's data system also captures the date of the child's individualized education program (IEP) team meeting that is held to develop the child's initial IEP along with the start date of a child's special education and related services. The Part C lead agency's data are used as data verification to ensure that the data analysis and reporting is fully inclusive of all students who exit Part C to Part B.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
3	3	0	0

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

The reason for the delay for each of the three students was related to COVID school closures and parents' reluctance to produce the children for evaluation and risk potential exposure to the virus. In each case, the CSDE required each of the LEAs to review timeline requirements and the circumstances leading to non-compliance. The CSDE was able to verify LEA compliance with the related regulatory requirements through a review of subsequent data in the state's special education data collection.

Describe how the State verified that each individual case of noncompliance was corrected

The CSDE used the state's special education data to verify that an IEP was implemented, albeit late, for each of the three children. BSE staff also contacted each of the LEAs to review what compensatory service(s) were provided to each student to ensure that each child received a free appropriate public education (FAPE) and verify that each case of individual noncompliance was appropriately addressed and corrected.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

test-vt

12 - OSEP Response

12 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

(20 U.S.C. 1416(a)(3)(B))

Data Source

Data to be taken from State monitoring or State data system.

Measurement

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

If a State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16, the State may, but is not required to, choose to include youth beginning at that younger age in its data for this indicator. If a State chooses to do this, it must state this clearly in its SPP/APR and ensure that its baseline data are based on youth beginning at that younger age.

Instructions

If data are from State monitoring, describe the method used to select LEAs for monitoring. If data are from a State database, include data for the entire reporting year.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State's monitoring, describe the procedures used to collect these data. Provide the actual numbers used in the calculation.

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2021 SPP/APR, the data for FFY 2020), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	77.80%

FFY	2016	2017	2018	2019	2020
Target	100%	100%	100%	100%	100%
Data	99.87%	99.92%	99.97%	99.91%	99.43%

Targets

FFY	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%

FFY 2021 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
16,973	17,012	99.43%	100%	99.77%	Did not meet target	No Slippage

State database that includes data for the entire reporting year

Describe the method used to collect these data, and if data are from the State's monitoring, describe the procedures used to collect these data

The data utilized to report on this indicator are statewide data that are inclusive of every school district in the state that provides special education and related services. These data are collected annually through Connecticut's Special Education Data Application and Collection (SEDAC). SEDAC collects multiple variables that allow the state to monitor individualized education program (IEP) compliance with Indicator 13 (Secondary Transition) including: use of age appropriate transition assessments; postsecondary goals and annual IEP goals and objectives related to individualized student transition services needs (including course of study); evidence that the student was invited to the Planning and Placement Team (PPT) meeting; and evidence that participating agencies were invited to the PPT meeting, where appropriate. Data were not obtained from sampling, secondary transition data are collected for every student with an IEP who is 16 years of age or older, as well as for students with the primary disability of Autism who are 14 years of age or older. See below for further details. All data reported here are valid and reliable.

In the above reported indicator data, the State saw an overall increase of 0.34 percent of transition-age youth with IEPs that contain each of the required components for secondary transition. The number of students with noncompliant IEPs decreased from 93 students (from 10 districts) in FFY 2020 to 39 students (from 4 districts) in FFY 2021.

Detailed information regarding the SEDAC data collection can be found at the following location: http://www.csde.state.ct.us/public/help/sedac/default.aspx.

Question	Yes / No
Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	YES
If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age?	YES
If yes, at what age are youth included in the data for this indicator	14

Provide additional information about this indicator (optional)

IMPORTANT NOTE: Included in this indicator are data for all youth with the primary disability of Autism who are age 14 and over and all other students with disabilities aged 16 and over. The box above only allows a number; not an explanation that the 14 year old state rule only applied to one disability category in Connecticut for the FFY 2021.

The Connecticut Legislature passed Public Act No. 19-49, An Act Concerning Transitional Services for Children with Autism Spectrum Disorder, which amends subdivision (9) of subsection (a) of Section 10- 76d of the Connecticut General Statutes and requires that: "The planning and placement team shall, in accordance with the provision of the Individuals with Disabilities Education Act, 20 USC 1400, et seq., as amended from time to time, develop and update annually a statement of transition service needs for each child requiring special education. Commencing no later than the date on which the first individual education program takes effect for a child who is at least fourteen years of age and diagnosed with autism spectrum disorder, such program shall include (A) appropriate measurable postsecondary goals based upon age-appropriate transition assessments related to training, education, employment and, where appropriate, independent living skills; and (B) the transition services, including courses of study, needed to assist a child in reaching those goals. The individual education program shall be updated annually thereafter in accordance with the provisions of this subdivision." The data for students with Autism, ages 14 and 15, are reported within this indicator and combined with the data for all other students with disabilities ages 16 and over.

Correction of Findings of Noncompliance Identified in FFY 2020

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
10	10	0	0

FFY 2020 Findings of Noncompliance Verified as Corrected

Describe how the State verified that the source of noncompliance is correctly implementing the regulatory requirements

For each of the districts identified with noncompliance under Indicator 13 in FFY 2020, the Connecticut State Department of Education (CSDE) verified within the one-year timeline that all districts are correctly implementing the specific regulatory requirements (34 C.F.R. Sections 300.320(b) and 300.321(b)) through a review of subsequent data in the state's special education data system, consistent with OSEP Memo 09-02. Each district was required to review student files to determine the underlying cause(s) of noncompliance and submit a brief summary of the findings of this investigation, as well as a plan for addressing the cause(s) of noncompliance, for review by CSDE staff. Additionally, each district was also required to submit a statement of assurance that it had reviewed its policies, procedures, and practices specific to providing measurable postsecondary goals and annual goals and objectives, including inviting the student to the Planning and Placement Team (PPT) meeting where transition services were being discussed, and if appropriate, inviting a representative from an outside/participating agency to the PPT meeting, for any factors that may have contributed to inappropriate transition services and submit any changes or revisions for review by CSDE staff. Each district was also required to provide evidence of training for all staff members who were responsible for the oversight, development, or implementation of individualized education programs (IEPs) that include appropriate post-secondary transition goals and annual goals which address the accurate and thorough completion of IEPs with particular attention to the secondary transition sections of the IEP - pages 4, 5, 6, and 7 - specifically information on pages 8 - 16 of the revised IEP Manual and Forms, and on pages 49 - 52 of Connecticut's Special Education Data Application and Collection Handbook-Reference Guide. In addition, each district was required to participate in a CSDE technical assistance (TA) session, differentiated and tailored to each district, based on their area(s) of noncompliance, which included training on the use of following CSDE Indicator 13 resources and tools: Secondary Transition Planning IEP Checklist, Secondary For Transition Planning IEP Checklist - District Summary, and IEP Rubric for Scoring Secondary Transition Planning.

The CSDE used the special education database to verify that the districts were correctly implementing the specific regulatory requirements (34 C.F.R. Sections 300.320(b) and 300.321(b)), consistent with OSEP Memorandum 09-02. CSDE staff also reviewed any actions taken by the district to address the development of an IEP with coordinated, measurable, post-secondary and annual goals and transition services, including inviting the student to the PPT meeting where transition services are discussed and if appropriate, inviting a representative from an outside/participating agency, such as staff training, the development of a "checks and balance" review system of secondary IEPs, or revisions of clerical or data collection procedures.

Describe how the State verified that each individual case of noncompliance was corrected

For each of the districts identified with noncompliance under Indicator 13 in FFY 2020, CSDE personnel worked closely with district personnel to immediately correct individual cases of noncompliance. In all cases, individual correction occurred and was verified through a review of student individualized education programs (IEPs) within the one-year timeline, consistent with OSEP Memo 09-02.

For each individual case of noncompliance, districts were required to:

- 1. Convene a Planning and Placement Team meeting for the purpose of reviewing and revising the student's IEP as well as for transition planning and correcting the area of noncompliance. In some cases the correction required a revision to the required elements of the student's IEP and in other cases it required an action to be taken by the district and then appropriately documenting that action on the IEP. The areas of secondary transition addressed through required corrective actions for individual cases were: a. the inclusion of appropriate, measurable postsecondary goals that are annually updated and based upon age appropriate transition assessments, b. transition services, including course of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs, c. evidence that the student's preferences and interests were considered in transition planning, d. evidence that the student was invited to the PPT meeting, and e. evidence that the district invited, with the prior written consent of the parent or student who has reached the age of majority, a representative of any outside agency that is likely to be responsible for providing or paying transition services for the student.
- 2. Update the special education data base for every student with a noncompliant IEP under this indicator; and
- 3. Submit the updated IEP pages to the CSDE to verify the correction of noncompliance.

Correction of Findings of Noncompliance Identified Prior to FFY 2020

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2020 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

13 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2020, the State must report on the status of correction of noncompliance identified in FFY 2020 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2021 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2020 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2021 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2020, although its FFY 2020 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2020.

Response to actions required in FFY 2020 SPP/APR

13 - OSEP Response

13 - Required Actions

Because the State reported less than 100% compliance for FFY 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2021, although its FFY 2021 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2021.

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Results indicator: Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were:

- A. Enrolled in higher education within one year of leaving high school.
- B. Enrolled in higher education or competitively employed within one year of leaving high school.
- C. Enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.

(20 U.S.C. 1416(a)(3)(B))

Data Source

State selected data source.

Measurement

- A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.
- B. Percent enrolled in higher education or competitively employed within one year of leaving high school = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school) times 100.
- C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

Instructions

Sampling of youth who had IEPs and are no longer in secondary school is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See <u>General Instructions</u> on page 2 for additional instructions on sampling.)

Collect data by September 2022 on students who left school during 2020-2021, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2020-2021 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. Definitions

Enrolled in higher education as used in measures A, B, and C means youth have been enrolled on a full- or part-time basis in a community college (two-year program) or college/university (four or more year program) for at least one complete term, at any time in the year since leaving high school.

Competitive employment as used in measures B and C: States have two options to report data under "competitive employment":

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Option 2: States report in alignment with the term "competitive integrated employment" and its definition, in section 7(5) of the Rehabilitation Act of 1973, as amended by Workforce Innovation and Opportunity Act (WIOA). For the purpose of defining the rate of compensation for students working on a "part-time basis" under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

Enrolled in other postsecondary education or training as used in measure C, means youth have been enrolled on a full- or part-time basis for at least 1 complete term at any time in the year since leaving high school in an education or training program (e.g., Job Corps, adult education, workforce development program, vocational technical school which is less than a two-year program).

Some other employment as used in measure C means youth have worked for pay or been self-employed for a period of at least 90 days at any time in the year since leaving high school. This includes working in a family business (e.g., farm, store, fishing, ranching, catering services, etc.).

II. Data Reporting

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

Provide the total number of targeted youth in the sample or census.

Provide the actual numbers for each of the following mutually exclusive categories. The actual number of "leavers" who are:

- 1. Enrolled in higher education within one year of leaving high school;
- 2. Competitively employed within one year of leaving high school (but not enrolled in higher education);
- 3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed):
- 4. In some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).

"Leavers" should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, "leavers" who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also

happen to be employed. Likewise, "leavers" who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2021 SPP/APR, compare the FFY 2021 response rate to the FFY 2020 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

III. Reporting on the Measures/Indicators

Targets must be established for measures A, B, and C.

Measure A: For purposes of reporting on the measures/indicators, please note that any youth enrolled in an institution of higher education (that meets any definition of this term in the Higher Education Act (HEA)) within one year of leaving high school must be reported under measure A. This could include youth who also happen to be competitively employed, or in some other training program; however, the key outcome we are interested in here is enrollment in higher education.

Measure B: All youth reported under measure A should also be reported under measure B, in addition to all youth that obtain competitive employment within one year of leaving high school.

Measure C: All youth reported under measures A and B should also be reported under measure C, in addition to youth that are enrolled in some other postsecondary education or training program, or in some other employment.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, include the State's analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in their analysis. In addition, the State's analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process. If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2016	2017	2018	2019	2020
Α	2020	Target >=	49.00%	49.00%	49.10%	80.00%	40.00%
Α	44.78%	Data	51.34%	86.40%	90.21%	90.95%	44.78%
В	2020	Target >=	63.00%	63.00%	63.10%	85.00%	85.00%
В	92.86%	Data	66.62%	91.60%	94.78%	93.71%	92.86%
С	2020	Target >=	77.00%	77.00%	78.75%	90.00%	95.00%
С	97.43%	Data	79.23%	95.32%	96.08%	96.14%	97.43%

FFY 2020 Targets

FFY	2021	2022	2023	2024	2025
Target A >=	40.00%	40.00%	40.00%	40.00%	45.00%
Target B >=	85.00%	85.00%	85.00%	85.00%	93.00%
Target C >=	95.00%	95.00%	95.00%	95.00%	97.50%

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress

of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

FFY 2021 SPP/APR Data

Total number of targeted youth in the sample or census	5,135
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	3,857
Response Rate	75.11%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	1,628
2. Number of respondent youth who competitively employed within one year of leaving high school	2,037
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	83
4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	67

Measure	Number of respondent youth	Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
A. Enrolled in higher education (1)	1,628	3,857	44.78%	40.00%	42.21%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	3,665	3,857	92.86%	85.00%	95.02%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	3,815	3,857	97.43%	95.00%	98.91%	Met target	No Slippage

Please select the reporting option your State is using:

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Response Rate

FFY	2020	2021
Response Rate	71.60%	75.11%

Describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

In FFY 2017, the CSDE contracted with the National Student Clearinghouse (NSC) to obtain higher education enrollment and persistence data for our exiting students with disabilities. In FFY 2018, the process by which LEAs send exiter contact information for the CT Post-School Outcome Survey (PSOS) to CSDE, captured using the Summary of Performance (SOP), was modified to a data collection via the Special Education Data Application and Collection (SEDAC) system. This process was continued in FFY 2019, FFY 2020, and FFY 2021. In FFY 2019, the CSDE made additional changes to its Indicator 14 data collection process in an effort to further increase overall response rate, as well as the representativeness of responders. First, the PSOS, and all subsequent materials were translated into Spanish. Second, the online survey and online learning module include additional accessibility features for exiters (i.e., subtitles/closed captioning, low vision mode). In FFY 2020, the CSDE worked with the CT Department of Labor (DOL) to obtain employment and wage information on students with disabilities who exited in 2019-2020 and may have been employed since exiting school. This was process was continued in FFY 2021. Moreover, the CSDE IDEA Part B Data Manager and the Indicator 14 Lead are members of and have participated in the National Technical Assistance Center on Transition: the Collaborative (NTACT:C) Indicator 14 Community of Practice.

Through all of these efforts, CT has seen our response rates increase from below 15% before FFY 2017 to 71.6% in FFY 2020 and 75.1% in FFY 2021. Furthermore, we now have a respondent pool that is representative of the demographics of all youth who are no longer in secondary school and had IEPs in effect at the time they left school, across all demographic areas.

The next step in CT's long-range plan to improve the response rate is the implementation of a new statewide special education data system. Connecticut is currently in the process of building a new statewide data system. With the launch of this new system, the state will have immediate access to the most current and up-to-date contact information for exiting students. In previous years, the state conducted a separate collection of contact information for all exiting students. However, this collection was conducted in the winter after students had already exited and prior to late spring survey outreach by the vendor. This process to obtain contact information resulted in out-of-date mailing addresses, email addresses, and phone numbers before the survey was ever sent. Therefore, Connecticut's long-term plan to increase the response rate will be implemented with the spring 2024 survey when the state has access to the most up-to-date student contact information. We expect that access to the most current and up-to-date student contact information will help to address the inability to reach some exited students with disabilities.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

While a survey regarding the activities of students after exiting from high school is not generally seen as a topic that would result in nonresponse bias (NRB), NRB can still occur for several reasons. First, surveys that are poorly designed often lead to nonresponses. For this reason, Connecticut uses 12 items that have been designed and researched using the highest standards in instrument design, we can conclude the survey itself is not a reason for NRB. Next, having a select group of people responding to a survey by failing to reach all members of a population may also contribute to NRB. Connecticut's extensive outreach prior to survey distribution via mail, telephone and email along with provision of the survey in two languages is specifically designed to counter this type of NRB. Furthermore, since the use of multiple mediums has been shown to increase survey response rates and prevent NRB, the survey is made available in a variety of formats including mail, paper, email, text, and telephone interview. The length of survey collection periods can also impact response rates. Connecticut's survey is collected in several phases over the course of several weeks with multiple reminders to non-responsive exiters about the importance of completing the survey. While it is not always possible to completely eliminate the effects of NRB, it is possible to minimize the effects by using a smart survey design and distribution methodology. Connecticut's survey is designed to be very short and require minimal time and effort to complete and submit. Furthermore, the survey is distributed in such a manner that it reaches and is accessible to the vast majority of the identified population. Lastly, Connecticut extensively communicates about the importance and confidentiality of the survey with exited students as per recommended practice in NRB avoidance, which is clearly reflected in our 75.1% response rate.

Include the State's analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in its analysis. In addition, the State's analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

Disability / Survey / Statewide / Difference LD ------- 46.4% / 44.4% / 2.0% ID ------ 1.7% / 2.5% / -0.8% ED ------ 12.8% / 14.3% / -1.5% SLI ------ 2.3% / 2.2% / 0.1% Other ---- 2.5% / 3.3% / -0.8% OHI ----- 27.1% / 26.0% / 1.1% Autism --- 7.2% / 7.3% / -0.1%

Gender / Survey / Statewide / Difference Male ---- 64.3% / 64.6% / -0.3% Female - 35.7% / 35.4% / 0.3%

Race/Ethnicity / Survey / Statewide / Difference

Al/AN ------ 0.4% / 0.3% / 0.1% Asian ----- 1.6% / 1.5% / 0.1% Black ----- 16.7% / 17.3% / -0.6% White ----- 50.3% / 47.7% / 2.6% Hispanic ----- 27.9% / 30.2% / -2.3% NH/OPI ----- 0.1% / 0.1% / 0.0% 2+ Races ----- 3.1% / 3.1% / 0.0%

Exit Reason / Survey / Statewide / Difference

Certificate --- 0.3% / 0.4% / -0.1% Dropout ----- 7.7% / 11.3% / -3.6% Graduate --- 91.8% / 87.8% / 4.0% Max Age ---- 0.3% / 0.3% / -0.3%

The responses collected from 75.1 percent of youth in this year's exiting population were analyzed for representativeness by disability, gender, race/ethnicity, and exit reason as compared to the total statewide population of exiting students with disabilities. The State's analysis of representativeness of respondent youth used both a +/-6% discrepancy, as well as a statistical significance test (chi-square) and a practical or meaningful significance test (effect size).

The +/- 6% discrepancy test of all four areas identified zero concerns with the representativeness of respondent youth. Additionally, all areas were further examined for practical significance using an effect size statistic which supports a negligible to very weak and no statistical difference between all demographics of exiting youth with disabilities and those of the exited respondents.

The response data is representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school. (yes/no)

YES

If no, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics.

Describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).

The State's analysis of representativeness of respondent youth used both a +/- 6% discrepancy, as well as a statistical significance test (chi-square) and a practical or meaningful significance test (effect size). See Connecticut's response to "Include the State's analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school." for a complete description of our metrics.

Sampling Question	Yes / No
Was sampling used?	NO
Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	NO

Provide additional information about this indicator (optional)

14 - Prior FFY Required Actions

None

14 - OSEP Response

14 - Required Actions

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results Indicator: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements. (20 U.S.C. 1416(a)(3)(B))

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (EMAPS)).

Measurement

Percent = (3.1(a) divided by 3.1) times 100.

Instructions

Sampling is not allowed.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State's data under IDEA section 618, explain.

States are not required to report data at the LEA level.

15 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

NO

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1 Number of resolution sessions	73
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/02/2022	3.1(a) Number resolution sessions resolved through settlement agreements	37

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

Historical Data

Baseline Year	Baseline Data
2013	45.07%

FFY	2016	2017	2018	2019	2020
Target >=	45.00%	45.00%	45.10%	52.00%	40.00%-50.00%

Data 55.29% 57.14%	60.19%	50.00%	64.52%
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Targets

FFY	2021	2022	2023	2024	2025
Target >=	25.00%	30.00%	35.00%	40.00%	45.10%

FFY 2021 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
37	73	64.52%	25.00%	50.68%	Met target	No Slippage

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

Results indicator: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3(B))

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (EMAPS)).

Measurement

Percent = (2.1(a)(i) + 2.1(b)(i)) divided by 2.1) times 100.

Instructions

Sampling is not allowed.

Describe the results of the calculations and compare the results to the target.

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of resolution mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

States may express their targets in a range (e.g., 75-85%).

If the data reported in this indicator are not the same as the State's data under IDEA section 618, explain.

States are not required to report data at the LEA level.

16 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1 Mediations held	189
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.a.i Mediations agreements related to due process complaints	55
SY 2021-22 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/02/2022	2.1.b.i Mediations agreements not related to due process complaints	99

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

Targets: Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

Historical Data

Baseline Year	Baseline Data
2005	68.60%

FFY 2016 2017 2018 2019 2020	
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Target >=	68.00%	68.00%	68.70%	68.70%	50.00%
Data	63.33%	61.88%	66.96%	75.00%	80.00%

Targets

FFY	2021	2022	2023	2024	2025
Target >=	50.00%	55.00%	55.00%	55.00%	68.65%

FFY 2021 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
55	99	189	80.00%	50.00%	81.48%	Met target	No Slippage

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

The State's SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

Measurement

The State's SPP/APR includes an SSIP that is a comprehensive, ambitious, yet achievable multi-year plan for improving results for children with disabilities. The SSIP includes each of the components described below.

Instructions

<u>Baseline Data</u>: The State must provide baseline data that must be expressed as a percentage and which is aligned with the State-identified Measurable Result(s) for Children with Disabilities.

<u>Targets:</u> In its FFY 2021 SPP/APR, due February 1, 2023, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2021 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

<u>Updated Data:</u> In its FFYs 2021 through FFY 2025 SPPs/APRs, due February 1, 2023, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) for Children with Disabilities. In its FFYs 2021 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State's targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

Phase I: Analysis:

- Data Analysis:
- Analysis of State Infrastructure to Support Improvement and Build Capacity;
- State-identified Measurable Result(s) for Children with Disabilities;
- Selection of Coherent Improvement Strategies; and
- Theory of Action.

Phase II: Plan (which, is in addition to the Phase I content (including any updates) outlined above:

- Infrastructure Development;
- Support for local educational agency (LEA) Implementation of Evidence-Based Practices; and
- Evaluation.

Phase III: Implementation and Evaluation (which, is in addition to the Phase I and Phase II content (including any updates) outlined above:

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

Refer to FFY 2013-2015 Measurement Table for detailed requirements of Phase I and Phase II SSIP submissions.

Phase III should only include information from Phase I or Phase II if changes or revisions are being made by the State and/or if information previously required in Phase I or Phase II was not reported.

Phase III: Implementation and Evaluation

In Phase III, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress implementing the SSIP. This includes: (A) data and analysis on the extent to which the State has made progress toward and/or met the State-established short-term and long-term outcomes or objectives for implementation of the SSIP and its progress toward achieving the State-identified Measurable Result(s) for Children with Disabilities (SiMR); (B) the rationale for any revisions that were made, or that the State intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and (C) a description of the meaningful stakeholder engagement. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2021 through 2025 SPP/APR, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, e.g., a logic model, of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., Feb 2022). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on anticipated outcomes to be obtained during FFY 2022, i.e., July 1, 2022-June 30, 2023.).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (i.e., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (i.e., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023for the FFY 2021 APR, report on activities it intends to implement in FFY 2022, i.e., July 1, 2022-June 30, 2023)) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

17 - Indicator Data

Section A: Data Analysis

What is the State-identified Measurable Result (SiMR)?

Increase the reading performance of all third-grade students with disabilities (SWDs) statewide, as measured by Connecticut's English Language Arts (ELA) Performance Index.

Has the SiMR changed since the last SSIP submission? (yes/no)

NO

Is the State using a subset of the population from the indicator (e.g., a sample, cohort model)? (yes/no)

NO

Is the State's theory of action new or revised since the previous submission? (yes/no)

NO

Please provide a link to the current theory of action.

https://portal.ct.gov/-/media/SDE/Special-Education/SPP/CT-Part-B-State-Systemic-Improvement-Plan.pdf

Progress toward the SiMR

Please provide the data for the specific FFY listed below (expressed as actual number and percentages).

Select yes if the State uses two targets for measurement. (yes/no)

NO

Historical Data

Baseline Year	Baseline Data
2018	51.50%

Targets

FFY	2021	2022	2023	2024	2025
Target>	47.50%	47.50%	48.50%	49.00%	51.60%

FFY 2021 SPP/APR Data

Sum of Individual Performance Indices	Number of Student with Disabilities	FFY 2020 Data	FFY 2021 Target	FFY 2021 Data	Status	Slippage
2,773	5,584		47.50%	49.66%	Met target	N/A

Provide the data source for the FFY 2021 data.

The data source used by the CSDE is the statewide ELA summative assessments: the Smarter Balanced (SB) Assessment and the Connecticut Alternative Assessment (CTAA), administered statewide to students in Grades 3-8 and 11 in the spring of 2022. The SiMR data are directly derived from the State's approved ESSA Accountability Index.

Please describe how data are collected and analyzed for the SiMR.

The State Identified Measurable Result (SIMR) for the Connecticut State Department of Education's State Systemic Improvement Plan is to increase the reading performance of all third-grade students with disabilities (SWD) statewide, as measured by Connecticut's English Language Arts (ELA) Performance Index. The methodology for calculating the ELA Performance Index starts by taking the scale score on the statewide ELA assessments: the Smarter Balanced (SB) Assessment and the Connecticut Alternate Assessment (CTAA), administered statewide each spring, and converting that scale score into an appropriate index point value that ranges from 0 to 110 (the individual performance index). The ELA Performance Index is then calculated by averaging the individual performance indices (numerator) earned by all participating third grade students with disabilities (denominator).

Optional: Has the State collected additional data (i.e., benchmark, CQI, survey) that demonstrates progress toward the SiMR? (yes/no) NO

Did the State identify any general data quality concerns, unrelated to COVID-19, that affected progress toward the SiMR during the reporting period? (yes/no)

NO

Did the State identify any data quality concerns directly related to the COVID-19 pandemic during the reporting period? (yes/no)

NO

Section B: Implementation, Analysis and Evaluation

Please provide a link to the State's current evaluation plan.

https://portal.ct.gov/-/media/SDE/Special-Education/SPP/CT-Part-B-State-Systemic-Improvement-Plan.pdf

Is the State's evaluation plan new or revised since the previous submission? (yes/no)

NO

Provide a summary of each infrastructure improvement strategy implemented in the reporting period:

SSIP Leadership Team

The CSDE formed an SSIP Leadership Team, to increase the collaboration between the Bureau of Special Education (BSE), the Academic Office, the Center for Literacy Research and Reading Success, the Office of Dyslexia and Reading Disabilities, as well as other internal CSDE colleagues and external partners; share expertise, research, and resources; support the State's SSIP; plan professional learning (PL) opportunities to build capacity on reading/literacy strategies for SWDs; and support local education agencies (LEAs) as they work toward improving the reading performance of third grade students with disabilities (SWDs) – Connecticut's SiMR. There are a variety of existing initiatives in the state that are coordinated by the CSDE, which directly relate to and support the SSIP. The CSDE's infrastructure has improved through the development of an SSIP Leadership Team. The regularly scheduled virtual meetings has allowed the CSDE colleagues to discuss the content, implementation, and effectiveness of these initiatives, and restructure existing and create new activities to ensure that CSDE initiatives continue to evolve in a way that best supports the reading instruction of SWDs in the state. Through this collaborative effort, the SSIP Leadership Team worked to develop and maintain the Web-based repository of resources, plan for ongoing PL opportunities, and support the Connecticut Intensive Intervention Implementation Initiative (CONNi4) project, which will support LEAs in implementing the data-based individualization (DBI) process.

Online TA and Resource Library

While previous SSIP-related resources focused almost solely on evidence-based reading instruction and intervention, it was necessary to broaden the scope of this work this past year in preparation for the statewide implementation of the new IEP document and the Connecticut Special Education Data System (CT-SEDS). An intra-department approach to formulate a strategy, develop resources, and provide technical assistance (TA) was utilized. The BSE worked collaboratively with internal CSDE colleagues, as well as external partners such as the State Education Resource Center (SERC), the Connecticut Alliance of Regional Educational Service Centers (RESCs), and the state's parent training and information (PTI) center in order to provide TA and online resources. In its effort to build capacity statewide, and to support the implementation of the new IEP and the CT-SEDS, the BSE created a New IEP/CT-SEDS webpage to provide information, documents, and tools, and to assist in the roll-out of the new IEP, as well as developed a CT-SEDS Preview Series to provide a preview of how CT-SEDS will support various special education processes. A five-part Specific Learning Disability (SLD) Preview Series was developed to assist planning and placement team's (PPT) engagement in thoughtful, comprehensive, data-driven dialogue about students referred for special education due to a suspected SLD:

- 1) Overview,
- 2) Subject-Specific Worksheets,
- 3, Multidisciplinary Evaluation Report,
- 4) Understanding Common Profiles of Reading Disabilities, and
- 5) Understanding a Pattern of Strengths and Weaknesses.

Ongoing Professional Learning

The CSDE, in collaboration with the SERC and the RESCs, also provided two robust PL opportunities to build capacity and support the statewide implementation of the new IEP and CT-SEDS: IEP Quality Training and CT-SEDS Expert User Training.

In its effort to build capacity statewide to address the needs of students with reading difficulties, including those identified with SLD and SLD/Dyslexia, the CSDE, in collaboration with the SERC, made the following nine, free online webinars available to districts. Webinars 1-3 are included in an online module, available to educator preparation programs (EPPs) (see #10 below).

- 1. Increasing Awareness of SLD/Dyslexia: Implications for CT Educators
- 2. Using Literacy Screening Data to Support Students with Reading Difficulties
- 3. Remediating and Accommodating Students with SLD/Dyslexia at the Secondary Level
- 4. Identifying Students with SLD/Dyslexia: An Online Module
- 5. It's Never Too Late: How to Motivate and Teach Older Struggling Readers with SLD/Dyslexia
- 6. Case Study Review of a CT Student with SLD/Dyslexia
- 7. Identifying Students who are Gifted and Talented and Have SLD or SLD/Dyslexia
- 8. Distinguishing Between Typically Developing English Learners and Students with Reading Difficulties
- 9. SLD/Dyslexia: Connecting Research to Practice in Connecticut
- 10. Online Module for EPPs

The CSDE, in collaboration with the RESCs, sponsored six, free cohorts of "Systematic Teaching of Basic Literacy Skills" available to districts. Participants learned systematic, structured methods for teaching decoding, encoding, oral, and written expression to students with learning disorders and specific language disabilities.

Additionally, as part of its Structured Literacy Program Training Series, the CSDE, in collaboration with the SERC, provided the following sixteen, free training sessions available to districts.

- 1. Wilson Reading System Introductory Training (5 sessions)
- 2. Wilson Just Words Virtual Launch Workshop (2 sessions)
- 3. Orton-Gillingham Introductory Training Program (5 sessions)
- 4. Lindamood Bell Phoneme Sequencing Program for Reading, Spelling, and Speech (2 sessions)
- 5. Lindamood Bell Visualizing and Verbalizing for Language Comprehension and Thinking (1 session)
- 6. Lindamood Bell Seeing Stars (1 session)

CONNi4/DBI Project Leadership Team

The DBI Leadership Team meets bi-weekly to monitor the progress of the CONNi4/DBI project. Members of the DBI Leadership Team include BSE staff members and researchers at the University of Connecticut (UConn). During DBI Leadership Team meetings, the team discusses the development of training and implementation resources and materials, data gathered from the districts/schools participating in Cohort 1, recruitment of districts/schools for Cohort 2, the deliverables, timeline, and outcomes of the project, and information and communications regarding the SSIP/SiMR and the CONNi4/DBI project to be shared with stakeholders, including the State Advisory Council on Special Education (SAC) and CT's PTI.

The CONNi4 project consists of a series of PL activities: 1) DBI Launch training, which provides: an overview of the CONNi4/DBI project, information on the importance of intensive intervention, how DBI aligns with multi-tiered systems of support (MTSS) and specially-designed instruction, the steps of the DBI process (pre-DBI data review and selection of an evidence-based intervention, progress monitoring, diagnostic assessment, and intervention adaptation), the conditions needed for DBI success (leadership, capacity and infrastructure, and communication and collaboration), and an opportunity for teams to create a DBI plan using a case study; 2) Job-embedded PL (i.e., District DBI Leader Check-ins, School DBI Team Meetings, Teacher DBI Check-ins); 3) DBI Diagnostic Assessment and Adaptation PD; 4) Cross-District Site Visits; and 5) Cross-Cohort DBI Summit. Surveys are completed by participants, consisting of items corresponding to assessment and intervention skills and beliefs, frequency of data-based decision making at the district/school level, implementation of evidence-based practices, reflection activities corresponding to the training, and an evaluation.

The UConn Research Team meets weekly to discuss the scope of work, provide updates on job-embedded PL and the desktop application/graphing system developed for DBI plans, which allows for data visualization to identify if response to intervention is strong or limited, and to create supplemental materials and resources. This team also recruits educators statewide for a DBI Advisory Board that meets at least once per year to provide input on project materials (e.g., reading intervention resource map, intervention selection tip sheet, fidelity form).

Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.

SSIP Leadership Team

The regularly scheduled virtual SSIP Leadership Team meetings have allowed the CSDE colleagues to discuss the content, implementation, and effectiveness of these initiatives, and restructure existing and create new activities in order to ensure that CSDE initiatives continue to evolve in a way that best supports the reading instruction of SWDs in the state. Through this collaborative effort, the SSIP Leadership Team worked to develop and maintain the Web-based repository of resources, plan for ongoing PL opportunities, and support the CONNi4 project, which will support LEAs in implementing the DBI process.

Online TA and Resource Library

The following list highlights some of the content resulting from this improvement strategy and the associated metrics illustrate the short-term outcomes that were achieved.

- CT-SEDS Preview Series Page views: 13,406
- Specific Learning Disability (SLD) Preview Series Page views: 4,421
- Session 1: Overview views: 639
- Session 2: Subject-Specific Worksheets views: 577
- Session 3: Multidisciplinary Evaluation Report views: 440
- Session 4: Understanding Common Profiles of Reading Disabilities views: 313
- Session 5: Understanding a Pattern of Strengths and Weaknesses views: 118

While quantitative metrics data reviewed to evaluate the outcome of individuals accessing the electronic repository of resources developed during FFY 2019, FFY 2020, and FFY 2021 showed that a high number of individuals viewed or downloaded this information over the past 12 months, qualitative data in the form of stakeholder input yielded additional valuable information regarding the topics and content of the resources posted this past year. Feedback on the resources was received from a diverse group of individuals including district administrators and teachers, parents, parent advocates and attorneys throughout the state, via Office Hours and ongoing PL opportunities, which suggest that the newly developed resources were generally regarded as timely, appropriate, accessible, and practical. Although the ever-changing educational landscape provided a challenge in finalizing and releasing some of the guidance quickly, CSDE staff members worked extremely hard to be responsive to the immediate needs of the state's school districts and will continue to work to provide helpful quidance, TA, and resource documents moving forward.

Ongoing Professional Learning

Several activities were planned during the FFY 2021 as part of ongoing PL activities. The following list highlights the PL offerings from this improvement strategy and the associated metrics illustrate the short-term outcomes that were achieved.

Two robust trainings were made available to districts to assist in the implementation of the new IEP and CT-SEDS. In total, 5,910 educators participated in these sessions. Below is a breakdown of total participants for each training.

- 1. CT IEP Quality Training
- Fall 2021 PILOT: 1,010 educators (from 20 Pilot districts) trained across 20 sessions (virtual, in-person, hybrid)
- Spring 2022: 2,611 educators trained across 55 sessions (virtual, in-person)
- 2. CT-SEDS Expert User Training
- Summer 2022: 2,289 educators trained across 52 training sessions (virtual)

Nine SLD and SLD/Dyslexia online webinars were made available to districts and one online module was made available to EPPs. In total, 1,549 participants attended these online sessions. Below is a breakdown of total participants for each online offering, as well as participants response to two evaluation prompts: "As a result of this session, I have increased my knowledge and skills" and "The information was useful and relevant and will assist with informing my practice".

- 1. Increasing Awareness of SLD/Dyslexia: Implications for CT Educators: 196
- 89% strongly agree or agree; 91% strongly agree or agree
- 2. Using Literacy Screening Data to Support Students with Reading Difficulties: 110
- 91% strongly agree or agree; 93% strongly agree or agree
- 3. Remediating and Accommodating Students with SLD/Dyslexia at the Secondary Level: 126
- 79% strongly agree or agree; 83% strongly agree or agree
- 4. Identifying Students with SLD/Dyslexia: An Online Module: 51
- 74% strongly agree or agree; 84% strongly agree or agree
- 5. It's Never Too Late: How to Motivate and Teach Older Struggling Readers with SLD/Dyslexia: 80
- 82% strongly agree or agree; 85% strongly agree or agree
- 6. Case Study Review of a CT Student with SLD/Dyslexia: 131
- 82% strongly agree or agree; 86% strongly agree or agree
- 7. Identifying Students who are Gifted and Talented and Have SLD or SLD/Dyslexia: 46
- 71% strongly agree or agree; 93% strongly agree or agree
- 8. Distinguishing Between Typically Developing English Learners and Students with Reading Difficulties: 95
- 88% strongly agree or agree; 86% strongly agree or agree
- 9. LD/Dyslexia: Connecting Research to Practice in Connecticut: 39
- 10. Online Module for EPPs: 675

The Structured Literacy Series, "Systematic Teaching of Basic Literacy Skills," in which participants: defined and modeled strategies to teach students who have specific reading disabilities; identified skills needed to develop basic proficiency in reading and spelling; and learned the developmental progression of oral language skills that prepare students for reading proficiency, was offered across six cohorts during the FFY 2021. In total, 104 participants attended these sessions.

The Structured Literacy Program Training Series provided sixteen training sessions during the FFY 2021. In total, 379 participants attended these sessions. Below is a breakdown of total participants for each different training offered.

- 1. Wilson Reading System Introductory Training (5 sessions): 124
- 2. Wilson Just Words Virtual Launch Workshop (2 sessions): 39
- 3. Orton-Gillingham Introductory Training Program (5 sessions): 123
- 4. Lindamood Bell Phoneme Sequencing Program for Reading, Spelling, and Speech (2 sessions): 33
- 5. Lindamood Bell Visualizing and Verbalizing for Language Comprehension and Thinking (1 session): 30
- 6. Lindamood Bell Seeing Stars (1 session): 30

CONNi4/DBI Leadership Team

The CONNi4/DBI project is currently in the initial implementation phase with four districts/six schools participating in Cohort 1. Forty-six educators participated in the two-part DBI Launch Training. Feedback was collected from all participants. During session 1, 100% of participants agreed or strongly agreed that all of the training objectives were met, the training activities were useful for reinforcing concepts, and the training activities were useful for thinking about practice. During session 2, 95% of participants agreed or strongly agreed that all training objectives were met and 90% of participants found the training activities useful for reinforcing concepts and thinking about their practice.

Participants receive ongoing, job-embedded PL through District DBI Leader Check-ins, School DBI Team Meetings, and Teacher DBI Check-ins. During the first round of School DBI Team Meetings, DBI plans were created for 15 students, ranging from first through fifth grade. Thirteen of the 15 students (87%) receive special education/related services. Ten of the individuals providing the interventions are special education teachers and three individuals are literacy specialists/interventionists. Fidelity checklists were created to monitor the success of the DBI implementation. Fidelity of the first round of School DBI Team Meetings, ranged from 89% to 100%, and ranged from 78% to 100% during the second round of School DBI Team Meetings. A protocol is sent to School DBI Teams in advance of the meeting in order to assist in meeting preparation and facilitation. During the second round of School DBI Team Meetings, when asked to categorize student response to intervention, based on the progress monitoring data collected, the response was categorized as Strong for 9 of 15 students and was categorized as Limited for 6 of 15 students.

Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)

NO

Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.

SSIP Leadership Team

A key infrastructure improvement strategy for successful SSIP implementation and evaluation will be the continuous enhancement of intra-agency collaboration. The BSE's joint efforts with colleagues in the Academic, Turnaround, and Performance Offices, as well as the Center for Literacy Research and Reading Success and the Office of Dyslexia and Reading Disabilities (within the Talent Office) will continue to be critical in supporting districts in providing effective reading instruction to SWDs in grades K-3 in the upcoming year.

Considering the reading needs of SWDs during the Alliance District improvement planning meetings as well as promoting the disaggregation of data by specific subgroups will help to ensure that the district-level work targeted for the SIMR is embedded into the greater improvement efforts of the districts and not viewed as a separate, burdensome requirement. It is anticipated that a BSE staff member will attend planning meetings, review Alliance District applications, and act as a liaison with the Turnaround Office is expected to continue as a priority during the next reporting period.

Special attention will still need to be given to the social, emotional, and behavioral well-being of our students. Many students throughout the state have experienced personal and family health issues and deaths, housing and food insecurity, disengagement from the school community and challenges with returning to in-person instruction. In order for students to be available to learn and make academic progress, a holistic approach to assessing, understanding, and appropriately addressing their needs will be necessary during the upcoming year and potentially thereafter. SWDs may require more support in this area than their typical peers and focused intra-agency collaboration between the Office of Student Supports and the BSE will be important to the outcome of creating useful resources and supporting district staff in this area.

Online TA and Resource Library

The expansion of the Web-based repository to include new SSIP resources, further resources to support the implementation of the new IEP and the CT-SEDS, as well as additional resources as determined by the SSIP Leadership Team, and through other intra-agency meetings, will continue into the FFY 2022.

Ongoing Professional Learning

During the FFY 2022, the CSDE, in collaboration with the SERC and the RESCs, will continue to make available the IEP Quality Training and CT-SEDS Expert User Training. Additionally, the CSDE, in collaboration with the SERC, will continue to make available the nine, free online webinars to districts, as well as the free online webinar for EPPs during the FFY 2022. In addition, the CSDE, in collaboration with the RESCs, will sponsor another six, free cohorts of the series "Systematic Teaching of Basic Literacy Skills" during the FFY 2022. Finally, as part of its Structured Literacy Program Training Series, the CSDE, in collaboration with the SERC, will provide the following fifteen, free training sessions during the FFY 2022.

- 1. Wilson Reading System Introductory Training: 7 sessions
- 2. Orton-Gillingham Introductory Training Program: 5 sessions
- 4. Lindamood Bell Phoneme Sequencing Program for Reading, Spelling, and Speech: 1 session
- 5. Lindamood Bell Visualizing and Verbalizing for Language Comprehension and Thinking: 1 session
- 6. Lindamood Bell Seeing Stars: 1 session

CONNi4/DBI Leadership Team

The CONNi4/DBI project is a multi-year initiative between the CSDE and UConn. Cohort 2 will launch DBI during the 2023-24 school year. By the next reporting period, we will have identified two additional schools from each of the four districts currently participating in Cohort 1 and recruit three new districts with 2 schools/district to participate in Cohort 2. The schools in the new cohort will complete a revised version of the DBI Readiness Assessment. The questions will be revised based on lessons learned from working with Cohort 1. Additionally, participating schools will be asked to share artifacts during the readiness discussion to fully understand the infrastructure established to approach data-based decision-making, and how quantitative data about student progress are used when implementing research-based reading interventions. The UConn Team will continue to collect data throughout the implementation of the DBI project to evaluate a) student achievement, b) changes in educators' perceptions and skills, and c) how districts sustain, maintain, and scale up implementation of intensive intervention/tiered instruction. Furthermore, by the next reporting period all data from Cohort 1 will be reported.

List the selected evidence-based practices implement in the reporting period:

Connecticut Literacy Model

Ongoing Professional Learning of Evidence-Based Practices

CONNi4/DBI Project

Provide a summary of each evidence-based practices.

Connecticut Literacy Model

The CSDE, along with literacy initiative partners (i.e., UConn, Hill for Literacy, and Literacy How), have worked to implement and refine an intensive reading strategy to serve as a model for use by schools. The intensive reading strategy, known as the CT K-3 Literacy Initiative (CK-3LI) includes priority goals and actions that reading research has identified as effective for improving reading outcomes for Kindergarten through Grade 3 students, including students with disabilities and English Learners.

Ongoing Professional Learning of Evidence-based Practices

Through its SSIP efforts, the BSE remains committed to building district capacity to meet the needs of SWDs in the area of reading through the training of special education teachers statewide in the area of Structured Literacy (see "Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period." for details about specific training offerings). Structured Literacy is a highly explicit, systematic approach to teaching foundational skills and components of literacy.

CONNi4/DBI Project

The CONNi4 project implements data-based individualization (DBI). DBI is a specific way of implementing intensive intervention using a five-step process that involves intervention, progress monitoring, and adaptation. In step 1, pre-DBI data is reviewed to select an evidence-based intervention program aligned to the student's need. The program should be: a) validated by rigorous experimental studies; b) implemented with groups of students who have not responded to secondary prevention; and c) one used for secondary prevention but—in DBI—at the student's instructional level. Initially, interventionists provide small-group or individual instruction with only those adjustments agreed upon in collaboration with the school team. In step 2, progress monitoring is used to track student response to the intervention. Progress monitoring assessments should be: a) general outcome measures (usually) with reliability and validity for target skills; b) done weekly or more frequently; and c) used for secondary prevention but-in DBI-is at the student's instructional level. Progress should be evaluated relative to an aimline based on a pre-defined goal and adequate based on tracking the aimline. In step three, diagnostic assessment data are examined. These data include standardized assessments, teacher-made tests, and observations. Discussion focuses on how the data might reveal issues in the dimensions of the taxonomy. Step 4 involves the creation of a student-specific intensive intervention plan. During the meeting, the school-based team agrees on a plan that is based on the examination of the diagnostic assessment data, focuses on one or more areas of the taxonomy, and includes the ideas most likely to increase achievement. In step 5, the plan developed is implemented, student response to the intervention is tracked, and the school team cycles back to step 3 as needed. The interventionist implements the plan and tracks the student's progress closely, meeting with the school team every 5-6 weeks to evaluate the student's performance data relative to the student's aimline. If progress is strong, then intervention is continued but the team may choose to incorporate adaptation to further accelerate student progress and if the progress is inadequate, the team returns to step 3.

Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g. behaviors), parent/caregiver outcomes, and/or child /outcomes.

Connecticut Literacy Model

The CSDE, along with literacy initiative partners (i.e., UConn, Hill for Literacy, and Literacy How), have worked to implement and refine an intensive reading strategy to serve as a model for use by schools. The intensive reading strategy, known as the CT K-3 Literacy Initiative (CK-3LI) includes priority goals and actions that reading research has identified as effective for improving reading outcomes for Kindergarten through Grade 3 students, including students with disabilities and English Learners, which directly supports the State's SSIP and SiMR.

Ongoing Professional Learning of Evidence-based Practices

Through its SSIP efforts, the BSE remains committed to building district capacity to meet the needs of SWDs in the area of reading through the training of special education teachers statewide in the area of Structured Literacy (see "Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period." for details about specific training offerings). Structured Literacy is a highly explicit, systematic approach to teaching foundational skills and components of literacy, which supports the State's SSIP work and SiMR. Below

are examples of two of the trainings offered by the CSDE.

- 1. Orton-Gillingham Introductory Training Program: The program introduces the rationale for providing structured literacy instruction and the O-G Approach, which is based on best practices. Educators receive training in the components of language that underlie reading acquisition and a scope and sequence of instructional approaches appropriate for struggling learners.
- 2. Wilson Reading System Introductory Training: This course provides participants with an overview of the Wilson Reading System (WRS) 4th Edition curriculum. The course examines how WRS addresses the teaching of phonemic awareness, word identification, vocabulary, fluency, and comprehension through an integrated study of phonology, morphology, and orthography with students in grade 2 and above with persistent phonological coding deficits.

CONNi4/DBI Project

The CONNi4 project implements the DBI process through explicit, systematic, and strategic training and support for the participating districts and schools in the cohort. By the next reporting period, the six schools from four districts (Cohort 1) will have completed the first year of DBI implementation. Three new districts (2 schools per district) and two additional schools from the four districts in Cohort 1 will be recruited to participate in Cohort 2 and have received the refined version of the launch training based on lessons learned from Cohort 1. A DBI Coaching Cycle will be initiated, which includes a series of meetings. At the initial meeting, the UConn Coach will review the DBI process with the School DBI Team and work with the school on the selection of students. At the next meeting, student progress monitoring data will be discussed along with adaptations that may need to be made to the delivery of the intervention based on the student response to intervention. The UConn Coach will provide modeling throughout the first and second meeting. The third meeting consists of reviewing the adaptations made to the student intervention and discussing implementation fidelity. After this meeting, the UConn Coach begins completing site visits to monitor implementation fidelity. At the fourth meeting, the School DBI Team discusses if additional students may benefit from DBI. The School DBI Team leads this meeting with support from the UConn Coach. At the fifth meeting, the DBI Coaching Cycle begins for a new student, and the School DBI Team will lead this meeting along with all other meetings in this DBI Coaching Cycle, with support from the UConn Coach. The DBI process will support the progress of the State's SiMR through this intensive intervention implementation initiative.

Describe the data collected to monitor fidelity of implementation and to assess practice change.

Connecticut's Literacy Model

CK-3LI was evaluated through a series of rigorous research studies that meet the Every Student Succeeds Act (ESSA) evidence standards and recommendations for selecting evidence-based practices. Results indicated statistically significant impact on measures of phonemic awareness, word reading, and reading fluency with increasing effects across years of implementation. Results suggest that Connecticut's Literacy Model (CK-3LI) had a strong impact on key reading outcomes of students in participating schools and that impacts increased over multiple years of implementation.

Ongoing Professional Learning of Evidence-based Practices

The evaluation of professional learning opportunities is ongoing. In total, 379 participants attended these sessions. Below is a breakdown of participants response to two evaluation prompts: "As a result of this session, I have increased my knowledge and skills" and "The information was useful and relevant and will assist with informing my practice".

- 1. Wilson Reading System Introductory Training: 124
- 99% strongly agree or agree; 99% strongly agree or agree
- 2. Wilson Just Words Virtual Launch Workshop: 39
- 97% strongly agree or agree; 100% strongly agree or agree
- 3. Orton-Gillingham Introductory Training Program: 125
- 99% strongly agree or agree; 98% strongly agree or agree
- 4. Lindamood Bell Phoneme Sequencing Program for Reading, Spelling, and Speech: 33
- 100% strongly agree or agree; 100% strongly agree or agree
- 5. Lindamood Bell Visualizing and Verbalizing for Language Comprehension and Thinking: 30
- 100% strongly agree or agree; 100% strongly agree or agree
- 6. Lindamood Bell Seeing Stars: 30
- 100% strongly agree or agree; 96% strongly agree or agree

CONNi4/DBI Project

The CONNi4/DBI project is a multi-year initiative between the CSDE and the UConn. The first cohort of districts and schools began implementation during the 2022-23 school year, and the second cohort of districts and schools will begin implementation during the 2023-24 school year. By the next reporting period, we will have identified three new districts (2 schools per district) and two additional schools from the four districts in Cohort 1 to participate in Cohort 2. The DBI Leadership Team will have analyzed statewide summative assessment results for third grade students with disabilities, in addition to the student-level data from universal screening and progress monitoring assessments gathered through the DBI process, as well as data gathering from educators participating in Cohort 1.

Describe any additional data (e.g. progress monitoring) that was collected that supports the decision to continue the ongoing use of each evidence-based practice.

The data source used by the CSDE for the SiMR is the statewide ELA summative assessments: the Smarter Balanced (SB) Assessment and the Connecticut Alternative Assessment (CTAA), administered statewide to students in Grades 3-8 and 11 in the spring of 2022. The SiMR data are directly derived from the State's approved ESSA Accountability Index. See "Describe the data collected to monitor fidelity of implementation and to assess practice change." above for a summary of additional data collected during FFY 2021.

Provide a summary of the next steps for each evidence-based practices and the anticipated outcomes to be attained during the next reporting period.

Connecticut Literacy Model

The CSDE, along with literacy initiative partners (i.e., UConn, Hill for Literacy, and Literacy How), will continue to implement and refine an intensive reading strategy to serve as a model for use by schools. The intensive reading strategy, known as the CT K-3 Literacy Initiative (CK-3LI) includes priority goals and actions that reading research has identified as effective for improving reading outcomes for Kindergarten through Grade 3 students, including students with disabilities and English Learners, which directly supports the State's SSIP and SiMR.

Ongoing Professional Learning of Evidence-based Practices

Through its SSIP efforts, the BSE remains committed to building district capacity to meet the needs of SWDs in the area of reading through the training of special education teachers statewide in the area of Structured Literacy (see "Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period." for details about specific training offerings). Structured Literacy is

a highly explicit, systematic approach to teaching foundational skills and components of literacy, which supports the State's SSIP work and SiMR.

CONNi4/DBI Project

DBI will launch with the second cohort of districts and schools during the 2023-24 school year. By the next reporting period, we will have identified three new districts (2 schools per district) and two additional schools from the four districts in Cohort 1 to participate in Cohort 2. The participants in Cohort 2 will undergo the same project activities as the participants in Cohort 1, however refinements are already being made based on lessons learned throughout the implementation with Cohort 1.

Does the State intend to continue implementing the SSIP without modifications? (yes/no)

YES

If yes, describe how evaluation data support the decision to implement without any modifications to the SSIP.

SSIP Leadership Team

The CSDE's infrastructure has improved through the development of an SSIP Leadership Team.

Online TA and Resource Library

While quantitative metrics data reviewed to evaluate the outcome of individuals accessing the electronic repository of resources showed that a high number of individuals viewed or downloaded this information, qualitative data in the form of stakeholder input yielded additional valuable information regarding the topics and content of the resources posted. Feedback suggest that the newly developed resources were generally regarded as timely, appropriate, accessible, and practical.

Connecticut's Literacy Model

Results suggest that Connecticut's Literacy Model (CK-3LI) had a strong impact on key reading outcomes of students in participating schools and that impacts increased over multiple years of implementation.

Ongoing Professional Learning/Ongoing Professional Learning of Evidence-based Practices

Results suggest that these ongoing PL opportunities, including ongoing PL of evidence-based practices, had a strong impact on participating educators.

CONNi4/DBI Leadership Team/Project

While we are only in our first year of DBI implementation, preliminary quantitative and qualitative results suggest the CONNi4/DBI project had a positive impact on participating districts/schools, teachers, and students.

Evaluation data for infrastructure and evidence-based practices support the decision to implement the SSIP without any modifications. However, a variety of data will continue to be collected and analyzed; data-based modifications to the SSIP will be made, if necessary.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The Part B results indicator data targets were set during the previous year. Over a period of five months, the CSDE solicited stakeholder input on the indicator targets for each FFY (2020-2025) during discussions with a diverse group of stakeholders, including parent representatives across each of the six regions of the state. The CSDE conducted 21 virtual meetings with interpreters available for participants to solicit broad stakeholder input. The participants of these sessions were sent follow-up surveys to capture input that was not provided during the meetings. The survey was also made available to the public through the newly created State Performance Plan Website. Extensive and thoughtful consideration was given to the intersection of improvement activities and the targets for performance of students with IEPs. Additionally, student feedback was collected via a live interactive presentation through Connecticut's Youth Advisory Council. As such, the CSDE and its SPP/APR stakeholders did not identify a need to revise any of the indicator targets during FFY 2021. Additionally, we are still seeing the impact of the COVID-19 pandemic and remote learning on some of the data and think it prudent not to revise any targets until the data stabilize.

A virtual meeting was held with the State Advisory Council on Special Education (State Advisory Panel) to build capacity on understanding the progress of SSIP implementation and to solicit stakeholder feedback. Virtual presentations were also held for parent leadership forums, the Commissioner's Round Table for Parent Engagement, and parent informational sessions collaboratively facilitated by our Parent Training and Information Center (Connecticut Parent Advocacy Center). Input was received in the form of live comments/discussions and survey questions and was reviewed by CSDE staff to inform further development of Indicator 17.

Describe the specific strategies implemented to engage stakeholders in key improvement efforts.

Online TA and Resource Library

The CSDE employed multiple strategies to engage stakeholders with regard to the key improvement efforts that occurred during the FFY 2021.

- The Connecticut Parent Advocacy Center (CPAC), the State's PTI Center, attended a series of virtual meetings to provide input in several guidance documents revised with the implementation of the new IEP and the CT-SEDS. Additionally, the BSE, in conjunction with the CPAC, hosted multiple webinars for families regarding the new IEP and the CT-SEDS.
- Other stakeholder activities that occurred during FFY 2021 included the BSE Back-to-School Event; the BSE Office Hours meetings with a special educators; meetings with the Connecticut Council of Administrators of Special Education (ConnCASE) Executive Board; meetings with Regional ConnCASE Directors; and State Advisory Council on Special Education (SAC) presentations and updates. Engaging in meaningful dialogues with these groups helped to inform the content of the BSE guidance and the development of resources for the online library, specifically with regards to the implementation of the new IEP and the CT-SEDS.

SiMR/SSIP and CONNi4/DBI Project

The BSE obtained feedback regarding the SSIP/SiMR and the CONNi4/DBI Project from the SAC. The CSDE formed a SSIP stakeholder group to assist the agency with the development of Phase One of the SSIP. This group (described in the state's SSIP Phase One submission) provided the State with the expertise and diverse perspectives needed for planning and development. Since the submission of Phase One, the CSDE has been using the SAC as its primary stakeholder group for input (including the resetting of targets), feedback and dissemination of information related to the SSIP. SAC members must be individuals involved in, or concerned with the education of children with disabilities; and representative of the ethnic and racial diversity of, and the types of disabilities found in, the state population.

The SDE provided the opportunity for the UConn Team to attend in the 2-day IEP Quality Training to ensure alignment of the CONNi4/DBI Project with other statewide initiatives. The SSIP Leadership Team and the UConn DBI Leadership Team prepared and delivered a presentation at the BSE Back-to-School Event to share information about the CONNi4/DBI Project, answer questions from stakeholders, and recruit districts/schools for the Cohort. Additionally, a presentation was prepared and delivered during the SAC Indicator 17 (SSIP) and CONNi4/DBI Update Meeting. The presentation provided a review of the SSIP/SiMR, a review of SSIP activities, including the CONNi4/DBI Project, defined the DBI process, provided examples of each of the five DBI steps, and shared status updates of the implementation of the CONNi4/DBI project. After the presentation, there were opportunities for the stakeholders to ask questions and write comments in the chat. Additionally, a survey was made available to all participants and allowed them to confidentially share feedback and comments. Items on the survey included: a) additional questions stakeholders still had about DBI and the CONNi4 project, b) an opportunity to share how they felt the CONNi4 project would contribute to supporting the SSIP goal to increase the reading performance of all third grade students with disabilities, c) outcomes from the CONNi4 project that they are most interested in learning more about, d) how they would like to receive ongoing updates about the CONNi4 project, and e) feedback on DBI materials created for families and caregivers.

Furthermore, as part of the CONNi4 project, an Advisory Board has been established, consisting of educators from across the state, which meets at least once annually to provide feedback concerning the project's activities and its implementation design. The Advisory Board shall include teachers, administrators, and experts on intervention, progress monitoring, DBI implementation, and implementation science. In addition, research and community partners across the United States who have implemented DBI/MTSS provide ongoing feedback.

Work with stakeholders on the State Board of Education's five-year strategic plan will likely address reading achievement for all students with an emphasis on equity and closing the achievement gap for SWDs.

Were there any concerns expressed by stakeholders during engagement activities? (yes/no)

YES

Describe how the State addressed the concerns expressed by stakeholders.

Online TA and Resource Library

Similar themes have been identified by the various stakeholder groups that have been convened to support districts with the implementation of the new IEP and the CT-SEDS. Those themes have included. The BSE addressed these concerns expressed by stakeholders in the development/revision of guidance, resources, and tools, and in the offering of PL opportunities, which were added to the Online TA and Resource Library.

SiMR/SSIP and CONNi4/DBI

During the SAC Indicator 17 (SSIP) and CONNi4/DBI Update Meeting, several themes were identified by various stakeholders regarding the CONNi4 project and the DBI process. One theme shared amongst stakeholders was the importance of communicating with parents at the onset and throughout the DBI process regarding their child, including informing parents of their child's progress monitoring data; sharing with parents the specific intervention their child receives and how it addresses reading foundational skills, so they can support their child at home; including parents in the School DBI Team discussions regarding their child, so they are full, equal, and equitable partners in their child's education; and sharing information about the DBI process. Another theme discussed by stakeholders was if DBI would be accessible to all students with disabilities (i.e., students who are blind, visually impaired, or deaf-blind, students with emotional or behavioral issues, and students who are English Learners). A third theme related to the implementation of DBI, including: fidelity and feasibility, the importance of selecting both rural and urban districts for the cohort, and the potential for the CONNi4 project to be scaled up. The SSIP Leadership Team and UConn DBI Leadership Team addressed all questions, comments, and concerns raised during the meeting. DBI Family Materials were developed specifically for families about DBI and the DBI process to allow parents to fully understand and be informed about the process. Additionally, DBI training provided to schools/districts contain information on how to involve families in the DBI process, and how to use the DBI Family Materials to promote family engagement. The SSIP Leadership Team and UConn DBI Leadership Team will provide regular updates to the SAC on the status of the CONNi4 project by email and at future meetings.

Additional Implementation Activities

List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.

CT IEP Quality Training

New IEP document and the CT-SEDS

Provide a timeline, anticipated data collection and measures, and expected outcomes for these activities that are related to the SiMR. IEP Quality Training

- Background: During the 2020-21 school year, the BSE worked with the American Institutes of Research (AIR) to develop the CT IEP Quality Training materials. The CT IEP Quality Training was piloted in Fall 2021. Revisions were made to the materials, based on feedback from the pilot. The CT IEP Quality Training was launched statewide in Winter 2022 to "train the trainers" and build state and district capacity. During the summer following the 2021-22 school year, revisions will be made to the training materials, based on feedback from the state and district trainers. The CT IEP Quality Training is comprised of eight segments: IEP Basics, Present Levels of Performance, Measurable Goals and Objectives Part II, Measurable Goals and Objectives Part II, Supplementary Aids and Services, Secondary Transition, Special Education Service Delivery, and Progress Monitoring in the IEP. Participants in the CT IEP Quality Training will be able to understand how the IEP components create cohesive programs for students with disabilities; develop quality IEPs that (a) are grounded in a student's present levels of performance; (b) have aligned, rigorous, and measurable goals and objectives; and (c) have established progress monitoring processes; describe how educators in different roles contribute to the IEP development process; and understand how the IEP is documented in the new CT IEP form/CT-SEDS.
- Timeline: During the 2022-23, 2023-24, and 2024-25 school years, the CT IEP Quality Training will continue being implemented statewide. The CSDE is committed to a cycle of continuous evaluation and improvement of the materials and trainings throughout the implementation.
- Anticipated data collection and measures: Evaluation data will be collected from participants in the pilot, state and district trainers, and all participants in the statewide training, including, but not limited to, school and district administrators, special education leaders, special educators and related services personnel, general educators, approved private special education programs, state agency personnel, institutes of higher education, parents, advocacy groups, and youth.
- Expected outcomes that relate to SiMR: The CT IEP Quality Training will build statewide capacity in not only developing quality IEPs that are not only grounded in a student's present levels of performance, have aligned, rigorous, and measurable goals and objectives, and have established progress monitoring processes, but will build capacity to better identify a student's unique needs, design, implement, and monitor the specially-designed instruction and evidence-based interventions for each student, ultimately, improving instruction for and the performance of students with disabilities.

New IEP document and the CT-SEDS

• Background: In the 2018-19, the BSE began work with both an internal team and an external stakeholder group to develop the new IEP document in CT; stakeholder comments were open through October 2019. In September 2020, the CSDE entered into a partnership with the Public Consulting Group (PCG) to support its goals and vision of developing a comprehensive statewide Special Education Data System (CT-SEDS) to make available to all of its

local school district partners. CT-SEDS adaptive electronic IEP document is being designed to improve format and flow of information with intuitive, easy to use displays. The new system will include a parent portal for families to access their student's IEP and other important information as well as a language translation feature to ensure that parents receive information in their native language. The new and improved document will also assist PPTs in navigating the special education process, leading to the development of high-quality IEPs for Connecticut's students. During the 2020-21 school year, the BSE worked with PCG to design the CT-SEDS. The CT-SEDS Pilot Training was launched in Winter 2022. During the spring of the 2021-22 school year, revisions will be made to the CT-SEDS, based on feedback from the pilot.

- Timeline: The BSE is planning to implement the new IEP document and the CT-SEDS statewide in the 2022-23 school year. CT-SEDS Training will continue statewide through the 2024-25 school year, with ongoing technical support, as needed.
- Anticipated data collection and measures: In addition to the IEP Module, the CT-SEDS will also have a Services Plan Module, Section 504 Accommodation Plan Module, Gifted and Talented Module, and a Multi-Tiered Systems of Support (MTSS) Module. Data from the IEP Module, including Progress Reports, as well as data from the MTSS Module will be collected to determine the ELA performance of students with and without disabilities on progress monitoring measures.
- Expected outcomes that relate to SiMR: The year-to-year analysis of the achievement for students with disabilities will be used as a factor in determining the effectiveness of instruction and interventions, as well as the need for additional professional learning and technical assistance.

Describe any newly identified barriers and include steps to address these barriers.

- CSDE staff/time to commit to current plan assess current proposed staffing assignments and consider the need to revise the current SSIP implementation methodology
- Scaling up professional learning activities for SSIP consider increasing the role of other organizations to address SSIP professional learning support
- Ability to sustain current intra-agency partnerships (with the creation of two new offices) continue to expand current levels of communication and collaboration throughout the calendar year

The State has benefitted from both the virtual and in-person technical assistance opportunities provided by the National Center for Systemic Improvement (NCSI) and appreciates this additional support. We plan to continue our involvement with the Evidence-Based Practices (EBP) Collaborative and engage with other states in an effort to best support the SSIP and the reading achievement of students with disabilities.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

The State did not provide data for FFY 2020. The State must provide the required data for FFY 2021 in the FFY 2021 SPP/APR. Response to actions required in FFY 2020 SPP/APR

17 - OSEP Response

17 - Required Actions

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2023 will be posted in June 2023. Copy and paste the link below into a browser to view.

https://sites.ed.gov/idea/how-the-department-made-determinations/