## Essential Elements

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| **Indicator Description** |
| Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. |
| **Measurement**[[1]](#footnote-1) |
| 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 a 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).  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.  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.  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. |
| **Stakeholder Engagement:** Describe the process the SEA uses to engage stakeholders for the SPP/APR that includes broad stakeholder input and includes (a) the number of parents (parent members of organizations and individual parents) engaged in setting targets, analyzing data, developing improvement activities, and evaluating progress; (b) description of activities the SEA conducted to increase the capacity of diverse groups of parents to support the development of implementation of activities to improve outcomes; (c) the mechanisms and timeline for soliciting input for target setting, analyzing data, developing improvement strategies, and evaluating progress; and (d) mechanisms and timelines for making the results of the target setting, data analysis, development of improvement strategies, and evaluation available to the public. |
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| **Target Setting:** This is a compliance indicator. |
| Target must be 0%. |
| **Online SPP/APR Submission Tool Information:** Describe login information, who has access, how to gain access for additional staff, and how to access online SPP/APR submission tool support. |
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| **Data Stewards:** Provide titles and names, contact information, department, and any notes on persons responsible for data collection, validation, analysis, and submission. If there are multiple parties responsible or involved in the process, list them all. |
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| **Data Source Description:** Provide a short description of the database or data system the SEA uses to process data for this indicator. Consider connecting to 618 Child Count and Educational Environments data protocol for description of data. |
| 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.  Provide racial/ethnic disproportionality data for children ages 5 and enrolled in kindergarten 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.  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 2016 (i.e., after June 30, 2017). |
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| **State Collection and Submission Schedule:** Provide a list of dates necessary for this data collection, including when the data collection period opens, when data are due from the local education agencies (LEAs), and when assigned SEA staff pull the data after the collection closes. |
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**Processes**

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| **Collection:** Provide detailed information about the origin and collection of the data, including titles of persons responsible. |
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| **Data Validation:** Describe the data cleaning processes and any other processes the SEA uses to ensure high-quality data. |
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| **Data Analysis:**[[2]](#footnote-2) Describe the process for data analysis. |
| Describe the SEA’s process for making 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.). |
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| **Response to OSEP-Required Actions:** Describe the procedures for reviewing Office of Special Education Programs (OSEP) feedback. Following the release of the OSEP determination, indicate who reviews OSEP feedback and how assigned SEA staff make the plan to address concerns and create a response. |
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| **Report on Correction of Identified Noncompliance:** Describe the databases, sources, and persons responsible for conducting the verification of correction reported in the previous SPP/APR.If the SEA reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2020 SPP/APR, the data for FFY 2019) and the SEA did not identify any findings of noncompliance, provide an explanation of why the state did not identify any findings of noncompliance. |
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| **Internal Approval Process:** Describe any internal approval processes (e.g., who must sign off, timelines). |
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| **Submission:** Describe the process for entering the data and analyses into the online SPP/APR submission tool. Include information about the person authorized to certify the final report. |
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| **Clarification:**[[3]](#footnote-3) Describe the process the SEA uses to prepare a response to OSEP’s request for clarification. |
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| **Data Governance:** Describe the process for reviewing potential or actual future changes to the data collection and associated requirements. |
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| **Public Reporting:** Describe the process and format for publicly reporting the performance of each LEA against the target of the state’s SPP/APR. Note where the SEA posts the state's SPP/APR and the performance of the LEAs against the state targets. |
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1. **Measurement:** Part B State Performance Plan (SPP) and Annual Performance Report (APR) Part B Indicator Measurement Table: For Federal Fiscal Year (FFY) 2020 Submission. [↑](#footnote-ref-1)
2. **Data Analysis:** Review data year to year, looking for patterns statewide and within LEAs, outliers, information about whether targets are met or not met, and slippage. [↑](#footnote-ref-2)
3. **Clarification:** OSEP generally sends clarification requests to SEAs about 60 days post submission. [↑](#footnote-ref-3)