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Writing an Effective FFY 2019 State Performance Plan/Annual Performance Report

December 3, 2020

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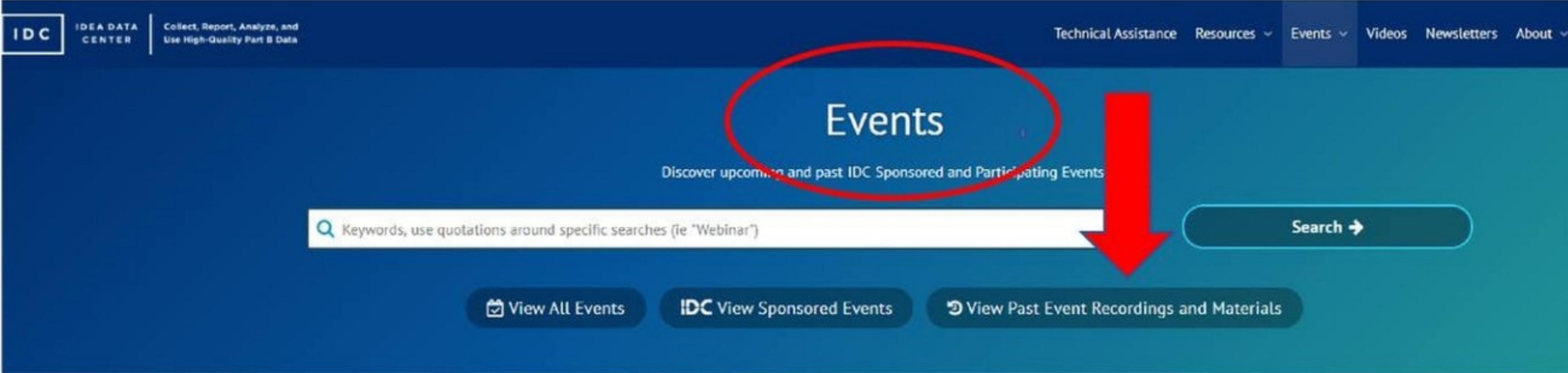
Nancy Johnson, NC Department of Public Instruction

Webinar Logistics

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Presenters

- Nancy O'Hara, IDC
- Chris Thacker, IDC
- Nancy Johnson, NC Department of Public Instruction, SPP/APR Coordinator, Exceptional Children Division

Agenda

- FFY 2019 State Performance Plan/Annual Performance Report (SPP/APR) reporting details

- Common challenges and solutions

- Selected indicator-specific challenges and solutions

- Writing tips, including North Carolina (NC) writing tips

Participant Outcomes

- Participants will have increased knowledge about effective techniques for complete and accurate SPP/APR writing

- Participants will be able to identify common mistakes related to SPP/APR writing and how to avoid or resolve them

- Participants will have increased understanding of how one state approaches the SPP/APR writing process and lessons learned from the approach

What is one word that expresses how you feel about the FFY 2019 SPP/APR?

frustrating
bored
got it
red tape
exhausted
checkbox
tedious
okay
ok
scared
intensive
worried
stressed
reserved
crazy
undecided
last
anxious
frustrated
compressed
rushed
overwhelmed
apprehensive
okay - is it over yet
new
proud
straightforward
easy
intimidating
nervous
routine
pushed
busy
ugh
fatigue
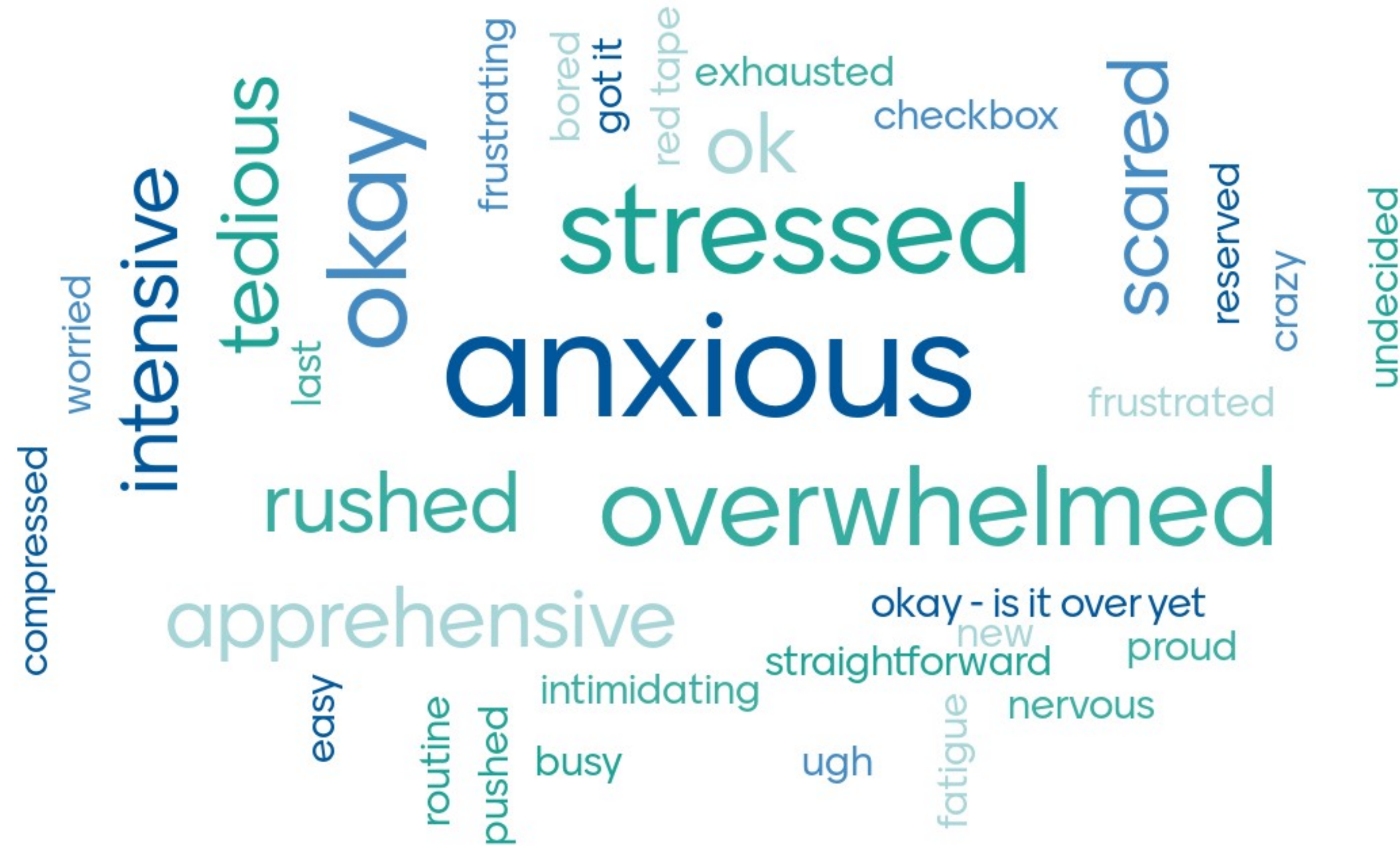
FFY 2019 SPP/APR Reporting Details

FFY 2019 SPP/APR Reporting Details

- FFY 2019 is due February 1, 2021
  - Reporting year is 2019-2020
  - Lag data or year before the reporting year is 2018-2019
  - No targets beyond FFY 2019 are required (or allowed by the system)
    - If a state has changed baseline (with explanation for revision), it also may need to submit new or revised targets for FFY 2019 with a description of the stakeholder input process
  - Include state's analysis of the reasons for slippage when appropriate

FFY 2019 SPP/APR Reporting Details (cont.)

- States must provide information to address any actions required by OSEP's response to the state's FFY 2018 SPP/APR

- For data affected by COVID-19, states must
  - Include information on the impact of COVID-19 in the SPP/APR introduction
  - Include in the narrative for each indicator impacted
    - The impact on data completeness, validity, and reliability
    - An explanation of how COVID-19 specifically affected the state's ability to collect the data for the indicator
    - Any steps the state took to mitigate the impact of COVID-19 on the data collection

OSEP Resources for Developing FFY 2019 SPP/APR

- Measurement table, instructions, and SPP/APR memo
  https://sites.ed.gov/idea/grantees/#SPP-APR,FFY19-SPP-APR-Package

- FFY 2019 SPP/APR template
  https://osep.grads360.org/#communities/pdc/documents/19755

What questions do you have about the OSEP instructions and materials for developing the FFY 2019 SPP/APR?

why are they opening so late!!

What date does the application open? I forgot.

Just a question about when the system will be open for us to input our data and narratives.

Ideas for writing COVID explanations beyond just saying COVID

Are the COVID comments to be related to data collection and quality, or effects on program, too?

Why is OSEP requiring a COVID response when all states are going through this?

covid gap language

if we are reporting 5 year olds in B5 for the first time, do we report a new baseline and target or just a baseline?

Do we need to submit information on technical assistance utilized?

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What questions do you have about the OSEP instructions and materials for developing the FFY 2019 SPP/APR?

Any details on the depth needed for stakeholder involvement would be helpful

How OSEP will display Indicator 3. Standard language on the assessment waiver would be helpful to stakeholders. We don't want stakeholders to think we just left this blank.

Can we have a canned statement for COVID-related (like Ind 3) since all states received a waiver?

How specifically will OSEP use the COVID responses?

How detailed OSEP is looking for us to be when explaining the data impact of five-year-old kindergartners.

B2 and students removed for covid

So OSEP does want a general statement about covid impact in Introduction section and then more specific in the individual indicators? I thought they only wanted specific information only by indicators.

Are we required to get stakeholder input on Covid effects?

None.

What questions do you have about the OSEP instructions and materials for developing the FFY 2019 SPP/APR?

None

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Common Challenges and Some Solutions for the SPP/APR

SPP/APR Introduction Challenges

- States must include links to two publicly posted sets of information
  - FFY 2018 SPP/APR
  - Reports on each LEA's progress meeting the FFY 2018 targets in the SPP/APR
- States must include descriptions of state systems of general supervision, technical assistance, and professional development
  - Not enough space for the descriptions of the various systems of general supervision
  - Systems descriptions are not updated from year to year

Introduction Solutions

- Make sure to address both pieces of information abut public reporting

- Confirm that LEA reports are publicly available and complete

- Double-check that the links work!

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Introduction Solutions (cont.)

Be sure to update the descriptions of your systems every year	Write out the comprehensive description of each system	Be aware of 8,000 character box limits Cut explanations of "internal" processes Describe at the public understanding level

Baseline Challenges

States do not provide justification or rationale for changing baseline that is persuasive

- Change in methodology

- Change in how they collect and/or what data they collect

- Change in instrumentation such as content of surveys

Do you expect to change baseline for any indicator in FFY 2019? If yes, please tell us why.

Nope	no	no
No.	Not this year!	No
Not if we can help it.	No	No

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Do you expect to change baseline for any indicator in FFY 2019? If yes, please tell us why.

Maybe, B5	nope	Nope
Indicator 6A due to K's going into Ind 5	Possibly	No way!
Yes for Indicator 5/6 for the five year olds	no	None

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Do you expect to change baseline for any indicator in FFY 2019? If yes, please tell us why.

Possibly 5 and 6	Maybe 5 or 6.?

Baseline Solutions

- Be clear about your rationale for changing baseline
  - Use specific statements about the changes
  - Consider discussing impact of the change that resulted in new baseline

Accepted Examples of Rationales From SPP/APRs

- "State updated the baseline year to 2017. Starting in 2017, state started reporting the 7-year extended adjusted cohort graduation rate (ACGR) as opposed to historically reported 4-year ACGR. Because the calculation method is different between the 4-year and 7-year ACGR, the state found the change of the baseline year to be appropriate."

- "State changed the baseline year to 2014, which is the year state made a large change to how the post-school outcome data were collected. The stakeholders advised the state to change the baseline year/data, and state agreed."

Target Challenges

Targets do not show improvement over baseline

- Targets must show improvement over baseline*
- Revised targets must have stakeholder input

*With few exceptions

Target Solutions

States must provide targets annually for each indicator

- Confirm targets for each indicator represent improvement over baseline data
- Stakeholder group(s) assisting in determining targets should be familiar with
  - Indicator content
  - Baseline data
  - Current status
- Stakeholders for individual indicators
  - May be a smaller sub-group from the overall SPP/APR stakeholders
  - May be multiple interest groups
  - Must receive a meaningful explanation about the individual indicator specific to the unique needs and circumstances throughout the state

Correction of Noncompliance Challenges

Providing complete descriptions

- Describing the process the state uses in the correct boxes

- Clearly stating the "state verified..." both implementation of the regulatory requirements and the individual corrections

- Clearly articulating that the state looked at new or updated data for implementing the regulatory requirements

Correction of Noncompliance challenges (cont.)

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

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

FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Correction of Noncompliance challenges (cont.)

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FFY 2018 Findings of Noncompliance Verified as Corrected

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Prong 2 of OSEP memo 08-09

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

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Actions taken if noncompliance not corrected

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FFY 2018 Findings of Noncompliance Verified as Corrected

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

Prong 1 of OSEP memo 08-09

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

FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Correction of Noncompliance challenges (cont.)

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

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FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Correction of Noncompliance Solutions

- Describe state actions not LEA actions so it is clear what the state did to verify the correction for each prong

- NC recommends completing the boxes in the order in which the state does the work

  - Complete the section about correction of each individual case of noncompliance first

  - Complete the section about the regulatory requirements second

NC Written Example: FFY 2017 Findings of Noncompliance Verified as Corrected

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

Thirty-four (34) of the thirty-eight (38) LEAs with Program Compliance Reviews and students with disabilities, ages 16 and older, had non-compliant findings in one or more student records. NCDPI staff reviewed additional (new) student records for each of the thirty-four (34) LEAs where non-compliance was identified and verified, as required, that all of the non-compliance had been systemically corrected in each LEA. NCDPI reviewed the new student records while on-site in the LEA or electronically through CECAS.

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

Thirty-four (34) of thirty-eight (38) LEAs with Program Compliance Reviews and students with disabilities, ages 16 and older, had findings of non-compliance in one or more student records. The LEAs that had identified non-compliance were required to submit a copy of each student's IEP that documented the correction of student specific noncompliance (112 individual student records) for NCDPI review and verification. If an IEP(s) could be accessed electronically through CECAS, the NCDPI Monitoring Consultants verified correction using the electronic submission/version of the IEP(s). NCDPI verified the correction of the 112 IEPs that had non-compliant findings related to the transition requirements.

Slippage Challenges

Clearly describing the reasons for slippage

- An analysis of data and explanation of why the state thinks the slippage occurred
  - Many states instead describe what they are doing about the slippage

Slippage Solutions

Conduct an analysis of your data to determine the "Why" of the slippage

- Were there regional challenges?

- Were there disruptions to a system or a process?

- Were there new state or local regulations or procedures?

NC Example of Slippage Explanation—Indicator 13

The source of the data provided for this indicator is monitoring from a five-year cycle of on-site program reviews. Since different LEAs are reviewed each year, the data and rates of compliance have fluctuated for the last few years. In 2017-18 North Carolina conducted on-site Program Compliance Reviews each year in thirty-eight (38) LEAs with students age 16 and above. During the 2018-19 school year, data for this indicator were gathered through on-site Program Compliance Reviews conducted in fifty-five (55) LEAs, including eighteen (18) traditional LEAs, thirty-five (35) charter schools and two (2) state-operated programs (SOPs). Although that was an increase of 44% in the number of LEAs with on-site reviews, the number of IEPs reviewed decreased by 28% because 67% of the LEAs (charter schools and SOPs) have smaller numbers of students age 16 and above, which may have contributed to the slippage.

The training model used for the last few years may have also contributed to slippage and fluctuation of data. The NCDPI Exceptional Children Division, with the assistance of stakeholders that included other agencies, IHEs, other divisions within DPI, LEAs, parents and advocacy groups, developed a transition toolkit (an electronic live binder). For several years, staff provided training through a training of trainers model in each of the State's eight regions. All LEAs had the opportunity to send a representative(s) to participate in training to become a trainer in the use of the toolkit. Trainers were expected to train staff within their districts, and districts were expected to develop monitoring plans that identified their specific needs regarding compliance. The EC Division evaluated the training and its impact on transition outcomes and determined it did not have enough of a positive impact on transition outcomes as desired/expected. This was at least partially due to training not being re-delivered with fidelity, the amount of staff turnover following the initial training of trainers provided in the eight regions of the state, and lack of/limited LEA monitoring plans developed by the LEAs to identify their needs regarding compliance.

What are some ways your state analyzes data to describe slippage for any of the indicators?

compare LEA data from year to year	Mostly, we disaggregate the data and look for patterns.	Comparing demographic groups from year to year to identify differences
year to year comparison (20/20)	Our data manager identifies the districts with the biggest change in data and we interview staff with those districts.	drill down into LEA data and monitoring results
We consider statewide changes that may have impacted the data.		

Indicator-Specific Challenges and Solutions

Indicator 4 Challenges

- Reporting and using the correct number of LEAs from the correct year
- Reporting the minimum n size clearly and the number of LEAs excluded due to n size

Indicator 4 Solutions

- Make the number of LEAs match the number reported in the previous year's SPP/APR (FFY 2018) in the <u>introduction</u>

- Make the math easy to follow
  - Total LEAs in the state (based on previous year)
  - Minus number who were excluded due to n size = the number of districts

Number of districts that have a significant discrepancy	Number of districts in the State [if the State answers yes to whether they have established a minimum n-size, change this heading to "Number of Districts that met the State's minimum n-size"]	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage

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Indicator 8 Challenges

Describing how the demographics of the parents *responding* to the survey are representative of the demographics of children receiving special education services

Indicator 8 Solution—North Carolina Example

- Analyzed representativeness by race/ethnicity, grade level, and disability category

- Typed data/information to appear like a chart

- Used +/- 3 percentage points as acceptable range for over/under-representation

Indicator 8 Solution—North Carolina Example (cont.)

Surveys ....Distributed (%)...............Returned (%).............Difference (percentage points)

DISTRIBUTION by GRADE
Preschool... 23% .... 28% .... +5
School-Age.. 77% .... 72% .... - 5

DISTRIBUTION by DISABILITY CATEGORY
Autism.. 7% .... 16% .... + 9
Developmental Delay...................... 12% .... 14% .... +2
Intellectual Disability......................... 9% .... 8% .... -1
Other Health Impairment................ 14% .... 15% .... + 1
Specific Learning Disability.............. 29% .... 25% .... - 4
Speech-Language Impairment.......... 22% .... 16% .... - 6
Other... 7% .... 6% .... - 1

Indicator 8 Solution—North Carolina Example (cont.)

- Strategies to ensure response rate is representative of demographics
  - Disseminate surveys electronically
  - Use the Division's new parent listserv to communicate information about the survey
  - Monitor process and responses more closely
  - Seek input from stakeholders regarding potential changes to the system and the survey

Indicator 14 Challenges

Describing the analysis of data and whether the response data are representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school

Indicator 14 Solution—North Carolina Example

- Analyzed representativeness by gender, race/ethnicity, disability category, and type of exit

- Typed data/information to appear like a chart

- Used +/- 3 percentage points as acceptable range-for over/under-representation

Indicator 14 Solution—North Carolina Example (cont.)

School Leaver ....Total School Exiters (%)............Completed Survey (%).........Difference
Characteristics   (percentage points)

GENDER

Female.. 34% .... 35% .... +1
Male .... 66% .... 65% .... -1

RACE

African American............................. 35% .... 33% .... -2
Hispanic.. 14% .... 12% .... -2
White... 45% .... 47% ....+2
Other Races.................................... 6% .... 8% ....+2

TYPE OF EXIT

Graduated....................................... 78% .... 80% .... +2
Certificate....................................... 4% .... 6% .... +2
Dropped Out.................................... 17% .... 13% .... - 4
Reached Maximum Age..................... 1% .... 1% .... +/-0

Indicator 14 Solution—North Carolina Example (cont.)

Strategies to ensure responses are representative of demographics

- NC asked LEAs to probe further if exiters indicated they did not want to respond to the survey

- State further analyzed information collected, particularly from those who dropped out, to
  - Identify additional steps that can be taken to increase the response rate for students who have dropped out of school
  - Share strategies with LEAs to use when conducting survey interviews
  - Use in future trainings about how to better engage those students who dropped out of school

Writing Tips, Including NC Writing Tips

General Overall Tips

- Start early
  - Lag year data are ready early as are other data!
- Have someone else read
  - For understanding
  - For meeting the requirements as indicated in the template
- Take advantage of the IDC SPP/APR review process
- Keep to the content requested; avoid adding extraneous information
- Use your technical writing skills
- Keep in mind both OSEP and a variety of stakeholders are your audience

Specific Tip for FFY 2019—Include Information About COVID-19

- The impact on data completeness, validity, and reliability

- An explanation of how COVID-19 specifically impacted the state's ability to collect the data for the indicator

- Any steps the state took to mitigate the impact of COVID-19 on the data collection

NC Plans for Addressing Impact of COVID-19

- Added COVID-19 delay reasons to Indicators 11 & 12
  - Indicator 11: 67.05% of delays due to COVID-19
  - Indicator 12: 78.42% of delays due to COVID-19

- Weekly Office Hour WebEx Meetings
  - Respond to content & technical questions about Indicators 7, 11, 12, & Child Count

- COVID-19 Impact Focus Groups
  - Rural/small, Urban/small, charter schools, parents, students
  - Input about COVID-19 impact and strategies for mitigation

What other tips can you offer your colleagues?

Now that you have heard some strategies from both IDC and North Carolina, what is one word that expresses how you feel about the FFY 2019 SPP/APR?

Contact Us

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Evaluation

The evaluation poll questions will appear to the right.

For More Information

Visit the IDC website
http://ideadata.org/

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