

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

**For reporting on
FFY 2020**

New Hampshire



PART B DUE February 1, 2022

**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

To meet its responsibility under federal law, New Hampshire has developed a system of general supervision that monitors the implementation of the Individuals with Disabilities Education Act (IDEA) by school districts. This general supervision system is used to identify and correct noncompliance with IDEA, the New Hampshire Education Laws and the New Hampshire Standards for the Education of Children with Disabilities. This system is also designed to promote continuous improvement for the provision of a free appropriate public education (FAPE).

There are five components that comprise NH's general supervision system. It is important to note that although the components are presented separately here, they each connect, interact and articulate requirements to form a comprehensive system. The general supervision system for NH has the following components:

1. State Performance Plan (SPP)
2. Integrated Monitoring Activities
 - A) District Determinations
 - B) Compliance and Improvement Monitoring Process including Selection Process
 - i. Policies, Procedures, and Effective Implementation
 - ii. Improvement, correction, incentives and sanctions
3. Fiscal and Data Management (processes and results)
4. Effective Dispute Resolution
5. Targeted Technical Assistance and Professional Development

The SPP is described in the Executive Summary. The remainder of the components are described in the General Supervision and Technical Assistance sections.

The State Performance Plan (SPP) provides a framework for system change for special education in New Hampshire. The data in the SPP provides the Bureau with a baseline to work from in our work with districts. It incorporates a variety of methods including the use of desk audits, on-site monitoring and data collection to determine performance and compliance. Through the analysis of the data in the SPP for each indicator, the Bureau provided Targeted Technical Assistance to districts. The districts reviewed their policies, procedures and implementation practices to determine if the district was effectively implementing the requirements of each of the indicators. This analysis and TA can result in improvement and correction of practices as well as incentives or sanctions as necessary. This is consistent with OSEP Memo 09-02 and as laid out in IDEA and New Hampshire laws. Throughout the plan, please note the change in the name of the Bureau. New Hampshire's Bureau is now called the Bureau of Special Education Support (Bureau). The new name is the result of work with our new division director and our recognition that our work intentionally focuses on Special Education. The Bureau has restructured to create three offices to focus our work and provide for more focused support and assistance to districts. We have the following offices: the Office of Training and Monitoring, the Office of Finance and Data Management and the Office of Special Programs.

Additional information related to data collection and reporting

Several of our indicators have been impacted by COVID and this is noted within the section for each of those indicators. Education Consultants working with districts around each indicator worked with each district who may have had a portion of their data impacted by COVID. They provided technical assistance in reporting data. The State Director spoke about different data sets that may be impacted by COVID in the bi-weekly calls with district directors and other stakeholders. In the beginning of the COVID outbreak as we started to see the difficulties that would arise in data collection for indicators, we worked with districts to document any factors created by COVID that may have impacted their data. This helped when it came time to review and report each data set in determining the impact and providing technical assistance to districts.

Number of Districts in your State/Territory during reporting year

175

General Supervision System:

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

2. Integrated Monitoring Activities:

New Hampshire integrates monitoring activities across several key components of the general supervision system through the Compliance & Improvement Monitoring (CIM) process, grants management for federal funds review and indicator monitoring as part of the SPP. CIM and grants management are covered in the subsequent paragraphs.

A. District Determinations Process:

As part of the SPP process, the Bureau annually reports to the public on district performance compared to the State and established targets which may be accessed here: <https://iireport.education.nh.gov/>. As required by the Individuals with Disabilities Education Act (IDEA), 34 CFR §300.600, the Bureau makes determinations annually on the performance of each public school district regarding the implementation of IDEA:

<https://www.education.nh.gov/who-we-are/division-of-learner-support/bureau-of-student-support/special-education/district-determinations>

B. Compliance & Improvement Monitoring (CIM) Process-

The Bureau's Office of Training and Monitoring (OTM).currently includes one administrator, 4 education consultants, a program specialist and a program assistant to complete the work of Indicator Monitoring, Program Approval and the Compliance and Improvement Monitoring (CIM) process. Indicator monitoring involves review of each districts data and subsequent technical assistance to districts based upon their data as described in the State Performance Plan Section of this description. The OTM followed a standard process to select districts to participate in the CIM process. This process was described in FY' 15 Memo #18 (which may be accessed here: https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/2020-04/fy15_memo_18_appendix_2_district_selection_rubric.pdf)

The district selection rubric may be found here:

<https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/2020/determination-rubric.pdf>

The CIM process is a comprehensive review of student files, personnel credentials, district special education forms, district special education programs and district special education procedures. Districts are offered technical assistance to support district personnel in their understanding of the CIM

process approximately 10 months prior to the onsite monitoring. Districts have access to technical assistance before, during and after the monitoring process. Student files and special education programs are monitored onsite and the review of credentials, forms and procedures are reviewed through desk audit. Findings and corrective actions are provided to districts in a report which is presented in a meeting with district administration which occurs about 45 days after the onsite date. The report is posted here: SAU Compliance Monitoring Reports | Department of Education (nh.gov)

Six months after the report date, the district selects new student files, in accordance with the previously determined criteria, which are reviewed by the Bureau. Districts that are in need of intervention or substantial intervention are provided with a contact person within the Bureau who works with the district to examine district data and findings with the intention of identifying a root cause(s). A plan to address the root cause(s) is created by the district in consult with Bureau staff to include universal, targeted or intensive TA (description below).

Once a district has shown corrective action regarding the implementation of regulations, a completion letter is sent to the district and no further action is needed. The district remains out of the district selection process for the next five years. An overview of the district selection process, CIM process, forms used for the CIM process, and district reports back to 2013 may be found here: <https://www.education.nh.gov/who-we-are/division-of-learner-support/bureau-of-student-support/special-education/compliance-improvement-monitoring>

Additionally, a New Hampshire Education law, RSA 186-C:5, III, (d) provides an additional mechanism for monitoring school districts procedures and effective implementation of special education. This NH law allows for on-site monitoring to further evaluate noncompliance, verify accuracy of data, assess the adequacy of the corrective action plans and their implementation, or other purposes as the Department may determine. Although the Bureau has not had to utilize this particular mechanism, considered to be "special on-site monitoring" on a regular basis, it has, on occasion, been useful in enforcement of corrective actions and ultimately closure of programs that were in severe violation of special education regulations.

3. Fiscal and Data Management:

To ensure the accurate gathering and interpreting of data and oversight of finances, the Bureau has developed the Office of Finance and Data Management (OFDM). This office is responsible for the processing of NH's special education reimbursement programs to school districts for high cost students and court ordered placed students. This office is also responsible for the IDEA/Preschool grant system for which federal grant monies are monitored and tracked. The OFDM provides data support to the other offices within the Bureau in support of the SPP/APR for indicator reporting. The OFDM coordinates with the EDFacts stewards and other Bureaus in the Department to ensure fidelity of data and results.

The annual request for federal funds allows a local education agency (LEA) to apply for IDEA Part B Section 611 & Preschool Section 619 funds in one application. The application is a web-based online process, which requires activities and assurances. Funds are distributed based on a reimbursement process after an extensive review by the Bureau to ensure activities are allowable costs under IDEA. This application process also assists districts with calculating and spending proportional share of funds on children with disabilities who are enrolled by their parents in private schools. Additionally, through this process, districts specify if they are using IDEA funds for CEIS. This allows the Bureau to monitor the appropriate use of CEIS dollars. As a "pass-through" entity for Federal funds, the NHDOE, Bureau of Federal Compliance (BFC) completes annual fiscal compliance monitoring and single-audit reviews of its sub recipients in accordance with 2 CFR 200.331. More information may be found here: <https://www.education.nh.gov/who-we-are/division-educator-and-analytic-resources/bureau-of-federal-compliance>

4. Effective Dispute Resolution:

NH provides a number of dispute resolution processes in order to support resolution. In NH, Alternative Dispute Resolution (ADR) may take the form of a neutral conference as described in RSA 186-C:23-b and Ed 215.02, and mediation as described in RSA 186-C:24 and Ed 215.03.

Due Process Hearing Complaints allow further a parent, a child, or the school district to file a due process hearing complaint on any matter relating to a proposal or a refusal to initiate or change the identification, evaluation, or educational placement of a child, or the provision of a FAPE to the child. For more information on Special Education Due Process Hearings and Alternative Dispute Resolutions, go to: <https://www.education.nh.gov/who-we-are/division-of-learner-support/bureau-of-student-support/special-education/due-process-hearings>

The Special Education State complaints process is another method afforded to parents or others to potentially resolve a concern with regard to a violation of special education law. The NH Standards for the Education of Children with Disabilities (March 2017) provides extensive clarification of this process to parents and the public.

For more information about the NH Special Education Complaint process, go to: <https://www.education.nh.gov/who-we-are/division-of-learner-support/bureau-of-student-support/special-education/complaints>

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 (TA) and Professional Development

The Bureau provided a tiered approach to technical assistance (TA) to ensure the timely delivery of high quality, evidence based technical assistance and support to districts. The TA was closely paired with professional development (PD) to ensure that service providers had the skills to effectively provide services that improve results for students with disabilities.

Technical Assistance Activities

The Bureau has a three-tiered system of TA with varying activities within each level, to assist districts. TA is typically provided to local school district personnel, parents of children with disabilities, private school personnel and other interested parties. The three tiers of the system include: Universal; Targeted and Intensive supports.

Universal supports are provided to any interested party. These supports include state-wide trainings, instructional or technical assistance memos, large group Director Meetings, as well as general oversight and broad TA in targeted areas. Some of the topics include trainings on Written Prior Notice, Measurable Annual Goals, and Specially Designed Instruction. We also provide trainings on many of the SPP Indicators to ensure understanding of the data points and the expectations of the districts with regard to interpretation of the data. Additional trainings offered include but are not limited to fiscal trainings regarding use of IDEA funds as well as state funding for Court Ordered Placements and Special Education Aid. Our trainings on the NH Special Education Information System (NHSEIS) also help us to explain the use of the system and ensure compliance in writing IEPs. We provide supports to new Special Education Coordinators and new Special Education Directors in the state. New Hampshire provides extensive supports around accessibility with trainings on Bookshare, American Printing House for the Blind, NH Accessible Educational Materials library, and Scholars in the area of Vision and Universal Design for Learning (UDL) to support educators in the field.

Targeted supports were services developed based on needs common to multiple recipients and not extensively individualized. In this TA, a relationship was established between the TA recipient and one or more Bureau staff or the Bureau's designee. This category of TA could be one-time, labor-intensive events, such as on-site training to selected districts regarding the completion of the self-assessment data collection form prior to the compliance monitoring review. They could also be episodic, less labor-intensive events that extend over a period of time, such as facilitating a series of

meetings with new Special Education Administrators or Special Education Coordinators or the Measurable Annual Goals trainings with a coaching component. Facilitating communities of practice can also be considered Targeted support. Targeted supports were also provided to districts with findings of noncompliance relative to indicators in the State Performance Plan. Bureau staff offered TA and PD to district administrators and practitioners, as appropriate. This could include a review of data, identification of root causes of noncompliance and support for district personnel with understanding the intricacies of the area being addressed. This TA might have been mandated as part of the correction of noncompliance.

The Intensive supports were often provided on-site and required a stable, ongoing relationship between the Bureau staff and the TA recipient. This category of TA is intended to have resulted in changes to policy, program, practice, or operations that supported increased recipient capacity and/or improved outcomes at one or more systems levels. The Bureau's monitoring team as well as other staff within the NHDOE provided intensive supports to districts that demonstrate readiness and a desire to engage in significant work. A non-exhaustive list of current intensive supports included the specified targeted TA based on data from the Indicators, onsite monitoring, fiscal audits through the NHDOE Bureau of Federal Compliance, the complaints process and through due process hearings. Our CIM process would be included within this category of TA as there is an intensive, targeted process for supporting these districts as they complete the process. Bureau staff and district leadership worked closely to identify root causes that impact the determination and to develop and implement a long-term plan to remedy areas of concern.

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 NH Department of Education, Bureau of Special Education Support General Supervision System (described above) includes the description of the mechanisms the State has in place to ensure service providers have the skills to effectively provide services that improve results for students with disabilities. These supports include, but are not limited to, quarterly training opportunities, district specific training, UDL Academy, iSocial and other opportunities as described in Universal supports for technical assistance

Broad Stakeholder Input

The New Hampshire Department of Education, Bureau of Special Education Support engages a broad range of stakeholders who have interest and expertise in the various issues relative to improving outcomes for children with disabilities. Stakeholders are seen as allies for change and are intentionally engaged in on-going, meaningful ways.

The State Director of Special Education participates in the meetings of the NH State Advisory Panel (the NH State Advisory Committee on the Education of Students/Children with Disabilities or SAC), listening to the concerns of the Committee directly and providing updates at each meeting on special education. Members of SAC are invited to participate in stakeholder meetings that support the development of the SPP. The director also attends regional state director meetings, monthly meetings with our state association for special education directors (New Hampshire Association of Special Education Administrators NHASEA), as well as NHASEA's monthly board meetings, monthly calls with NHASEA, the NH Association of School Administrators (NHASA) and our state Parent Information Center (PIC). The director is also part of the Council for Thriving Children, focusing on early childhood learning, and the DHHS System of Care focusing on the mental health needs of youth. The director also holds bi-weekly calls open to stakeholders to share information from the Bureau and answer questions from stakeholders. The Bureau also has a seat on the NH Developmental Disability Council, the Autism Council, the Deaf Bill of Rights Advisory Council, the Preschool Development Grant, and the New Hampshire Educator Effectiveness for Student Success collaboration group.

The Bureau has a strong partnership with the NH Parent Information Center (PIC). PIC is New Hampshire's Parent Technical Assistance Center, funded by OSEP. Representatives from PIC participate in stakeholder meetings. PIC and Bureau staff work closely together to promote key initiatives across the State; including RACE2K which focuses on maximizing results for preschool children with disabilities.

The Bureau seeks diverse representation from the field throughout the year to provide insights into what is working well and what can be improved. The Bureau has involved both practitioners and administrators from across the State in discussions about a variety of topics that expand beyond the SPP. The NHSEIS stakeholder group focuses on recommendations for guidance documents and trainings as well as enhancements to the data system. A series of three meetings are held each year for both new and continuing special education coordinators. The bureau also provides mentorship opportunities for new special education administrators. The Bureau also helps coordinate and participates in the Secondary Transition Community of Practice. These are a few of the ways in which the Bureau and stakeholders work together to improve outcomes for children with disabilities.

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 Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year. Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with

some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

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

YES

Number of Parent Members:

44

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 Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups, which included parents, provided feedback and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year.

Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee.

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.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the rigidity of setting and moving targets.

When presenting the information to parents, the State team was cognizant of the fact that the information was data heavy and that the parents may not understand the nuances of the indicators. Keeping this in mind, the presenters provided clarification of the information when needed, explained the data in parent friendly language and provided a context of the purpose of the indicator and its measures for better understanding.

Soliciting Public Input:

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

The Bureau announced to the public in June of 2021 via parent groups, Parent Information Center email, email to stakeholders and the State Director's regular special education update call, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). The Bureau also reached out to NHASEA and SAC members for their input. Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

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.

NH has previously reported to the public on APR indicators through web postings, meetings with stakeholders and professional organizations and through regional and statewide conferences. NH will continue utilizing these means to report annually to the public on NH's progress and/or slippage in meeting the measurable and rigorous indicator targets. After submission to OSEP, NH posted the FFY 2019 APR to the department website (see nh-b-sppapr-2019-20.pdf) in order to report to the public on the performance of LEAs located in the State on the SPP/APR indicators as soon as practicable, but no later than 120 days following the State's submission of its APR, as required by 34 CFR §300.602(b)(1)(i)(A).

In addition to the public report, each LEA annually receives a Special Education Profile and IDEA Report, comprised of a data profile and required monitoring activities, and an annual Special Education Rating detailing its performance on the indicators included in the subset for making LEA determinations. Special Education Profiles are available to the public (with data based on small groups of students masked as appropriate) on the department's website: These reports are available on the NH Department of Education website at: <https://www.education.nh.gov/who-we-are/division-of-educator-and-analytic-resources/platform>

Reporting to the Public

How and where the State reported to the public on the FFY 2019 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 2019 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 2019 APR in 2021, is available.

NH has previously reported to the public on APR indicators through web postings, meetings with stakeholders and professional organizations and through regional and statewide conferences. NH will continue utilizing these means to report annually to the public on NH's progress and/or slippage in meeting the measurable and rigorous indicator targets. After submission to OSEP, NH posted the FFY 2019 APR to the department website (<https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/sonh/nh-b-sppapr-2019-20.pdf>) in order to report to the public on the

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Intro - Prior FFY Required Actions

None

Intro - OSEP Response

While the State has described the mechanisms for soliciting broad stakeholder input on the State's targets in the SPP/APR, any subsequent revisions that the State made to those targets, and the development and implementation of Indicator 17, that description does not contain the required information. Specifically, the State did not report a description of the activities conducted to increase the capacity of diverse groups of parents.

Intro - Required Actions

In the FFY 2021 SPP/APR, the State must report 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), including a description of the activities conducted to increase the capacity of diverse groups of parents.

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 2020 SPP/APR, use data from 2019-2020), 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
2020	82.92%

FFY	2015	2016	2017	2018	2019
Target >=	95.00%	95.00%	95.00%	95.00%	95.00%
Data	72.67%	72.73%	74.26%	73.78%	80.16%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

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Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,311
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	124
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	34
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	112

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1,311	1,581	80.16%	95.00%	82.92%	N/A	N/A

Graduation Conditions

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

Explanation of Calculation

Consistent with the OSEP instructions, the NHDOE has described the results of the examination of the data for the year before the reporting year (e.g. for the FFY 2020 APR, used data from 2019-2020), and compared the results to the target reported in the FFY 2020 State Performance Plan that aligns with the graduation rate target under Title I of the ESEA.

When reporting graduation rates for the SPP/APR, The Part B Indicator Measurement Table requires States to use the same data as used for reporting to the Department under section 618 of the Individual with Disabilities Education Act (IDEA), using the definitions in EDFacts file specification FS0009. In order to calculate this for students with IEPs, the Bureau of Data Management identified youth with IEPs in the overall data and performed the same calculation for this subgroup as the calculation used for all youth. Beginning with 2009-2010, the Department reports the NH Annual Graduate Rate based on a cohort model using US Department of Education established parameters. This report identifies the number of students who graduated in four years with a regular high school diploma or an adult high school diploma and the graduation rate by school and district.

Definition and Requirements for Graduation with a Regular Diploma

RSA 186-C:9 Education Required states that an educationally disabled child "shall be entitled to attend an approved program which can implement the child's individualized education program. Such child shall be entitled to continue in an approved program until such time as the child has acquired a regular high school diploma or has attained the age of 21, whichever occurs first, or until the child's individualized education program team determines that the child no longer requires special education in accordance with the provisions of this chapter." New Hampshire does not recognize alternative diplomas, IEP diplomas, the GED, certificates of attendance or any other form but a regular high school diploma for the purposes of counting a child as fulfilling the diploma exiting requirement of RSA 186-C:9. To earn a regular high school diploma, a child must, as specified in the Minimum Standards for Public School Approval effective 7/1/05, Section Ed 306.27, earn "a minimum of 20 credits for a regular high school diploma, unless the local school board has set a requirement of more than 20 credits for a regular high school diploma, in which case the local credit requirement shall apply." In NH, a regular high school diploma is conferred by the local school board.

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)

The previous baseline was established with data that is now greater than 10 years old. In that time, the state has made progress and the data has improved. The Bureau reset the baseline to better reflect the progress made in the time between the previous SPP/APR and now.

1 - Prior FFY Required Actions

None

1 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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

OPTION 1:

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.

OPTION 2 (For FFY 2020 ONLY):

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

OPTION 1:

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.

OPTION 2 (For FFY 2020 ONLY):

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.

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 2020 SPP/APR, use data from 2019-2020), and compare the results to the target.

With the FFY 2020 SPP/APR, due February 1, 2022, States may use either option 1 or 2. States using Option 2 must provide the actual numbers used in the calculation.

OPTION 1:

Use 618 exiting data for the year before the reporting year (e.g., for the FFY 2020 SPP/APR, use data from 2019-2020). 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.

OPTION 2:

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.

If the State has made or proposes to make changes to the data source or measurement under Option 2, when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012, the State should include a justification as to why such changes are warranted.

Options 1 and 2:

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.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, States must report data using Option 1 (i.e., the same data as used for reporting to the Department under section 618 of the IDEA). Option 2 will not be available beginning with the FFY 2021 SPP/APR.

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	7.08%

FFY	2015	2016	2017	2018	2019
Target <=	0.76%	0.76%	0.76%	0.65%	0.65%
Data	0.74%	0.87%	1.05%	0.59%	1.54%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	7.08%	7.00%	6.80%	6.80%	6.60%	6.40%

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year.

Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

Please indicate the reporting option used on this indicator

Option 1

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,311
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	0
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	124
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	34
SY 2019-20 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/26/2021	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	112

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
112	1,581	1.54%	7.08%	7.08%	N/A	N/A

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

Consistent with the OSEP's Part B Indicator Measurement Table, the NHDOE has described the results of the examination of the data for the year before the reporting year (e.g. for the FFY 2020 APR, use data from 2019-2020). The results are compared to the target set for FFY 2019 in the State Performance Plan. Dropout numbers and rates for all students, including students with IEPs, are reported by districts operating high schools and for the two public academies. These data are the same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EdFacts file specification FS009.

New Hampshire defines a student as having dropped out of public education based on a specific formula. This formula identifies students enrolled in public school in grades 9 – 12 who: have completed the prior school year did not return after the summer or dropped out during the current school year, and did not return by October 1st of the subsequent school year.

For example: a 2019-20 dropout is a public school student in grades 9-12 who completed the 2018-19 school year, did not return after the summer of 2019 or dropped out during the 2019-20 school year, and did not return by October 1, 2020.

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)

The previous baseline was established with data that is now greater than 10 years old. In that time, the state has made progress and the data has improved. The Bureau reset the baseline to better reflect the progress made in the time between the previous SPP/APR and now

2 - Prior FFY Required Actions

None

2 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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	A	Grade 4	FFY 2020	77.44%
Reading	B	Grade 8	FFY 2020	66.97%
Reading	C	Grade HS	FFY 2020	56.98%
Math	A	Grade 4	FFY 2020	78.29%
Math	B	Grade 8	FFY 2020	67.04%
Math	C	Grade HS	FFY 2020	56.98%

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%
Math	C >=	Grade HS	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

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The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

03/30/2022

Reading Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	2,584	2,567	2,034
b. Children with IEPs in regular assessment with no accommodations	1,030	1,190	528
c. Children with IEPs in regular assessment with accommodations	870	453	557
d. Children with IEPs in alternate assessment against alternate standards	101	76	74

Data Source:

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

03/30/2022

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs*	2,584	2,567	2,034
b. Children with IEPs in regular assessment with no accommodations	973	1,124	528

c. Children with IEPs in regular assessment with accommodations	950	521	557
d. Children with IEPs in alternate assessment against alternate standards	100	76	74

*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 2020 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	2,001	2,584		95.00%	77.44%	N/A	N/A
B	Grade 8	1,719	2,567		95.00%	66.97%	N/A	N/A
C	Grade HS	1,159	2,034		95.00%	56.98%	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	2,023	2,584		95.00%	78.29%	N/A	N/A
B	Grade 8	1,721	2,567		95.00%	67.04%	N/A	N/A
C	Grade HS	1,159	2,034		95.00%	56.98%	N/A	N/A

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.

Here is the link to where the public can access the assessment results:

<https://dashboard.nh.gov/t/DOE/views/i/Report/FrontPage?%3Aiid=1&%3Atabs=no&%3AisGuestRedirectFromVizportal=y&%3Aembed=y>

Provide additional information about this indicator (optional)

Prior to the assessment window for FFY20, the Office of Assessment and Accountability with the NHDOE provided technical support through fact sheets and zoom calls to support districts in their efforts to assess students remotely. Feedback from the field indicates that the biggest challenges were due to the difficulty with the actual administration of the assessment at the student's remote location (such as the home) and the coordination of those efforts with the family. The Bureau also believes that due to the various COVID related difficulties of providing special education and related services, students may have missed critical elements of their IEP that would have enabled them to demonstrate greater assessment proficiency. To assist districts in the provision of services, the Bureau hosted informational zoom calls. On 3/16/2020, the State Director issued a guidance document outlining a 3-tiered approach to provide required services consisting of a remote instructions model, limited number of students utilizing the building, and compensatory services, as a last resort. On 3/30/20, a Q&A document was distributed emphasizing providers responsibility to delivery services, citing specifically the answer to Question A-1 in the U.S. Department of Education's Questions and Answers on Providing Services to Children with Disabilities During the Coronavirus Disease 2019 Outbreak.

The Bureau of Special Education Support is working with the Division of Analytic Resources on reporting the number of children with disabilities participating in regular assessments, and the number of those children who were provide accommodations.

3A - Prior FFY Required Actions

None

3A - OSEP Response

The State has revised baseline for this indicator, using data from FFY 2020 and OSEP accepts the baseline.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State did not provide a Web link demonstrating that the State reported publicly on the participation of children with disabilities on statewide assessments with the same frequency and in the same detail as it reports on the assessments of nondisabled children, as required by 34 C.F.R. § 300.160(f). Specifically, the State has not reported the number of children with disabilities who were provided accommodations (that did not result in an invalid score) in order to participate in those assessments at the State, district and/or school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

3A - Required Actions

Within 90 days of the receipt of the State's 2022 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2020, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2021 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2021.

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	A	Grade 4	FFY 2020	14.68%
Reading	B	Grade 8	FFY 2020	10.04%
Reading	C	Grade HS	FFY 2020	20.46%
Math	A	Grade 4	FFY 2020	15.76%
Math	B	Grade 8	FFY 2020	6.20%
Math	C	Grade HS	FFY 2020	7.47%

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	14.68%	14.68%	16.68%	18.68%	20.68%	22.68%
Reading	B >=	Grade 8	10.04%	10.04%	12.04%	14.04%	16.04%	18.04%
Reading	C >=	Grade HS	20.46%	20.46%	22.46%	24.46%	26.46%	28.46%
Math	A >=	Grade 4	15.76%	15.76%	17.76%	19.76%	21.76%	23.76%
Math	B >=	Grade 8	6.20%	6.20%	8.20%	10.20%	12.20%	14.20%
Math	C >=	Grade HS	7.47%	7.47%	9.47%	11.47%	13.47%	15.47%

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021.

Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year.

Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

03/03/2022

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	1,900	1,643	1,085
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	187	145	113
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	92	20	109

Data Source:

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

03/03/2022

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	1,923	1,645	1,085
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	176	76	40
c. Children with IEPs in regular assessment with	127	26	41

accommodations scored at or above proficient against grade level			
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FFY 2020 SPP/APR Data: Reading Assessment

Group	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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	279	1,900		14.68%	14.68%	N/A	N/A
B	Grade 8	165	1,643		10.04%	10.04%	N/A	N/A
C	Grade HS	222	1,085		20.46%	20.46%	N/A	N/A

FFY 2020 SPP/APR Data: Math Assessment

Group	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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	303	1,923		15.76%	15.76%	N/A	N/A
B	Grade 8	102	1,645		6.20%	6.20%	N/A	N/A
C	Grade HS	81	1,085		7.47%	7.47%	N/A	N/A

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.

Here is the link to where the public can access the assessment results: <https://www.education.nh.gov/who-we-are/division-of-educator-and-analytic-resources/bureau-of-education-statistics/assessment-data>

Provide additional information about this indicator (optional)

For indicator 3B the Bureau determined that with the change in the reporting of this Indicator, the targets should start with the baseline data for each grade. Although this lowers the target for some grade levels, it aligns the targets with the data to ensure a more attainable target at each grade level. If we were to keep the same target for all grade levels, we would be setting a possibly unattainable target in the areas of math specifically in grades 8 and 11 as well as reading for grade 8. Stakeholders expressed that in working from the previous targets we would potentially be setting the districts and in turn the state up for failure.

We are maintaining the target for one year as this area of the SPP continues to be impacted by COVID. After that, targets will increase 2% each year to provide for a gradual change for districts as we work with them to determine how this indicator can improve statewide.

3B - Prior FFY Required Actions

None

3B - OSEP Response

The State has revised baseline for this indicator, using data from FFY 2020 and OSEP accepts the baseline.

The State provided targets for FFYs 2020 through 2025 for this indicator and OSEP accepts those targets.

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	A	Grade 4	FFY 2020	28.71%
Reading	B	Grade 8	FFY 2020	40.79%
Reading	C	Grade HS	FFY 2020	31.08%
Math	A	Grade 4	FFY 2020	49.00%
Math	B	Grade 8	FFY 2020	15.79%
Math	C	Grade HS	FFY 2020	29.73%

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A >=	Grade 4	33.53%	35.53%	37.53%	39.53%	41.53%	43.53%
Reading	B >=	Grade 8	40.79%	41.79%	42.79%	43.00%	43.25%	43.79%
Reading	C >=	Grade HS	33.53%	35.53%	37.53%	39.53%	41.53%	43.53%
Math	A >=	Grade 4	49.00%	51.00%	53.00%	55.00%	57.00%	59.00%
Math	B >=	Grade 8	15.80%	17.80%	19.80%	21.80%	23.80%	25.80%
Math	C >=	Grade HS	29.70%	31.70%	33.70%	35.70%	37.70%	39.70%

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year.

Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

FFY 2020 Data Disaggregation from EDFacts

Data Source:

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

03/03/2022

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	101	76	74
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	29	31	23

Data Source:

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

03/03/2022

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	100	76	74
b. Children with IEPs in alternate assessment against alternate	49	12	22

standards scored at or above proficient			
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FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	29	101		33.53%	28.71%	N/A	N/A
B	Grade 8	31	76		40.79%	40.79%	N/A	N/A
C	Grade HS	23	74		33.53%	31.08%	N/A	N/A

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	49	100		49.00%	49.00%	N/A	N/A
B	Grade 8	12	76		15.80%	15.79%	N/A	N/A
C	Grade HS	22	74		29.70%	29.73%	N/A	N/A

Regulatory Information

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Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

None

3C - OSEP Response

The State has revised the baseline for this indicator using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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 2020-2021 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2020-2021 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 2020-2021 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2020-2021 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	A	Grade 4	FYY 2020	34.19
Reading	B	Grade 8	FYY 2020	39.13
Reading	C	Grade HS	FYY 2020	43.13
Math	A	Grade 4	FYY 2020	25.64
Math	B	Grade 8	FFY 2020	26.69
Math	C	Grade HS	FFY 2020	34.95

Targets

Subject	Group	Group Name	2020	2021	2022	2023	2024	2025
Reading	A <=	Grade 4	38.40	36.00	33.00	30.00	27.00	24.00
Reading	B <=	Grade 8	38.00	36.00	33.00	30.00	27.00	24.00
Reading	C <=	Grade HS	42.70	40.00	37.00	34.00	31.00	27.00
Math	A <=	Grade 4	33.90	32.00	29.00	26.00	23.00	20.00
Math	B <=	Grade 8	34.00	32.00	29.00	26.00	23.00	20.00
Math	C <=	Grade HS	34.80	32.50	29.00	26.00	23.00	20.00

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

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meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

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FFY 2020 Data Disaggregation from EDFacts

Data Source:

SY 2020-21 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

03/03/2022

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	10,512	10,222	10,588
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	1,900	1,643	1,085
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	5,028	5,000	6,386
d. All students in regular assessment with accommodations scored at or above proficient against grade level	110	26	347
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	187	145	113
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	92	20	109

Data Source:

SY 2020-21 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

03/03/2022

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
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a. All Students who received a valid score and a proficiency was assigned for the regular assessment	10,535	10,251	10,588
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	1,923	1,645	1,085
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	4,190	3,341	4,289
d. All students in regular assessment with accommodations scored at or above proficient against grade level	171	31	202
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	176	76	40
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	127	26	41

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	14.68%	48.88%		38.40	34.19	N/A	N/A
B	Grade 8	10.04%	49.17%		38.00	39.13	N/A	N/A
C	Grade HS	20.46%	63.59%		42.70	43.13	N/A	N/A

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A	Grade 4	15.76%	41.40%		33.90	25.64	N/A	N/A
B	Grade 8	6.20%	32.89%		34.00	26.69	N/A	N/A
C	Grade HS	7.47%	42.42%		34.80	34.95	N/A	N/A

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

The State has established baseline for this indicator, using data from FFY 2020, and OSEP accepts the baseline.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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 2020 SPP/APR, use data from 2019-2020), 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 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 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 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 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 2020 SPP/APR, the data for FFY 2019), 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
2019	18.18%

FFY	2015	2016	2017	2018	2019
Target <=	1.15%	1.15%	1.15%	1.15%	1.15%
Data	0.57%	0.57%	0.00%	1.16%	18.18%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target <=	18.18%	17.18%	15.18%	13.18%	11.18%	9.18%

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year. Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

FFY 2020 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.

165

Number of LEAs that have a significant discrepancy	Number of LEAs that met the State's minimum n/cell size	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1	10	18.18%	18.18%	10.00%	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

The NHDOE defines a "significant discrepancy" as any district with a rate of suspensions and expulsions greater than 10 days in a school year for children with IEPs that is greater than 3% of students with IEPs enrolled in the district.

The State applied a minimum cell and "n" size and for any districts that met the minimum cell and "n" size, a threshold of greater than 3% students with IEPs suspended or expelled for greater than 10 days in a school year. Districts that exceeded the threshold and did not meet the following minimum cell and "n" size requirements were removed from the count:

"N": A minimum of 11 children with IEPs in the district, consistent with the State Assessment, NHSAS.

Cell: At least 4 students with IEPs suspended or expelled for greater than 10 days.

Identification of Comparison Methodology

Discrepancies were computed by comparing the rates of suspensions and expulsions for children with IEPs among LEAs within the State. The results of the NHDOE examination of the data are for the year before the reporting year (e.g. for the FFY 2020 APR, data are from 2019-2020) , including data

disaggregated to determine if significant discrepancies occurred in the rates of long-term suspensions and expulsions of children with IEPs. If the NHDOE determined that there were significant discrepancies in the suspension and expulsion rates, the NHDOE reviewed, and if appropriate, (or required the district to revise) the district's policies, practices, and procedures relating to the development and implementation of IEPs, the use of behavioral interventions, and procedural safeguards to ensure that the policies, procedures and practices complied with Part B. Minimum "n" size requirements

Report on the number of districts that did not meet the State-established minimum "n" size requirement in the FFY 2020 APR (using the 2019-2020 data).

Step 1: Of the 175 districts, the NHDOE determined that there were 10 districts that had four or more students with IEPs suspended or expelled for more than 10 days in the school year and at least 11 identified students. Therefore 165 districts did not meet the minimum cell and "n" sized and were excluded from the calculation.

Step 2: Of 10 districts identified in Step 1, nine (9) districts did not exceed the state established 3% threshold and one (1) district did exceed the 3% threshold."

Provide additional information about this indicator (optional)

The NHDOE believes that the reduced in-person attendance (due to COVID-19) has affected the FFY20 data with respect to removals. The decrease of total disciplinary removals dropped 42% from 2018-2019 to 2019-2020 (5,670 to 3,299)

The NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 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 FFY 2020, using 2019-2020 data, there was one district identified with significant discrepancy for this indicator. The NHDOE reviewed the district's 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 these policies, procedures, and practices comply with IDEA.

The NHDOE review included the completion of a self-assessment by the identified districts. The district's self-assessment specifically covered a 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 NHDOE then verified the results of the district's self-assessment. Based on this process, it was determined that there were no individual instances of noncompliance with the implementation for regulations of IDEA relative to this indicator.

Had there been findings of noncompliance for the districts identified with significant discrepancy for this indicator, the NHDOE would have verified, as soon as possible, but in no case greater than one year of the noncompliance being identified that, in the districts with identified noncompliance, the districts were: 1) correctly implementing the specific regulatory requirement(s) (i.e. achieved 100% compliance) based on a review of updated data such as data subsequently collected through a State data system; and 2) have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

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 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	4	0	0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

In the FFY 2019 APR, using the 2018-2019 data, there were 4 districts identified with significant discrepancy for this indicator. The NHDOE has verified that each LEA with noncompliance identified in FFY 2019 for this indicator has corrected the identified noncompliance, consistent with OSEP Memo 09-02, as follows: The NHDOE verified that each district was correctly implementing 20 U.S.C. 1412(a)(22), (i.e. achieved 100% compliance) based on a review of data subsequently collected through an onsite and desk audit monitoring process. During the correction period, the NHDOE reviewed local policies and procedures using the State created rubric and assisted the LEA in creating and analyzing the root causes of the identified noncompliance. a Based on this review, when appropriate, the NHDOE required the affected district to revise the district's 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 these policies, procedures and practices comply with IDEA. The NHDOE provided onsite technical assistance to districts to support their adherence to relative laws and rules, including accurate data collection and entry in order to ensure districts were compliant relative to the discipline process.

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

In the FFY 2019 APR, using the 2018-2019 data, there were 4 districts identified with significant discrepancy for this indicator. The NHDOE reviewed and, when appropriate, revised (or required the affected district to revise) the district's 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 these policies, procedures, and practices comply with IDEA.

The NHDOE review included the completion of a self- assessment by each identified district which was verified by the NHDOE. The district's self-assessment specifically covered a 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. This process included a review of files for students impacted by this indicator in order to determine if there were individual instances of noncompliance. Any individual instances were verified as corrected as soon as possible, but in no case greater than one year from identification. Root causes of problematic practices and noncompliance were identified in the review process. Targeted technical assistance was provided to assist with addressing and correcting the root causes.

As a result of the process described above, and within one year of the noncompliance being identified, the state verified that, in the identified districts, they are (1) correctly implementing the specific regulatory requirement(s) (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) have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4A - Prior FFY Required Actions

The State must report, in the FFY 2020 SPP/APR, on the correction of noncompliance that the State identified in FFY 2019 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (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 district, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Response to actions required in FFY 2019 SPP/APR

The NHDOE verified that each district was correctly implementing 34 CFR §300.530, (i.e. achieved 100% compliance) based on a review of data subsequently collected through an onsite and desk audit monitoring process. During the correction period, the NHDOE reviewed local policies and procedures using the State created rubric and assisted the LEA in creating and analyzing the root causes of the identified noncompliance. a Based on this review, when appropriate, the NHDOE required the affected district to revise the district’s 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 these policies, procedures and practices comply with IDEA. The NHDOE provided onsite technical assistance to districts to support their adherence to relative laws and rules, including accurate data collection and entry in order to ensure districts were compliant relative to the discipline process.

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

4A - OSEP Response

The State revised the baseline for this indicator, using data from FFY 2019, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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 2020 SPP/APR, use data from 2019-2020), 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 2019-2020 school year, those 100 LEAs would have reported 618 data in 2019-2020 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2020-2021, suspension/expulsion data from those 15 new LEAs would not be in the 2019-2020 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 2020 SPP/APR submission, States must use the number of LEAs reported in 2019-2020 (which can be found in the FFY 2019 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 2020 SPP/APR, the data for FFY 2019), 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.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

FFY 2020 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.

168

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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1	0	7	0.00%	0%	0.00%	N/A	N/A

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

The NHDOE defines a "significant discrepancy" as any district with a rate of suspensions and expulsions greater than 10 days in a school year for children with IEPs by racial/ethnic group that is greater than 3% of students with IEPs enrolled in the district by racial/ethnic group. The State applied a minimum cell and "n" size and for any districts that met the minimum cell and "n" size in any racial/ethnic group, a threshold of greater than 3% students with IEPs suspended or expelled for greater than 10 days in a school year. Districts that exceeded the threshold and did not meet the following minimum cell and "n" size requirements were removed from the count:

"N": A minimum of 11 children with IEPs in the district, consistent with the State Assessment, NHSAS.

Cell: At least 4 students with IEPs suspended or expelled for greater than 10 days.

For Indicator 4B, these minimum cell sizes are applied to the population of students with IEPs in each race and ethnicity category.

Identification of Comparison Methodology

Discrepancies were computed by comparing the rates of suspensions and expulsions for children with IEPs among LEAs (districts) within the State. The results of the NHDOE examination of the data are for the year before the reporting year (e.g. for the FFY 2020 APR, data are from 2019-2020), including data disaggregated to determine if significant discrepancies by race or ethnicity occurred in the rates of long-term suspensions and expulsions of children with IEPs. If the NHDOE determined that there were significant discrepancies by race or ethnicity in the suspension and expulsion rates, the NHDOE reviewed, and if appropriate, required the district to revise the district's policies, practices, and procedures relating to the development and implementation of IEPs, the use of behavioral interventions, and procedural safeguards to ensure that the policies, procedures and practices comply with Part B.

Minimum "n" size requirements

Step 1: Of the 175 districts, the NHDOE determined that there were 7 districts that met the State-established minimum cell and "n" size requirements in the FFY 2020 APR (using the 2019-2020 data).

Step 2: Of 7 districts identified in Step 1, 6 districts did not exceed the state established 3% threshold and 1 district did exceed the 3% threshold.

Provide additional information about this indicator (optional)

The NHDOE believes that the reduced in-person attendance (due to COVID-19) has affected the FFY20 data with respect to removals. The decrease of total disciplinary removals dropped 42% from 2018-2019 to 2019-2020 (5,670 to 3,299)

Review of Policies, Procedures, and Practices (completed in FFY 2020 using 2019-2020 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.

There was one district that needed review of their policies, procedures, and practices. Upon review of their policies, procedures, and practices there were no findings.

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 2019

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 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4B - Prior FFY Required Actions

None

4B - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

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	2015	2016	2017	2018	2019
A	2020	Target >=	72.85%	72.85%	72.85%	74.00%	74.00%
A	73.75%	Data	72.44%	71.71%	70.81%	71.56%	72.19%
B	2020	Target <=	7.97%	7.97%	7.97%	7.00%	7.00%
B	8.95%	Data	8.44%	8.79%	9.05%	9.22%	9.08%
C	2020	Target <=	2.61%	2.61%	2.61%	2.05%	2.05%
C	2.46%	Data	2.73%	2.88%	2.84%	2.79%	2.66%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	74.00%	74.00%	74.50%	75.00%	75.00%	75.00%
Target B <=	7.00%	6.50%	6.50%	6.20%	6.18%	6.18%
Target C <=	2.05%	2.05%	2.05%	2.05%	2.05%	2.05%

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

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parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

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Prepopulated Data

Source	Date	Description	Data
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	Total number of children with IEPs aged 5 (kindergarten) through 21	27,060
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	19,958
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	2,421
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	564
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	90
SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/07/2021	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	12

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 2020 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	19,958	27,060	72.19%	74.00%	73.75%	N/A	N/A
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the	2,421	27,060	9.08%	7.00%	8.95%	N/A	N/A

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
regular class less than 40% of the day							
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	666	27,060	2.66%	2.05%	2.46%	N/A	N/A

Provide additional information about this indicator (optional)

At the onset of the pandemic and the pivot to remote education, school teams were unclear about how to determine LRE in light of reduced access to school buildings and how (or if) to amend the IEP. Feedback from the Districts indicate that there was a general confusion as to whether the home, as a delivery location for remote instruction and provision of services would be considered a regular education environment, whether or not the IEP had to be amended with a pivot to remote, how to consider placement for kids who needed services that would have normally been provided in the general education setting, and how to address the concerns of parents who refused services that would need to occur in a special education setting.

To address these questions, the State Director hosted weekly informational zoom meetings to discuss specifically: remote service provision, amending IEPs and determining LRE. On 3/15/2020 and 3/22/2020 (first and second week after the start of Remote Learning), the State Director surveyed the population of Special Education Administrators regarding readiness to provide services remotely. Both results were shared virtually, discussed and readily posted online and used to provide technical assistance. On 3/16/2020, the State Director issued a guidance document outlining a 3-tiered approach to provide required services consisting of a remote instructions model, limited number of students utilizing the building, and compensatory services, as a last resort. On 3/30/20, a Q&A document was distributed emphasizing providers responsibility to delivery of services, citing specifically the answer to Question A-1 in the U.S. Department of Education’s Questions and Answers on Providing Services to Children with Disabilities During the Coronavirus Disease 2019 Outbreak”. Additionally, in an effort to assist special education and related service providers to track data of delivery time, the State Director released a District Remote Learning Tracking Template for Students with IEPs.

The Bureau believes that these data are skewed because of Districts having different practices with respect to selecting either regular or special education setting. For example, for students who would normally receive services in the general education setting, the Bureau is aware of some districts that were bringing the students with IEPs to a special education setting to receive services as there was no general education setting available, and then amending the IEP accordingly.

5 - Prior FFY Required Actions

None

5 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020 and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

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

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	2015	2016	2017	2018	2019
A	Target >=	51.00%	53.00%	56.00%	60.00%	60.00%
A	Data	58.08%	58.70%	58.43%	59.99%	52.82%
B	Target <=	17.50%	16.00%	14.50%	12.00%	12.00%
B	Data	14.00%	13.11%	12.86%	11.75%	13.89%

Targets: Description of Stakeholder Input

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The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Association of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year. Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives

from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

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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
A	2020	41.51%
B	2020	12.48%
C		

Inclusive Targets – 6A, 6B

FFY	2020	2021	2022	2023	2024	2025
Target A >=	60.00%	60.00%	60.00%	60.00%	60.00%	60.00%
Target B <=	12.00%	12.00%	12.00%	12.00%	12.00%	12.00%

Inclusive Targets – 6C

FFY	2020	2021	2022	2023	2024	2025
Target C <=						

Prepopulated Data

Data Source:

SY 2020-21 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

07/07/2021

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	798	1,281	60	2,139
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	314	546	28	888
b1. Number of children attending separate special education class	108	151	4	263

Description	3	4	5	3 through 5 - Total
b2. Number of children attending separate school	2	2	0	4
b3. Number of children attending residential facility	0	0	0	0
c1. Number of children receiving special education and related services in the home	1	0	0	1

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 2020 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 2019 Data	FFY 2020 Target	FFY 2020 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	888	2,139	52.82%	60.00%	41.51%	N/A	N/A
B. Separate special education class, separate school or residential facility	267	2,139	13.89%	12.00%	12.48%	N/A	N/A
C. Home	1	2,139			0.05%	N/A	N/A

Provide additional information about this indicator (optional)

Given that New Hampshire has less than 10 students receiving services in the home environment, no baseline or target needs to be set for 6C

6 - Prior FFY Required Actions

None

6 - OSEP Response

The State has revised the baseline for this Indicator 6A and Indicator 6B, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State reported fewer than ten children receiving special education and related services in the home in FFY 2020. The State is not required to provide targets for Indicator 6C until any fiscal year in which ten or more children receive special education and related services in the home.

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 [General Instructions](#) 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	2015	2016	2017	2018	2019
A1	2020	Target >=	79.50%	79.50%	80.00%	80.00%	80.00%
A1	75.05%	Data	79.71%	82.88%	79.92%	77.56%	77.79%
A2	2020	Target >=	61.60%	61.60%	62.00%	62.00%	62.00%

A2	53.15%	Data	59.98%	58.35%	61.68%	58.12%	56.85%
B1	2020	Target >=	79.00%	79.00%	80.00%	80.00%	80.00%
B1	75.34%	Data	79.98%	80.67%	79.82%	78.97%	75.23%
B2	2020	Target >=	61.00%	61.00%	61.50%	61.50%	61.50%
B2	51.63%	Data	58.78%	57.04%	61.59%	57.06%	52.09%
C1	2020	Target >=	77.00%	77.00%	77.50%	77.50%	77.50%
C1	76.26%	Data	76.95%	84.65%	90.45%	61.60%	68.64%
C2	2020	Target >=	63.20%	63.20%	63.50%	63.50%	63.50%
C2	49.88%	Data	63.11%	72.59%	83.24%	56.49%	54.40%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target A1 >=	80.00%	80.00%	80.00%	80.50%	80.50%	81.00%
Target A2 >=	62.00%	62.00%	62.00%	62.50%	62.50%	62.50%
Target B1 >=	80.00%	80.00%	80.00%	80.50%	80.50%	80.50%
Target B2 >=	61.50%	61.50%	61.50%	61.50%	61.50%	61.50%
Target C1 >=	77.50%	77.50%	77.50%	78.00%	78.00%	78.50%
Target C2 >=	63.50%	63.50%	63.50%	64.00%	64.50%	65.00%

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FFY 2020 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

1,255

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	85	6.77%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	175	13.94%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	328	26.14%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	454	36.18%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	213	16.97%

Outcome A	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 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. <i>Calculation: (c+d)/(a+b+c+d)</i>	782	1,042	77.79%	80.00%	75.05%	N/A	N/A
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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	667	1,255	56.85%	62.00%	53.15%	N/A	N/A

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	77	6.14%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	191	15.22%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	339	27.01%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	480	38.25%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	168	13.39%

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 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. <i>Calculation: (c+d)/(a+b+c+d)</i>	819	1,087	75.23%	80.00%	75.34%	N/A	N/A
B2. The percent of preschool children who	648	1,255	52.09%	61.50%	51.63%	N/A	N/A

Outcome B	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>							

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	76	6.06%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	187	14.90%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	366	29.16%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	479	38.17%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	147	11.71%

Outcome C	Numerator	Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 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. <i>Calculation: (c+d)/(a+b+c+d)</i>	845	1,108	68.64%	77.50%	76.26%	N/A	N/A
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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	626	1,255	54.40%	63.50%	49.88%	N/A	N/A

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)

YES

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

New Hampshire requires LEA's to use one of the two approved online assessment tools My Teaching Strategies (TS Gold) or Brookes Publishing (AEPSi) for the collection of the data. All identified preschool children must be assessed for POMS regardless of identification category, placement of service. The NH DOE requires that all identified preschoolers must be assessed upon entry to a program and/or receiving services; annually; and then upon exit from preschool.

Once the assessment is completed and finalized it remains in the online system. At the time of the child's exiting preschool, the data entry point is compared to the data from their exit point to determine progress has been made. The data is compiled into a report and generated by both online systems and forwarded by the LEA to the NH DOE. The Department then compiles the data into a state report.

Provide additional information about this indicator (optional)

7 - Prior FFY Required Actions

None

7 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

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 [General Instructions](#) 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 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 response rate) and describe strategies that will be implemented which are expected to increase the response rate, 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 parents of children with disabilities.

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 should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.

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.

Beginning with the FFY 2021 SPP/APR, due February 1, 2023, when reporting 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 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.

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year.

Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each

indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

Historical Data

Baseline Year	Baseline Data
2020	51.92%

FFY	2015	2016	2017	2018	2019
Target >=	36.00%	37.00%	37.00%	38.00%	38.00%
Data	41.55%	39.62%	41.50%	38.04%	NVR

Targets

FFY	2020	2021	2022	2023	2024	2025
Target >=	52.00%	54.00%	56.00%	58.00%	60.00%	62.00%

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1,418	2,731	NVR	52.00%	51.92%	N/A	N/A

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.

The NHDOE and Panorama followed procedures used to combine data from both the school age and preschool surveys in a manner that is valid and reliable.

The New Hampshire Department of Education (NHDOE) works with Panorama Education to administer, analyze, and report the results of the New Hampshire Parent Involvement Survey in Special Education. The survey results provide data for reporting requirements for the Department of Education's Special Education State Performance Plan, specifically Indicator B-8 which measures the 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. The Indicator 8 survey questions were included in the 603 Bright Futures Survey for all families: The K-12 Survey for Families consisted of 25 questions, grouped into four topics for the ease of interpreting survey results. The Preschool Families Survey consisted of 24 questions, grouped into three topics. Both surveys were distributed the exact same way, scored the same way, analyzed results in the same way and considered parents with an average score of 4.0 or higher as meeting the indicator.

The final analytic data set was comprised of 152 preschool responses and 3392 school age responses, for a total of 3544 responses. The 2021 Family Survey was distributed to all parents (31,024) across the state of New Hampshire electronically by districts, schools, the state, and even news outlets, through an open survey link.

The number of parents to whom the surveys were distributed.

31,024

Percentage of respondent parents

8.80%

Response Rate

FFY	2019	2020
Response Rate	15.57%	8.80%

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 New Hampshire Department of Education Bureau of Special Education is receiving targeted technical assistance from IDC staff to address several issues about the Indicator 8 Survey to increase the response rate. Since September 2021, the Bureau has coordinated a statewide stakeholder group of families and school representatives including groups that are underrepresented to provide training implementing the Indicator 8 Toolkit. The work provided training to revise the Indicator 8 Survey items; to provide stakeholders with strategies to work with their families to understand the importance of the survey; and to provide ongoing focus groups to work on using the results of the survey to improve outcomes for students with disabilities. The revised survey items for Indicator 8 based on stakeholder input will be included in the 603 Bright Futures that will be released in early spring. The shift in the timeline based on stakeholder feedback and the increased interest in the field from schools and family organizations about the importance of the parent survey is a huge step in reaching groups that have been underrepresented in the past to increase the response rate year after year. The New Hampshire Department of Education Bureau of Special Education intends to continue the Indicator 8 Survey Item stakeholder group to implement strategies, which are expected to increase the response rate year over year, particularly those groups that are underrepresented. The Indicator 8 Parent Survey Items Selection Stakeholder Workgroup identified 10 Survey Items that best evidenced specific examples of what families and schools felt schools should be facilitating parent involvement in the special education process. The stakeholder workgroup also provided specific recommendations to increase the Indicator 8 Survey both in response rate and in the analysis of the survey to show that the demographics of the parents responding are representative of the demographics of children receiving special education services in the State. The New Hampshire Department of Education Bureau of Special Education Supports believes that making the survey shorter in questions that validate how schools facilitate family involvement along with an earlier time frame in the school year (spring of 2022) will improve the overall response rates in the future. The New Hampshire Department of Education Bureau of Special Education is implementing several other strategies to increase the participation rate of the surveys. Such strategies include revising the survey administration to an online platform to promote an effortless way for participants to complete it; making sure the survey instructions are clear; and revising the language of the question items with appropriate reading levels. Other strategies being considered includes the length of survey that maintains the appropriate amount of information to increase the response rate year over year, particularly for those groups that are underrepresented. The New Hampshire Department of Education Bureau of Special Education believes that continued work with IDC and the stakeholder group will support the possibility to increase the response rate year over year, particularly those groups that are underrepresented.

This year, Indicator 8 survey items were grouped into the 603 Bright Futures Survey across the state of New Hampshire. Due to the amount of preparation needed for the 603 Bright Futures Survey; there was a delay in releasing the survey until late June. It was a challenge to communicate with families during the summer months for survey participation. Recognizing that time of the year and a lengthier survey played a part in a decrease in participation we have approached the next year with a new learning on surveys and communications.

The New Hampshire Department of Education Bureau of Special Education Supports has utilized the IDEA Data Center Technical Assistants for Indicator 8 from September to December of this year involving the Indicator 8 Parent Survey Item Selection Stakeholder Workgroup. This work has also supported the 603 Bright Futures Survey work to engage families in general including parents with disabilities, particularly for those groups that are underrepresented.

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.

The New Hampshire Department of Education Bureau of Special Education intends to continue to work with the IDEA Data Center to provide targeted technical assistance regarding the ability to ensure that the response data are valid and reliable, including how the data represent the demographics of the state. The New Hampshire Department of Education Bureau of Special Education plans to use the Indicator 8 Parent Survey Toolkit to engage school administrators, teachers, parents, and students in the data collection activities to analyze that the Indicator B8 data "representativeness". This work will include addressing any nonresponse bias identified and the steps taken to reduce any identified bias and promote response from a broad cross section of families that that received Part B services. The goal of the work is to implement evidence-based practices to ensure that the demographics of the students whose parents participated in data collection activities are representative of the demographics of all children receiving special education services in the state.

The New Hampshire Department of Education has received over 27 hours of technical assistance related to the Indicator 8 response rate according to the Indicator 8 toolkit. The work supported a NH Indicator 8 Stakeholder Survey Item Selection. This stakeholder group will continue to work to learn and apply how to improve the current practice to improve our analysis of the response rate to include analysis of the identification of any identified bias. This work will also include steps to reduce any identified bias and promote response from a cross section of families that received Part B services.

The New Hampshire Department of Education Bureau of Special Education worked with districts to provide the families the opportunity to take the survey to address an increase in the response group that is representative of the demographics of children receiving special education services.

In 2021, the NHDOE released Memo #31 2021 Parent Involvement Survey in Special Education Administration Process Change. The memo informed that all districts are required to administer the 2021 Parent involvement Survey in Special Education as part of the 603 Bright Futures Survey. The memo also informed the districts are responsible to share an online survey link with all families across your district. This means the link can be e-mailed, texted, placed on your website or any other approach that brings visibility to it. To ensure districts invited families of students with disabilities to participate in the 603 Bright Futures Survey and for ease of electronic distribution, the NHDOE provided each district a password protected parent email report in the New Hampshire Special Education System (NHSEIS). Districts provided the link to the 603 Bright Futures to send the survey to their families whose children receive IEP Services directly by email. Panorama Education worked with family organizations such as the NH Parent information Center; schools, and district staff to support families to complete the survey and to allow districts to monitor response rates via the online support portal support+NHDOE@panoramaed.com. This process was an intentional effort for the NHDOE to ensure that the FFY 2020 data are from a response group that is representative of the demographics of children receiving special education services.

The New Hampshire Department of Education Bureau of Special Education Support intends to continue to work with the IDEA Data Center in particular to calculate overall response rates to know whether the group of responders is representative of your overall parent population. – Item response rate. This work will include developing strategies to look at how to calculate item response rates to know whether particular groups of parents were more or less likely to respond to certain items on the survey, which may affect the representativeness of your data. Included in the work New Hampshire will also develop strategies to address Nonresponse bias to identify when the individuals who complete the survey differ in meaningful ways from those who do not. For example, if parents who are less involved in their children's education are less likely to respond than parents who are more involved, if the results of the survey will be biased and if parents who are less involved will be underrepresented. The work will develop strategies to build a plan to conduct nonresponse follow-up to minimize the possibility of bias and take steps to check for nonresponse bias after data are collected. The goal of the work is to develop strategies to carefully select the mechanism for getting parents to participate and to notify parents (or school administrators, teachers, or other groups you may be collecting data from) about the data collection effort, they will need to make sure they follow through and actually participate in the survey.

The strategy will also include a plan to conduct nonresponse follow-up to minimize the possibility of bias and take steps to check for nonresponse bias

after data are collected. New Hampshire plans to carefully select the mechanism for getting parents to participate.. Several strategies and approaches include:

- Sending the survey directly to parents by mail or email ;
- Providing the survey link to parents during in-person meetings or at pick-up/drop-off times
- Having parents complete the survey when they visit the school, and
- Sending information about the survey home with students for parents to complete and return to the school.

The New Hampshire Department of Education Bureau of Special Education intends to receive technical assistance from the IDC to consult with key stakeholders to consider the options of various approaches supported by the Indicator 8 Toolkit. The goal of this work is to improve the analysis of the response rate to include strategies to address any nonresponse bias that promotes response from a broad cross section of families that received Part B services for the 2020 Indicator 8 Parent Survey .

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 should consider categories such as race/ethnicity, age of student, disability category, and geographic location in the State.

Parents provided information on the survey about the characteristics of their children. According to their responses, students who had parents respond to the survey were generally representative of the state’s population of students receiving special education services (based on the population of students served during the 20-21 school year). Similar to past work, we used a 5% threshold. Results were over or under representative of the population. The demographic characteristics besides race and disability also included respondent gender and student age.

There are two cases where the survey data was more than 5% over-represented

- Responding parents of student primary exceptionality and disability were 28 % overrepresented for the No response category where respondents chose not to specify their child’s disability.
- Responding parents of students with two or more for race were 9% over represented.

There was one case where responding parents of student primary disability other health impaired were 9 % underrepresented.

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.

The New Hampshire Department of Education Bureau of Special Education intends to continue to work with the IDEA Data Center to provide targeted technical assistance regarding the ability to ensure that the response data are valid and reliable, including how the data represent the demographics of the state. The New Hampshire Department of Education Bureau of Special Education plans to use the Indicator 8 Parent Survey Toolkit to engage school administrators, teachers, parents, and students in the data collection activities to analyze that the Indicator B8 data “representativeness”. The goal of the work is to implement evidence based practices to ensure that the demographics of the students whose parents participated in data collection activities are representative of the demographics of all children receiving special education services in the state.. This work will include strategies to look at how to calculate item response rates to know whether particular groups of parents were more or less likely to respond to certain items on the survey and ways for districts to address Nonresponse bias to identify when the individuals who complete the survey differ in meaningful ways from those who do not.

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

New Hampshire completed an extensive review of the demographic characteristics of respondents to determine their representativeness of the target population. The metric used compared the New Hampshire Statewide Census for Students with Disabilities to the survey result where respondents indicated race; disability, student gender and age.

New Hampshire chose 5% to compare the survey results to the Statewide Data Census for Students with Disabilities since that seemed like a reasonable place to tell us where the respondent data was most different from the population.

The metric calculation included the following steps : calculations, it was pretty straightforward:

For calculations, it was pretty straightforward:

- The Bureau summarized the respondents by a variety of demographics.
- The Bureau summarized statewide parents by a variety of demographics.
- The Bureau compared where respondents were 5% higher or lower than statewide demographics.

Given the small number of responses, it was determined that the data evidenced the following variances in representation by more than 5% in the following ways:

Parents provided information on the survey about the characteristics of their children.

According to their responses, students who had parents respond to the survey were generally representative of the state’s population of students receiving special education services (based on the population of students served during the 20-21 school year). Similar to past work, we used a 5% threshold. There are two cases where the survey data was more than 5% over-represented:

Responding parents of student primary exceptionality and disability were 28 % overrepresented for the No response category where respondents chose not to specify their child’s disability.

- Responding parents of student primary exceptionality and disability were 28 % overrepresented for the No response category where respondents chose not to specify their child’s disability.
- Responding parents of students with two or more for race were 9% over represented.

Sampling Question	Yes / No
Was sampling used?	NO

Survey Question	Yes / No
Was a survey used?	YES

Survey Question	Yes / No
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)

The New Hampshire Department of Education Bureau of Special Education looks forward to continuing the work with the IDEA Data Center to engage stakeholders in targeted technical assistance to improve the administration and analysis of the Indicator 8 Parent Survey. The purpose of the work is to increase the response rate and to ensure the responses reflect the demographics of all children receiving special education services in the state. This work will also provide districts with targeted technical assistance to implement how to increase how schools facilitate parent involvement in the special education process that validates to families and schools by incorporating the survey results in the improvement process. The New Hampshire Department of Education Bureau of Special Education implemented several strategies to address potential impact COVID could have on the results of the data quality that included :

- Targeted technical assistance vis phone calls; emails, and the indicator 8 support portal to assist districts to provide the survey specifically to parents of students with disabilities
- Outreach to New Hampshire organizations such as the New Hampshire Parent Information Center and New Hampshire Family Voices to provide information to families about the survey
- Outreach to the New Hampshire WMUR television station where Commissioner Edelblut interviewed about the Importance of the survey.
- Significant marketing from Panorama Education to provide a social media campaign for schools and organizations

8 - Prior FFY Required Actions

The State did not provide valid and reliable data for FFY 2019. The State must provide valid and reliable data for FFY 2020 in the FFY 2020 SPP/APR.

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 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 2019 SPP/APR

8 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

8 - 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.

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.

Measurement

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 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 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 2020 reporting period (i.e., after June 30, 2021).

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 2020 SPP/APR, the data for FFY 2019), and the State did not identify any findings of noncompliance, provide an explanation of why 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	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

FFY 2020 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.

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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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
0	0	34	0.00%	0%	0.00%	N/A	N/A

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).

Definition of "Disproportionate Representation" and Methodology

Definition of Disproportionate Representation

The NHDOE has defined disproportionate representation of racial and ethnic groups in special education and related services as a weighted risk ratio above 3.00 for the reporting year.

Methodology

All racial/ethnic groups were included in the analysis, as required by OSEP. A weighted risk ratio was used in analyzing the district data. In order to calculate the weighted risk ratio, there had to be at least two racial/ethnic subgroups in the district that met the minimum cell and "n" sizes. The minimum "n" size was defined as at least 40 students enrolled in the district in two or more racial/ethnic subgroups and within those subgroups, at least the minimum cell size was defined as at least 10 students identified as receiving special education and related services. The cell size was selected to protect individually identifiable student information and to ensure that there were sufficient students in the subgroups to allow for appropriate identification of disproportionate representation. The OSEP/Westat technical guide: Methods for Assessing Racial/Ethnic Disproportionality in Special Education: A Technical Assistance Guide, July 2007 was used in developing this methodology. The NHDOE used the electronic spreadsheet developed by Westat that calculates both weighted and un-weighted risk ratios to determine state and district level data. Using the criteria established above, the NHDOE determined that, out of 175 school districts, 34 school districts met the cell and N size requirement for data analysis. Of those 34 school districts, 0 were identified as meeting the data threshold for disproportionate representation of over 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.

Through the process used for this indicator (described above), if any districts identified in Step One had been determined to have overrepresentation in the identification of students with disabilities, the NHDOE would have utilized the following monitoring process to determine whether the disproportionate representation (see above definition) was the result of inappropriate identification. The NHDOE would examine the districts' child find, evaluation, eligibility and other related policies, procedures and practices to ensure an equitable consideration for special education and related services for all racial and ethnic groups and that those eligibility determinations were conducted appropriately. For each district that met the criteria in Step One, the State would have consulted with the local Director of Special Education regarding the data and reviewed local policies, procedures and practices related to this indicator. In addition, the NHDOE would have reviewed the data for complaints and due process hearings for any issues regarding inappropriate identification that may have been found in either of these dispute resolution mechanisms

Provide additional information about this indicator (optional)

Based on the large number of districts excluded from analysis each year and stakeholder input New Hampshire will be changing our calculation methodology in order to exclude fewer districts from analysis beginning in FFY21.

Correction of Findings of Noncompliance Identified in FFY 2019

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 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

9 - Prior FFY Required Actions

None

9 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

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.

Measurement

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 FFY 2020, 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 2020 reporting period (i.e., after June 30, 2021).

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 2020 SPP/APR, the data for FFY 2019), 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.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

FFY	2015	2016	2017	2018	2019
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	0%	0%	0%	0%	0%	0%

FFY 2020 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.

160

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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
0	0	15	0.00%	0%	0.00%	N/A	N/A

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).

Definition of “Disproportionate Representation” and Methodology

Definition of Disproportionate Representation

The NHDOE has defined disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification as a weighted risk ratio above 3.00 for the reporting year.

Methodology

All racial/ethnic groups were included in the analysis, as required by OSEP. A weighted risk ratio was used in analyzing the district data. In order to calculate the weighted risk ratio, there had to be at least two racial/ethnic subgroups in the district that met the minimum “n” size. The minimum “n” size was defined as at least 40 students enrolled in the district in two or more racial/ethnic subgroups and within those subgroups, at least 10 students identified in the specific disability category (specific learning disability, intellectual disability, autism, other health impaired, speech language impaired, and emotional disturbance) for the racial/ethnic subgroup being compared. The cell size was selected to protect individually identifiable student information and to ensure that there were sufficient students in the subgroups to allow for appropriate identification of disproportionate representation. The OSEP/Westat technical guide: Methods for Assessing Racial/Ethnic Disproportionality in Special Education: A Technical Assistance Guide, July 2007 was used in developing this methodology. The NHDOE used the electronic spreadsheet developed by Westat that calculates both weighted and un-weighted risk ratios to determine state and district level data. Using the criteria established above, the NHDOE determined that, out of 175 school districts, 15 school districts met the cell and N size requirement for data analysis. Of the 15 school districts that met the cell size requirements, none were identified as meeting the data threshold for disproportionate overrepresentation.

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.

Through the process used for this indicator (described above), if any districts identified in Step One had been determined to have overrepresentation in the identification of students with disabilities, the NHDOE would have utilized the following monitoring process to determine whether the disproportionate representation (see above definition) was the result of inappropriate identification. The NHDOE would examine the districts’ child find, evaluation, eligibility and other related policies, procedures and practices to ensure an equitable consideration for specific disability categories for all racial and ethnic groups and that those eligibility determinations were conducted appropriately. For each district that met the criteria in Step One, the State would have consulted with the local Director of Special Education regarding the data and reviewed local policies, procedures and practices related to this indicator. In addition, the NHDOE would have reviewed the data for complaints and due process hearings for any issues regarding inappropriate identification that may have been found in either of these dispute resolution mechanisms

Provide additional information about this indicator (optional)

Based on the large number of districts excluded from analysis each year and stakeholder input New Hampshire will be changing our calculation methodology in order to exclude fewer districts from analysis beginning in FFY21.

Correction of Findings of Noncompliance Identified in FFY 2019

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 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

10 - Prior FFY Required Actions

None

10 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

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 2020 SPP/APR, the data for FFY 2019), 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
2020	98.03%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	95.92%	94.96%	97.30%	98.27%	99.16%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 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 State-established timeline)	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
1,774	1,739	99.16%	100%	98.03%	N/A	N/A

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

35

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.

Of the 1,774 children for whom parental consent for initial evaluation was received, 35 children did not have evaluations completed within the 60 day timeframe within which the evaluation must be completed. The 35 children were from a total of 14 districts. Pursuant to the OSEP FAQ dated 9/3/08, NHDOE groups individual instances of noncompliance in a district related to this Indicator as one corrective action for noncompliance for each of the 14 districts. The review of FFY 20 data resulted in 35 new findings of noncompliance. The findings were made in FFY 20 and NHDOE will report on correction of those findings in the FFY 21 APR.

In analyzing the data, the majority of delays occurred between 1 and 15 days past the timeline. The reasons for delay, in part due to the COVID-19 pandemic, include lack of understanding of the evaluation process, timelines, data entry errors, and scheduling issues. The NHDOE recommended intensive technical assistance for each district to directly address data analysis, data entry issues, express adherence to timelines to alleviate noncompliance, and procedural errors, including scheduling, and discussion of possible resolutions both procedural and in practice. This training for Indicator 11 was offered again multiple times in the fall and training in NHSEIS was continually offered throughout the year. Training attendance was recommended for Special Education Administrators, Special Educators, Administrative Assistants, and others pertinent staff involved in the initial evaluation process.

- 1 - 15 Days = 18
- 16 - 30 Days = 9
- 31 - 45 Days = 4
- 46 – 164 Days =4

Indicate the evaluation timeline used:

The State used the 60 day timeframe within which the evaluation must be conducted

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

State monitoring

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 NHDOE monitored each district in the State for compliance with this indicator. The data for this indicator were mostly available through the State database, the New Hampshire Special Education Information System (NHSEIS). All data for FFY 20 were collected on all children for whom parental consent for initial evaluation was received and then entered into NHSEIS. All information entered into NHSEIS by district staff related to this indicator can yield all data needed for State monitoring. A report was generated by the State from NHSEIS to monitor through review of the report to determine compliance. The time period for data collection with this indicator is August 15, 2020 and November 15, 2020.

NHSEIS does not collect data on allowable exceptions. These additional data points for this indicator were collected through a State monitoring process involving submission documentation from the districts to the NHDOE, collected in a structured manner using forms combined with supporting evidence. The State then monitored this indicator through examination of evidence submitted to determine if compliance was demonstrated, noted as a desk audit described below.

A desk audit allowed districts to present evidence of allowable exceptions to the timeline when the timeframe set for initial evaluation did not apply to a public agency because: 1) the parent of a child repeatedly failed or refused to produce the child for evaluation, or 2) a child enrolls in a school of another public agency after the start of the relevant 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,” as allowed by 34 CFR §300.301(d). As permitted by OSEP in the Measurement Table, the NHDOE did not report these exceptions in either the numerator or denominator. For the FFY 20 APR, after completion of State monitoring to review exceptions, evidence of compliance with allowable exceptions applied to 17 students, each having moved to another public agency.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
17	17	0	0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

The NHDOE has verified that each LEA with noncompliance identified in FFY 19 for this indicator has corrected the identified noncompliance, consistent with OSEP Memo 09-02, as follows: The NHDOE verified that each district was correctly implementing 34 CFR 300.301(c), (i.e. achieved 100% compliance) based on a review of data subsequently collected through a desk audit monitoring process. During the correction period, the NHDOE reviewed local policies and procedures and provided on-site technical assistance to districts to support the timely evaluation process, including accurate data collection and entry in order to ensure districts were providing timely evaluations.

These findings reflect all noncompliance identified with this indicator through monitoring and data collections. Written findings were made consistent with

OSEP Memo 09-02 that identified LEA's where noncompliance occurred and their levels of noncompliance are included in the regulatory citations. All noncompliant practices were addressed through root cause analysis and improvement activities. Policies and procedures were revised as necessary.

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

The NHDOE conducted a thorough data review to verify timeliness of initial evaluations. If additional information was needed, the NHDOE contacted the school district to submit evidence of timeliness of initial evaluation for individual cases. The NHDOE conducted a desk audit of the documentation to verify timeliness of evaluations, and if untimely, the child was no longer within the jurisdiction of the LEA prior to identification of findings. For each district that had findings of noncompliance, a desk audit occurred after submission of evidence for each individual case for verification that all required corrective actions were completed; therefore, the NHDOE verified that, for each of these individual cases, the district had completed the required action, although late, unless the child was no longer in the jurisdiction of the LEA, prior to the identification of findings, as reported in the FFY 19 APR.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 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 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 SPP/APR

11 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

11 - 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.

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 2020 SPP/APR, the data for FFY 2019), 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
2020	95.39%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	97.67%	97.13%	97.88%	98.35%	90.37%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	274
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	45

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	207
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.	8
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	4
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.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2019 Data	FFY 2020 Target	FFY 2020 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.	207	217	90.37%	100%	95.39%	N/A	N/A

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
10

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.

Noncompliance occurred with 10 transitions occurring across six districts. Two of the impacted children, within one district were found to be ineligible following their third birthdays. The remaining eight children were identified as eligible and had IEPs fully developed and implemented after their third birthdays. Reasons for delay included lack of understanding regarding the timeline and districts responsibility regarding the transition process due to staff turnover and transition and/or missing documentation regarding potentially valid delays.

Range of days beyond the third birthday: 0-15 days: 1, 16-30 days: 2, 31-45 days: 1, 46-60: 3, 61-75 days: 1, 76-90 days: 0, 90+ days: 2

Attach PDF table (optional)

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

State monitoring

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.

Data were collected for this indicator through a monitoring process, as the data required for this indicator were only partially available through the State database known as NH Special Education Information System (NHSEIS). This was the seventh year that NH Part C data transferred automatically into the Part B data system and the State was able to create a report of all children who were referred from Part C to Part B. Once the preliminary report was generated, the NHDOE, in conjunction with RACE2K (the NHDOE funded TA center), verified with districts additional data elements that were required to determine compliance. The New Hampshire Department of Education, Bureau of Special Education Supports collected data from each district in the State to determine compliance with this indicator. Data were collected on all children who were served in Part C and referred to Part B for eligibility determination from the time period of July 1 – October 31, 2020. The data were collected from all geographic areas and accurately represent data for the full reporting period.

In order to ensure data quality, the NHDOE verified available data points in NHSEIS. In addition, RACE2K and NHDOE staff conducted virtual reviews of files, policies and procedures as needed. This is the same process that was used to report in the FFY 2019 APR.

Provide additional information about this indicator (optional)

Through an extensive desk audit, New Hampshire Department of Education (NHDOE) identified a pattern of issues related to staff turnover and succession planning, including lack of training on district policies and expectations under the interagency agreements and missing documentation for transitions occurring prior to the arrival of the new staff. Many of these staff losses and transitions reflected the state trend in early retirements and staff leaving the field due to COVID stresses. To address the issue in Spring 2021, NHDOE and Race2K provided individualized TA to the impacted districts regarding document maintenance and succession planning. Additional TA was incorporated into Leadership PLCs facilitated by Race2K as well as the annual trainings regarding Indicator 12 conducted by the NHDOE. Other strategies, including increased networking and collegial supports a state-level focus on recruitment and retention efforts are being implemented beginning in the 2021-2022 school year.

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
9	9	0	0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

The NHDOE has verified that each LEA with noncompliance identified in FFY 2019 for this indicator has corrected the identified noncompliance, consistent with OSEP Memo 09-02, as follows:

The NHDOE verified that each district identified in FFY 2019 with noncompliance was correctly implementing the regulatory requirements (34 CFR §300.124(b) i.e., achieved 100% compliance) based on a review of data subsequently collected through a desk audit monitoring process. This

subsequent desk audit included a review of data in the State data system followed by a review of evidence documenting valid reasons for delays (parents did not make the child available) or late referrals to Part C. During the correction period, RACE2K, an initiative funded by the NHDOE, Bureau of Student Supports through the NH Parent Information Center (PIC) provided technical assistance and reviewed local policies and procedures to support districts with timely and quality transitions in compliance with the regulations. Through this desk audit process, the NHDOE verified that each of the districts identified in FFY 2019 with noncompliance for Indicator 12 was correctly implementing the regulatory requirements as soon as possible but in no case greater than 1 year from notification.

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

The NHDOE has verified that the identified districts had completed the special education process for each individual case of noncompliance, though late. This verification occurred through a review of each affected child's data which demonstrated that each district had either received written non-consent for evaluation from the parents, determined ineligibility, or developed and implemented the IEP, though late.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2018	5	5	0

FFY 2018

Findings of Noncompliance Verified as Corrected

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

The NHDOE has verified that each LEA with noncompliance identified in FFY 2018 for this indicator has corrected the identified noncompliance, consistent with OSEP Memo 09-02, as follows:

The NHDOE verified that each district identified in FFY 2018 with noncompliance was correctly implementing the regulatory requirements (34 CFR §300.124(b) i.e., achieved 100% compliance) based on a review of data subsequently collected through a desk audit monitoring process. The desk audit included a review of data for transitions that occurred subsequent to the determination of finding in the State data system followed by a review of evidence documenting valid reasons for delays (parents did not make the child available) or late referrals to Part C. During the correction period, RACE2K, an initiative funded by the NHDOE, Bureau of Student Supports through the NH Parent Information Center (PIC) provided technical assistance and reviewed local policies and procedures to support districts with timely and quality transitions in compliance with the regulations. Through this desk audit process, the NHDOE verified that each of the districts identified in FFY 2018 with noncompliance for Indicator 12 was correctly implementing the regulatory requirements as soon as possible but in no case greater than 1 year from notification.

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

The NHDOE has verified that the identified districts had developed and implemented the IEP for each individual case of noncompliance, though late, unless the child was no longer within the jurisdiction of the LEA. This verification occurred through a review of each affected child's data which demonstrated that each district had developed and implemented the IEP for these children.

12 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining five uncorrected findings of noncompliance identified in FFY 2018 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and each LEA with remaining noncompliance identified in FFY 2018: (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 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 SPP/APR

12 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

12 - 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.

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 2020 SPP/APR, the data for FFY 2019), 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
2020	64.29%

FFY	2015	2016	2017	2018	2019
Target	100%	100%	100%	100%	100%
Data	56.76%	56.90%	71.88%	33.33%	90.22%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target	100%	100%	100%	100%	100%	100%

FFY 2020 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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
54	84	90.22%	100%	64.29%	N/A	N/A

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

State monitoring

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.

Between FFY 2005–FFY 2010, all NH school districts had been monitored for Indicator 13, as mandated by OSEP. The NHDOE, with input and guidance from Data Accountability Center (DAC) and Northeast Regional Resource Center (NERRC), began a new process for Indicator 13 compliance review monitoring for FFY 2011 marking the beginning of a new five-year monitoring cycle for Indicator 13, in order to complete monitoring of all districts during the FFY 2005 SPP. For the SPP beginning in FFY 2013, the NHDOE began a new 6 year monitoring cycle. This six-year monitoring cycle has allowed the NHDOE to monitor every public high school in NH, including two public academies, within the six-year time frame, for Indicator 13 Compliance.

The NHDOE randomly selects high schools to participate in Indicator 13 monitoring to ensure that all high schools will be monitored during the six-year cycle. In FFY20 there were 13 high schools monitored. Reporting for this Indicator is done only at the high school level, just as is done for Indicator 1 (graduation) and Indicator 2 (dropout), and is no longer done at the district level. Once a NH high school is randomly selected, monitored, and meets 100% compliance for Indicator 13, they are removed from the selection process until the six-year cycle is complete.

The New Hampshire Process:

Randomly selected high schools are notified three years prior to the start of the school year in which they are monitored. Professional development opportunities were made available at no cost to the schools by the NHDOE in the areas of understanding the components of compliance, secondary transition, & writing measurable post-secondary goals. High schools were encouraged to take advantage of trainings offered by the NHDOE.

In preparation to meet the requirements for Indicator 13, it was recommended that high school special education staff: (1) review the I-13 checklist found in the Indicator 13 Guidance Document (see below); (2) complete the Best Practices in Planning for Transition on line module available free at <https://www.transitioncoalition.org>, and (3) schedule professional coaching on Indicator 13 either in-person or electronically.

Once a high school was selected for monitoring, the NHDOE used an on-site and desk audit file review process for monitoring Indicator 13 Compliance. Due to COVID-19 school visitation policies the monitoring process for two high schools was conducted via desk audit, through the NHSEIS data base, and Zoom meeting. NHDOE staff and/or qualified reviewers trained by the NHDOE conducted the file reviews. High schools were responsible for ensuring that evidence of compliance with Indicator 13 was in the students' IEPs and/or their IEP files.

Due to COVID-19 restrictions, trainings, generally offered and provided in person at each high school the year prior to the on-site monitoring, were conducted as three separate virtual trainings that high school special education staff could register to attend. These trainings did not capture staff as school teams or provide individualization. High schools did not request individual coaching sessions since this time of remote/hybrid instruction created hectic schedules.

The New Hampshire Special Education System (NHSEIS) was used to generate student level information regarding this Indicator. The data was used to select student files to be reviewed that was a representative sample considering gender, age, ethnicity, and disability. For the 2020-2021 school year, the number of files reviewed was based on district special education enrollment of students age 16 and up and was as follows:

District enrollment of 46 or more students age 16 and up – 8 files

District enrollment 31 to 45 students age 16 and up – 6 files

District enrollment of 30 or fewer students age 16 and up – 4 files

The NHDOE generated a list that had twice as many files for review, keeping in mind that unexpected changes could occur to a student's status, such as transferring to another school district. The NHDOE notified high schools approximately 6 - 8 weeks prior to the scheduled date for the monitoring of randomly selected student files. In the fall of the year of the monitoring activities the NHDOE scheduled mutually agreed upon dates, (occurring in the winter or spring of that school year), with each selected high school, for the I-13 on-site compliance monitoring visit.

The NHDOE conducted either on-site visits or desk audits with zoom meetings to review student IEP files according to the scheduled dates. The NHDOE reviewers who conducted the monitoring consisted of two NHDOE team members (see I-13 Guidance Document <https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/sonh/guidance-document.pdf>).

From the sample list of students provided by the NHDOE, (which contained the twice the number of files needed for the monitoring), the high school selected the files to be reviewed. NHDOE reviewers used the NH Indicator 13 Compliance Checklist to review the files at the on-site visit. In order to meet the compliance requirements, all 8 elements of the checklist must have been verified as correct (yes) or in some cases, (N/A), in order to be in full compliance. (The checklist used may be accessed at:

<https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/sonh/compliance-checklist-form.pdf>).

The NHDOE entered data from completed Indicator 13 compliance checklist forms into the Indicator 13 Compliance database which collects the following information: District name, School Name, Student ID #, NHDOE team reviewer's names, date of finding(s), items of noncompliance, date of written notification to district of noncompliance, date of correction/verification visit, and date of the closure letter noting 100% compliance. The NHDOE calculated State compliance percentage by dividing the total number of compliant files reviewed by the total number of reviewed files. (Example: Seven (7) files out of eight (8) files met compliance = $7/8 \times 100 = 87.5\%$ compliance). High schools were notified in writing as soon as possible, but no later than 90 days from the date of the on-site file review visit of the findings of compliance or noncompliance.

Question	Yes / No
Do the State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16?	NO

Provide additional information about this indicator (optional)

NH only monitors a percent of youth with IEPs aged 16 and above with an IEP. Monitoring of students' files under general supervision includes monitoring the student's courses of study for students who are age 14 and 15.

Ed 1109.01 (a) (10) of NH's Standards for the Education of Students with Disabilities states that "Each IEP shall include a statement of transition services that meets the requirements of 34 CFR 300.43 and 34 CFR 300.320(b) with the exception that a plan for each student with a disability beginning at age 14 or younger, if determined appropriate by the IEP team, shall include a statement of the transition service needs of the student under the applicable components of the student's IEP that focuses on the student's courses of study such as participation in advanced- placement courses, vocational education or career and technical education.

The students' files monitored for Indicator 13 are all students who are age 16 or older. Monitoring of students' files under general supervision includes monitoring the student's courses of study for students who are age 14 and 15.

Correction of Findings of Noncompliance Identified in FFY 2019

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
4	4	0	0

FFY 2019 Findings of Noncompliance Verified as Corrected

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

Pursuant to the OSEP FAQ dated 9/3/08, the NHDOE groups individual instances of noncompliance for this Indicator by District as one finding of noncompliance. In FFY 2019, there were 4 written findings of noncompliance relative to this indicator from 4 districts. After the written finding of noncompliance was made, the NHDOE and the district determined what, if any, additional technical assistance and/or coaching needed to be provided to the district by the NHDOE. Once the agreed upon technical assistance and/or coaching occurred, the NHDOE conducted a verification visit in each of the districts with noncompliance at a mutually agreed upon date. At the verification visit, the NHDOE reviewed files for newly selected students to verify evidence the district was subsequently correctly implementing the regulatory requirements, as identified through the Indicator 13 Compliance Checklist. The NHDOE verified that 4 of the 4 Districts were correctly implementing the regulatory requirements with 100% compliance for this indicator within one year of the written finding of noncompliance.

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

After the written finding of noncompliance was made, the NHDOE and the District determined what, if any, additional technical assistance and coaching needed to be provided to the District by the NHDOE. Each of the 4 Districts with a finding of noncompliance were required to correct each individual instance of child-specific noncompliance by amending the IEP, within 60 days of the written finding of noncompliance. These corrections were verified by the NHDOE by a desk audit.

Correction of Findings of Noncompliance Identified Prior to FFY 2019

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2019 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 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 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 2020 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 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

Response to actions required in FFY 2019 SPP/APR

13 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

13 - 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.

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 [General Instructions](#) on page 2 for additional instructions on sampling.)

Collect data by September 2021 on students who left school during 2019-2020, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2019-2020 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 2020 SPP/APR, compare the FFY 2020 response rate to the FFY 2019 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.

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 should consider categories such as race/ethnicity, disability category, and geographic location in the State.

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.

Beginning with the FFY 2021 SPP/APR, due Feb. 1, 2023, when reporting the extent to which the demographics of respondents 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.

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2015	2016	2017	2018	2019
A	2020	Target >=	39.56%	39.56%	39.56%	40.40%	40.40%
A	45.45%	Data	38.89%	29.48%	36.36%	48.18%	41.80%
B	2020	Target >=	63.11%	63.11%	63.11%	64.00%	64.00%
B	80.30%	Data	66.67%	62.31%	66.23%	79.09%	68.85%
C	2020	Target >=	77.78%	77.78%	77.78%	78.20%	78.20%
C	93.94%	Data	81.48%	80.22%	75.97%	84.55%	83.61%

FFY 2020 Targets

FFY	2020	2021	2022	2023	2024	2025
Target A >=	45.45%	45.45%	50.50%	50.50%	50.50%	50.50%
Target B >=	80.30%	80.30%	85.30%	85.30%	90.30%	90.30%
Target C >=	93.94%	95.00%	96.00%	97.00%	98.00%	98.00%

Targets: Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state’s efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a

meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year.

Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

FFY 2020 SPP/APR Data

Total number of targeted youth in the sample or census	2,559
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	66
Response Rate	2.58%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	30
2. Number of respondent youth who competitively employed within one year of leaving high school	23
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)	4
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).	5

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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
A. Enrolled in higher education (1)	30	66	41.80%	45.45%	45.45%	N/A	N/A
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	53	66	68.85%	80.30%	80.30%	N/A	N/A
C. Enrolled in higher education, or in some other	62	66	83.61%	93.94%	93.94%	N/A	N/A

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 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)							

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	2019	2020
Response Rate	5.00%	2.58%

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 New Hampshire Department of Education Bureau of Special Education is receiving targeted technical assistance from IDC staff and the National Center on Transition to address several issues about the Indicator 14 Survey to increase the response rate year over year, particularly for those groups that are underrepresented. The work will involve technical assistance to an Indicator 14 Stakeholder group similar to the work of the Indicator 8 Survey Item Stakeholder group to review the requirements of the Indicator 14 Post School Outcomes Survey and develop an improved survey administration that allows districts to work with the students who are eligible to take the survey. The goal of the Indicator 14 Stakeholder work is to provide districts strategies from the IDC that specifically addresses how to increase the response rate and to connect this indicator to Indicators that involve Graduation; Drop Out, and Transition. On September 22, 2021 the New Hampshire Department of Education Bureau of Special Education staff attended the IDC's webinar, Let Your Data Guide You: Making Connections & Using Results From Part B Indicators 1, 2, 13, and 14. The staff followed up with the IDC to request technical assistance IDC TA needs in general to revise the current Post School Outcome Survey administration to develop strategies that allow districts to work directly with their students eligible to take the survey. The work will also connect the purpose and administration of the post school outcome survey to the purpose and work regarding Indicator involving graduation, drop out and transition. The goal of this work is to develop strategies that will increase the response rate and improve outcomes for students with disabilities as they transition to adult life activities.

The New Hampshire Department of Education Bureau of Special Education believes that technical assistance from the IDC and the Indicator 14 stakeholder group will improve outcomes to increase the response rate year over year of the Post School Outcome Survey, particularly those groups that are underrepresented.

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.

The New Hampshire Department of Education, Bureau of Special Education completed an extensive review to analyzed the response rate including any non response. The analysis included the following :

- Each District received the secured Student Exit Report based on our state data called NHSEIS from the Bureau
- The Bureau summarized the State Exit Report by a variety of demographics including race and primary disability,
- The Bureau summarized the statewide student response rate by a variety of demographics including race and primary disability
- The Bureau then compared where respondents were 5% higher or lower than statewide demographics
- Each District was provided a portal with access to their data to be notified of the responses of their students to look at their response rate including any non response bias identified at the school level .
- All districts shared with their eligible students the following link for survey completion: <https://bit.ly/nhdoepostgrad>
- Each District was provided marketing materials to provide a social media campaign to spread the word about the survey to the students who were eligible to participate in the survey
- The Bureau offered to pay district staff to reach out to interview their students who were eligible to participate in the survey
- The Bureau provided agencies and organizations who work with individuals who transitioned form high school marketing tools to provide their clients information about the survey

The New Hampshire Department of Education understands the need to improve the results of Indicator 14 involving the overall repose rate; the analysis of representativeness of the response rate including any nonresponse bias .

The New Hampshire Department of Education Bureau of Special Education intends to continue to work with the IDEA Data Center to provide targeted technical assistance regarding the ability to ensure that the response data are valid and reliable, including how the data represent the demographics of the state. The New Hampshire Department of Education Bureau of Special Education is working with the IDEA Data Center to develop strategies to improve 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 for Indicator 8 Patent Survey. The New Hampshire Department of Education Bureau of Special Education intends to look at similar strategies being developed for Indicator 8 but to address the response rate including any nonresponse bias for Indicator 14 Post School Outcome Survey. This work will include addressing any nonresponse bias identified and the steps taken to reduce any identified bias and promote response from

a broad cross section of students that received Part B services. The goal of the work is to implement evidence-based practices to ensure that the demographics of the students in the data collection activities are representative of the demographics of all children receiving special education services in the state.

This work will include developing strategies to look at how to calculate item response rates to know whether particular groups of individuals were more or less likely to respond to certain items on the survey, which may affect the representativeness of the data. Included in the work New Hampshire will also develop strategies to address Nonresponse bias to identify when the individuals who complete the survey differ in meaningful ways from those who do not. The work will develop strategies to develop a plan to conduct nonresponse follow-up to minimize the possibility of bias and take steps to check for nonresponse bias after data are collected. The outcome of the work is to develop strategies to carefully select the mechanism for getting students to participate and to notify school administrators, teachers, or other groups about the data collection effort, to encourage them to make sure individuals follow through and actually participate in the survey.

Several strategies and approaches include:

- Supporting Districts to work directly with their former students about the Post School Outcomes Survey ;
- Sending the survey directly to students by mail or email ; and
- Providing information about the survey with students who are in the transition process about the importance of the Post School Outcome Survey .

The New Hampshire Department of Education Bureau of Special Education intends to receive technical assistance from the IDC to consult with key stakeholders to consider the options of various approaches to improve outcomes for Indicator 8 and Indicator 14. The goal of this work is to improve the analysis of the response rate to include strategies to address any nonresponse bias that promotes response from a broad cross section of students that received Part B services for the 2020 Indicator 14 Post School Outcome Survey.

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.

The New Hampshire Department of Education, Bureau of Special Education completed an extensive review to analyze the response rate to 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. The analysis included the following :

- The Bureau attended several IDC technical webinars to improve the analysis of the response rate to the extent to which the response rate are representativeness and implemented strategies to support districts to work directly with their students and families for the administration and analysis at the school level
- Each District received the secured Student Exit Report based on our state data called NHSEIS from the Bureau
- The Bureau summarized the State Exit Report by a variety of demographics including race and primary disability,
- The Bureau summarized the statewide student response rate by a variety of demographics including race and primary disability
- The Bureau then compared where respondents were 5% higher or lower than statewide demographics

New Hampshire completed an extensive review as listed above of the demographic characteristics of respondents to determine their representativeness of the target population.

The demographic characteristics included race ; primary disability , and gender Given the small number of responses, it was determined that the data evidenced the following variances in representation by more than 5% for race ; primary disability, and gender in the following ways:

- An 11% underrepresentation of male students regarding
- An 8% overrepresentation of female students.
- A 16% overrepresentation of students with a primary disability of Autism.
- A 16% underrepresentation of students with a primary disability of Other Health Impairments.
- An 8% underrepresentation of students with a primary disability of Emotional Disturbance.
- A 7% overrepresentation of students with a primary disability of Multiple Disabilities.
- A 19% underrepresentation of students who were not English Language Learners.

Due to a small number of completed surveys, these differences represent very few actual students. If more students completed and returned surveys, the NH Post School Outcome survey respondent results could possibly reflect the demographic characteristics of respondents to determine the representativeness of the population. The NHDOE plans to improve the overall response rate in 2022 to address these variances regarding the representativeness among respondents of the target population. The NHDOE requests technical assistance from the IDC to consider methods to increase the response rate and its impact in relation to over and underrepresentation of specific subgroups to improve overall responsiveness of the post-school outcome survey.

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)

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.

The New Hampshire Department of Education Bureau of Special Education is working with the IDEA Data Center to develop strategies to improve 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 for Indicator 8 Patent Survey. The New Hampshire Department of Education Bureau of Special Education intends to look at similar strategies being developed for Indicator 8 but to address the response rate including any nonresponse bias for Indicator 14 Post School Outcome Survey. This work will include addressing any nonresponse bias identified and the steps taken to reduce any identified bias and promote response from a broad cross section of students that received Part B services. The goal of the work is to implement evidence-based practices to ensure that the demographics of the students in the data collection activities are representative of the demographics of all children receiving special education services in the state. This work will include developing strategies to look at how to calculate item response rates to know whether particular groups of individuals were more or less likely to respond to certain items on the survey, which may affect the representativeness of the data. Included in the work New Hampshire will also develop strategies to address Nonresponse bias to identify when the individuals who complete the survey differ in meaningful ways from those who do not. The work will develop strategies to develop a plan to conduct nonresponse follow-up to minimize the possibility of bias and take steps to check for nonresponse bias after data are collected. The outcome of the work is to develop strategies to carefully select the mechanism for getting students to participate and to notify school administrators, teachers, or other groups about the data collection effort, to encourage them to make sure individuals follow through and actually participate in the survey.

Several strategies and approaches include:

- Supporting Districts to work directly with their former students about the Post School Outcomes Survey ;
- Sending the survey directly to students by mail or email ; and

- Providing information about the survey with students who are in the transition process about the importance of the Post School Outcome Survey .

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

The New Hampshire Department of Education, Bureau of Special Education completed an extensive review to analyzed the response rate including any non response The analysis included the following :

- Each District received the secured Student Exit Report based on our state data called NHSEIS from the Bureau
- The Bureau summarized the State Exit Report by a variety of demographics including race and primary disability,
- The Bureau summarized the statewide student response rate by a variety of demographics including race and primary disability
- The Bureau then compared where respondents were 5% higher or lower than statewide demographics

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)

The New Hampshire Department of Education Bureau of Special Education is confident that COVID 19 specifically impacted data collection and performance on this indicator including data completeness, validity and reliability. Other related situations students encountered o the decline in higher education enrollment and the work force due to the fact that many agencies were unable to provide resources to these individuals with disabilities to support them .

The New Hampshire Department of Education Bureau of Special Education implemented several strategies to address potential impact COVID could have on the results of the data quality that included :

- Targeted technical assistance vis phone calls; emails, and the indicator 14 support portal to assist districts to provide the survey specifically to parents of students with disabilities
- Outreach to New Hampshire organizations such as the New Hampshire Parent Information Center and New Hampshire Family Voices to provide information to families about the survey for their youth
- Significant marketing from Panorama Education to provide a social media campaign for schools and organizations especially to address survey fatigue due to the COVID 19 Survey.

14 - Prior FFY Required Actions

In the FFY 2020 SPP/APR, the State must report whether the FFY 2020 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, 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 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.

Response to actions required in FFY 2019 SPP/APR

14 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

14 - Required Actions

In the FFY 2021 SPP/APR, the State must report whether the FFY 2021 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, 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 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.

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 ED Facts 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 is used

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1 Number of resolution sessions	4
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/03/2021	3.1(a) Number resolution sessions resolved through settlement agreements	4

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 Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Association of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year. Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS

application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

Historical Data

Baseline Year	Baseline Data
2010	71.00%

FFY	2015	2016	2017	2018	2019
Target >=	62.00% - 72.00%	62.00% - 72.00%	63.00% - 73.00%	63.00% - 73.00%	63.00%-73.00%
Data	100.00%	100.00%	100.00%	42.86%	75.00%

Targets

FFY	2020 (low)	2020 (high)	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=												

FFY 2020 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2019 Data	FFY 2020 Target (low)	FFY 2020 Target (high)	FFY 2020 Data	Status	Slippage
4	4	75.00%			100.00%	N/A	N/A

Provide additional information about this indicator (optional)

It is hard to quantify if COVID impacted the resolution sessions process as NH’s numbers are consistently low. Additionally, there was no slippage for this indicator to suggest that there were concerns with accessing the resolution process.

Historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

15 - Prior FFY Required Actions

None

15 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for this indicator, and OSEP accepts those targets.

The State reported fewer than ten resolution sessions held in FFY 2020. The State is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

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)(ii)) 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 is used

Prepopulated Data

Source	Date	Description	Data
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1 Mediations held	28
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.a.i Mediations agreements related to due process complaints	14
SY 2020-21 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/03/2021	2.1.b.i Mediations agreements not related to due process complaints	5

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 Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year. Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding

suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

Historical Data

Baseline Year	Baseline Data
2020	67.86%

FFY	2015	2016	2017	2018	2019
Target >=	65.00% - 75.00%	65.00% - 75.00%	65.00% - 75.00%	70.00% - 80.00%	70.00%-80.00%
Data	60.61%	58.82%	72.73%	74.07%	82.50%

Targets

FFY	2020 (low)	2020 (high)	2021 (low)	2021 (high)	2022 (low)	2022 (high)	2023 (low)	2023 (high)	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target >=	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%	70.00%	80.00%

FFY 2020 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 2019 Data	FFY 2020 Target (low)	FFY 2020 Target (high)	FFY 2020 Data	Status	Slippage
14	5	28	82.50%	70.00%	80.00%	67.86%	N/A	N/A

Provide additional information about this indicator (optional)

People were not utilizing the mediation process as they had in the past. Due to Covid there were less students attending school in person (parents, districts, individuals) were less engaged in all dispute resolution processes in FY 2020 due to COVID concerns. The current data suggests that the trend for mediations will be similar to previous years reporting.

Mediation agreements related to due process complaints went from 21 (FFY 2019) to 14 (FFY 2020).

Mediation agreements not related to due process complaints went from 12 FFY 2019) to 5 (FFY 2020).

The number of mediations held went from 43 (FFY 2019) to 28 (FFY 2020). There were more cases withdrawn and settled outside of the mediation process, which accounts for the decrease in mediations held. In addition, there were two (2) additional decisions, an (1) additional local resolution sessions success, two (2) additional settlements and two (2) additional withdrawals.

16 - Prior FFY Required Actions

None

16 - OSEP Response

The State has revised the baseline for this indicator, using data from FFY 2020, and OSEP accepts that revision.

The State provided targets for this indicator, and OSEP accepts those targets.

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

Baseline Data: 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.

Targets: In its FFY 2020 SPP/APR, due February 1, 2022, the State must provide measurable and rigorous targets (expressed as percentages) for each of the six years from FFY 2020 through FFY 2025. The State's FFY 2025 target must demonstrate improvement over the State's baseline data.

Updated Data: In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2, 2022, 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 2020 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, 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, 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 2020 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 2021). 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 2020 APR, report on anticipated outcomes to be obtained during FFY 2021, i.e., July 1, 2021-June 30, 2022).

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 2020 APR, report on activities it intends to implement in FFY 2021, i.e., July 1, 2021-June 30, 2022) 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)?

Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved positive social-emotional skills.

Summary Statement:

Of those preschool children with IEPs who entered or exited the preschool program below age expectations in Outcome A1 (positive social-emotional skills including social relationships), 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:

Percent = [(# of preschool children who improved functioning to a level nearer to same-age peers but did not reach it) plus (# of preschool children who improved functioning to a level comparable to same-age peers) divided by (# of preschool children who did not improve functioning) plus (# of preschool children who improved functioning but not sufficient to move significantly nearer to same-age peers)] times 100.

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://sites.google.com/education.nh.gov/isocial/data-evaluation>

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

NO

If no, describe any changes to the activities, strategies or timelines described in the previous submission and include a rationale or justification for the changes.

No changes were made to the previous submission, however, it has been determined that NH will move into FFY21 with a new SiMR and SSIP. Work is in progress within NH DOE to transfer the work of the SSIP (iSocial) to the Office of Student Wellness for ongoing sustainability and integration with NH's MTSS-B implementation. In addition, the iSocial and statewide Pyramid Model (PM) State Leadership Teams are progressively integrating to form a single state team as well as intentionally collaborating with the Preschool Development Grant (PDG) initiative.

NH has recently made some infrastructure improvements in the organization of the Bureau of Special Education Support. The State Director of Special Education and the Division Director of Learner Support have added three Administrators to the organization of the Bureau so as to provide additional leadership and support to implement the various program initiatives. In an effort to support the mission of the Bureau, the Director, Division Director, Administrators and the State leadership team discussed the current SSIP and SiMR. After lengthy discussion, the team decided to change the focus of the SSIP and SiMR to literacy. The State will need to assess whether additional staff and/or contracted vendors are necessary to employ to build capacity to conduct various activities necessary to implement the SSIP.

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
FFY13	71.13%

Targets

FFY	2020	2021	2022	2023	2024	2025
Target> =	80.00%	80.00%	80.00%	80.50%	80.50%	81.00%

FFY 2020 SPP/APR Data

Description of the Data Sources for Numerator	Description of the Data Sources for the Denominator	FFY 2019 Data	FFY 2020 Target	FFY 2020 Data	Status	Slippage
126	176	74.60%	80.00%	71.59%	N/A	N/A

Provide the data source for the FFY 2020 data.

The SiMR reflects Indicator 7a1 data for the subset of districts participating in the SSIP. New Hampshire requires districts to use one of the two approved assessment tools My Teaching Strategies (TS Gold) and Brookes Publishing (AEPSi) for the collection of the data.

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

The SiMR reflects Indicator 7a1 data from Preschool Outcomes of the Office of Special Education Programs child that are reported to the NHDOE for the subset of districts participating in the SSIP. Outcome 7A is Positive Social Emotional Skills (including social relationships.) This information is gathered via electronic data systems for the My Teaching Strategies (TS Gold) and AEPSi assessment tools and reflects changes in child growth trajectory from entry into preschool special education (within six weeks of services) and upon exit from preschool special education.

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

YES

Describe any additional data collected by the State to assess progress toward the SiMR.

Program Fidelity Measures

The Pyramid Model (PM) is the evidence-based practice that drives iSocial. Because research supports the efficacy of the PM in supporting children's social-emotional development, measures of PM fidelity are expected to predict progress toward the SiMR. NH measures PM fidelity at the site level with the Program-Wide Benchmarks of Quality (BOQ), and at the Practitioner level with the Teaching Pyramid Observation Tool (TPOT). The two SSIP districts that remained fully engaged with the State during the reporting year showed steadily improving trends in the BOQ until the pandemic struck, followed by slight decrements in 5 of 7 elements in Fall of 2021; we attribute this slight reversal to pandemic disruptions.

TPOTs were suspended in Spring of 2020 due to pandemic related closures, and administered sporadically and via remote (non-standard) observation through the ensuing year. This non-standard administration was implemented with the consent by the tool authors. Our evaluator compared patterns in the TPOT data collected remotely during the pandemic, to that collected previously under standard administrations, and did not find any evidence of anomalies related to remote observation and scoring of the tool. This analysis led us to regard the data as meaningful, if not fully comparable to standard administrations. While our remaining SSIP sites had resumed standard TPOT administration and scoring protocols in Fall 2021, revisions to the State's database produced irregularities in data uploads this Fall that we are still working to resolve; we are unable to report TPOT results for our SSIP sites at this time.

Pyramid Model Related Training

During the current reporting period, iSocial continued to deliver expanded access to PM and data infrastructure training opportunities through synchronous and asynchronous online delivery models, often at no cost to participants. In addition to twenty-nine training events offered by NH trainers, the NH DOE was able to offer free access to seven online PM trainings. The NH events were delivered to 312 participants, whose feedback surveys (40% response rate) informed evolution of the training program. The additional online PM trainings were completed by 1376 participants through October of 2021.

Behavioral Incident Report (BIR)

The iSocial Evaluation Coordinator, PM Consortium, and Race2K (the iSocial lead for Process Coaches) developed a roll-out plan for programs to begin collecting BIR. The BIR System provides a system for programs to collect and analyze behavior incidents in their program. The system provides a mechanism for gathering information on elements related to behavior incidents that can be used make decisions about providing supports to teachers and children within their programs.

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)

YES

If data for this reporting period were impacted specifically by COVID-19, the State must include in the narrative for the indicator: (1) the impact on data completeness, validity and reliability for the indicator; (2) an explanation of how COVID-19 specifically impacted the State's ability to collect the data for the indicator; and (3) any steps the State took to mitigate the impact of COVID-19 on the data collection.

(1) Impact on data completeness.

SiMR data was complete for all districts, yet there is reason to be concerned about the reliability and validity of the indicator. Following the transition to remote learning due to COVID, some districts noted that the remote format deprived them of confidence in their assessments and left them uncertain whether the data represents the full level of progress upon exit. Many SSIP districts reported an increased number of students withdrew from services before meeting the required six months of service. The decrease in the Social Emotional Learning Outcomes is attributed to the changes in how services were provided to students due to the COVID-19 Pandemic.

(2) Explanation of how COVID-19 specifically impacted the State's ability to collect the data for the indicator.

Many NH districts expressed concern about their ability to assess children and capture exit data for children aging out during late Spring and early Summer. Some indicated that they had to rely on some data elements from prior to the remote learning transition that were not feasible to collect virtually or via the parents.

In addition to the SiMR data, much of iSocial's fidelity measurement infrastructure, including coaching logs, feedback surveys, and practitioner observation tools, suffered interruptions due to pandemic-related closures; administration of these instruments was sporadic during the reporting year.

(3) Steps the State took to mitigate the impact of COVID-19 on the data collection.

NHDOE released a memo reiterating the requirements and NH Preschool Outcomes Measures (POMS) consultant provided individualized TA to the districts. In addition, opportunities were provided to Preschool Coordinators to share strategies for obtaining the data via cohort calls hosted by Race2K (a project of the NH Parent Information Center, and the coordinator for iSocial process coaches). Additional efforts offered flexibility to ease burden of data collection including expanded or adjusted deadlines and leveraging state-contracted coaches to enter data on programs behalf.

Section B: Implementation, Analysis and Evaluation

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

<https://sites.google.com/education.nh.gov/isocial/data-evaluation>

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:

Initial work done with stakeholders including general and special education practitioners and administrators, families, and representatives of state agencies and initiatives including the Child Development Bureau, Head Start, NH BOLD, Preschool Technical Assistance Network, and Race2K) during Phase I of the SSIP regarding data and infrastructure analyses surfaced root causes of possible conditions contributing to low performance on social emotional skills in preschool. In response, the NHDOE developed four essential coherent improvement strategies (CIS) to guide implementation and improve social-emotional outcomes for preschool children with disabilities.

In conducting an in-depth data analysis, the SSIP Stakeholder Input Team found that:

- 1) There was no formal state-level structure (advisory body or leadership team) that focused on improving social-emotional outcomes for preschool children with disabilities. As a result, efforts are fragmented and there was no system in place for inter- intra-agency coordination to guide interventions, make recommendations and evaluate the success of improvement strategies.
- 2) Local administrators and school board members did not uniformly understand the factors that impact positive social-emotional outcomes for preschool children with disabilities and cost-benefit of intervening early with sound, evidence-based practices. As a result, they have not always made decisions regarding funding, staffing and program development that are most likely to result in improved social-emotional outcomes for preschool children with disabilities.
- 3) Practitioners (district and community-based) have a range of knowledge and skill regarding the implementation with fidelity of evidence-based practices that are likely to improve social-emotional outcomes for preschool children with disabilities. As a result, the quality of services and support vary in their effectiveness.

To address these root causes, the NHDOE identified the following coherent improvement strategies:

CIS 1: In order to strengthen the state infrastructure, the NHDOE will: continue to engage stakeholders across the implementation cascade, including private and school-based practitioners, site and community based leadership teams, practice-based and process coaches, higher education, state agencies and initiatives, in informing and developing the SSIP (iSocial); to establish an iSocial state leadership team; and to support a system of professional development and technical assistance (PD & TA) designed to support state and local implementation of the Pyramid Model with fidelity.

CIS 2: The NHDOE will lead data systems development to support improved social-emotional outcomes for preschool children with disabilities including: expanding linkages between existing data systems to support longitudinal data analysis, providing a data system to manage and support data collection, analysis and dissemination across stakeholder groups, and providing PD & TA to promote data literacy and the effective use of data for decision making.

CIS 3: In alignment with current initiatives, the NHDOE will support the subset of iSocial districts with ongoing infrastructure and data analyses designed to remedy root causes that contribute to low performance in social-emotional outcomes for preschool children with disabilities.

CIS 4: The NHDOE will promote the capacity of iSocial districts to sustain improved results in social-emotional outcomes for preschool children with disabilities within their districts, and will align efforts to scale-up improvement strategies throughout the state.

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.

Since the beginning of SSIP grant award, New Hampshire has been focused on building a system of supports to improve the social emotional outcomes for young children with disabilities (birth to age 5). The systems of supports is designed to implement the Pyramid Model Framework to fidelity and to sustain the implementation long-term in our state. A variety of activities have supported the development of this systems over the years and during the current reporting period. To continue the work of scale-up and sustainability of the work the following work was done on the coherent improvement strategies: .

Coherent Improvement Strategy (CIS)

1: Strengthen the State Infrastructure

Progressively integrate iSocial and Pyramid Model (PM) State Leadership Teams with the Preschool Development Grant (PDG) initiative. Within NH DOE, the leadership of the work is being solidified underneath the Office of Student Wellness for ongoing sustainability, and integration with NH's MTSS-B implementation.

Leadership of iSocial, PM, and Preschool Development Grant promoted shared competencies for process and Practice-based (PB) coaches, and trainers.

iSocial and DHHS extended arrangement with ProSolutions data platform for registering and retaining records of Professional Development (PD).

Second cohort of PM Master Cadre has completed credentialing for PM coaching, training, and TPOT/TPITOS administration. As of the end of 2021, total NH Pyramid Model coaching capacity had grown to 7 PB and 8 Process Coaches.

A "Pyramid Model Pathway" has been articulated in the guidance and credentialing of NH's early childhood Quality Recognition and Improvement System (QRIS).

CIS 2: Lead Data Systems Development

Measurement of child-level outcomes: phased adoption of the Behavior Incident Report (BIR) that supports stakeholder needs and resources. The BIRS can be used as a coaching tool at the classroom level to support practitioners in understanding the behavior that is occurring in their classroom (e.g frequency, behavior type, motivation and responses to the behavior). Phased adoption began in Fall 2021 and universal implementation is expected by Fall 2022.

Maintain and refine the iSocial Data System to improve integrity, empower local control and accountability.

iSocial Data System has been upgraded to provide indicator-level scoring on the Teaching Pyramid Observation Tool (TPOT), rather than only category summaries. TPOTs are used for preschool classrooms to reinforce high-quality practices that support children's social-emotional development and behavior. TPOT measures how well teachers are implementing the 3 tiers of the Pyramid Model framework.

Process Coaching Logs revised to better reflect current conceptualization of coaching activities (and consequently more accurately reflect coaching experience).

Facilitate Data Coordinator (DC) Cohort to build capacity and engage in collaborative problem solving. Cohort meetings during FFY2020 addressed the functions of the DC role, processes and tools represented in the iSocial Data System, and how to understand and use the resulting data. Process Coaches, who support local leadership teams on systems development and data use, are also invited to participate in the Cohort.

Merger of iSocial and Pyramid Model Data and Evaluation workgroups and data systems has begun with mapping of respective evaluation systems and a slate of meetings scheduled throughout the Spring of 2022.

In 2022 there will be short videos developed to support districts in implementing the Part B Data System Framework.

CIS 3: Support SSIP Districts with Ongoing Infrastructure and Data Analysis

Continue to expand and refine access to reports that will feed back local programs and community partners, which includes data concerning coaching, program growth, and PM fidelity.

Provide role-specific training and TA to support local capacity to develop and leverage data infrastructure as well as use data effectively to support decision-making. These efforts include leveraging the IDEA Data Systems Framework, Data Inquiry Cycle, and IDC Data Meeting Toolkit with local teams; targeted trainings related to collection, implementation and analysis of the BIR for practitioners, coaches, data coordinators, and leadership team members; as well as cohort learning groups for Process and PB Coaches and DC.

The (DRDP) is an observation tool for practitioners to record child growth and development in eight developmental domains. The State continues to work toward integrating the DRDP with required Preschool Outcome Measures, and adapting California's DRDP data platform to meet NH's needs.

Implementation of the DRDP will begin in 2022.

CIS 4: Promote Capacity of Targeted Districts to Sustain/scale up Improved Social-emotional Outcomes

In Fall 2021, iSocial's external evaluator interviewed local Team leads and their process coaches about challenges in implementing the PM, to mine insights about sustainability challenges and opportunities. This information was shared with at our monthly state leadership team meeting , the core team reviewed this information and identified opportunities to promote and extend successes and sustainability through the development of the Capacity Building Prof Learning Community's

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.

As stated in the previous section, since the beginning of SSIP, New Hampshire has been focused on building a system of supports to improve the social emotional outcomes for young children with disabilities (birth to age 5).The systems of supports is designed to implement the Pyramid Model (PM) Framework to fidelity and to sustain the implementation long-term in our state. A variety of activities have supported the development of this systems over the years and during the current reporting period. To continue the work of scale-up and sustainability of the work the NH DOE's next steps are the following:

CIS 1: Strengthen the State infrastructure: Stakeholder Input, State Leadership, TA/PD

Progressively integrate iSocial and PM State Leadership Teams with the Preschool Development Grant (PDG) initiative. Within NH DOE, the leadership of the work is being solidified underneath the Office of Student Wellness for ongoing sustainability.

Embed PM in NH's revised early childhood Quality Recognition and Improvement System (QRIS).

The NH DOE worked collaboratively with the NH Preschool Development Grant (PDG) awarded grants to identify additional funding to support the scale-up and sustainability to implement the Pyramid Model Framework to fidelity and sustain the implementation long-term in our state. The PDG supported the establishment of New Hampshire Early Childhood Regional Leads in the development of a state-wide system of partnerships that enhance early childhood care and education (ECCE)-school-family support collaborations and build infrastructure for cross-sector collaboration and alignment for the purpose of coordinating resources and services within identified regions. Many of the Regional Leads are utilizing the funding to expand capacity of the implementation of the Pyramid Model, Framework by continuing to expand Master Cadre to incorporate Process and Practice-Based Coaches and Trainers with the unique expertise to support and extend capacity within local school districts.

CIS 2: Lead Data Systems Development

Extend existing use of the iSocial data system as a unified data platform for local PM implementation statewide.

Create a State-level aggregate Benchmarks of Quality report, to monitor progress in implementing the PM across the State.

Explore linkage between DHHS and iSocial data systems to support a Coaching Registry, to improve statewide access to expert PM coaching.

Pilot home visiting versions of the PM practitioner fidelity measure (Early Intervention Pyramid Practices Fidelity Instrument) and Benchmarks of Quality.

CIS 3: Support SSIP Districts with Ongoing Infrastructure and Data Analysis

Continue to expand and refine access to reports that will feed back to local programs and community partners which includes data concerning coaching, program growth, and PM fidelity.

Provide role-specific training and TA to support local capacity to develop and leverage data infrastructure as well as use data effectively to support decision-making. These efforts include leveraging the IDEA Data Systems Framework, Data Inquiry Cycle, and IDC Data Meeting Toolkit with local teams; targeted trainings related to collection, implementation and analysis of the Behavior Incident Report (BIR) for practitioners, coaches, data coordinators, and leadership team members; as well as cohort learning groups for Process and Practice Base Coaches and Data Coordinators.

The (DRDP) is an observation tool for practitioners to record child growth and development in eight developmental domains. The State continues to work toward integrating the DRDP with required Preschool Outcome Measures, and adapting California's DRDP data platform to meet NH's needs.

Implementation of the DRDP will begin in 2022.

CIS 4: Promote Capacity of Targeted Districts to Sustain/Scale-Up Improved Soc-Emotional Outcomes

Progressively integrate iSocial and PM State Leadership Teams with the Preschool Development Grant (PDG) initiative. Within NH DOE, the leadership of the work is being solidified underneath the Office of Student Wellness (OSEW) for ongoing sustainability. OSEW is working towards integrating the Pyramid Model into their Multi-Tiered Systems of Support – Behavior (MTSS-B) framework so that school districts move towards a school wide organizational approach that benefits all children.

Expand implementation of the Behavior Incident Report and pilot the Desired Results Developmental Profile.

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

The Pyramid Model

Provide a summary of each evidence-based practices.

The Pyramid Model is a conceptual framework of evidence-based practices for promoting young children's healthy social and emotional development. It was developed by two national, federally-funded research and training centers: The Center for the Social and Emotional Foundations for Early Learning (CSEFEL) and Technical Assistance Center on Social Emotional Intervention for Youth Children (TACSEI) whose faculty represent nationally recognized researchers and program developers in the areas of social skills and challenging behavior.

The Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children (Fox, Dunlap, Hemmeter, Joseph, & Strain, 2003) was developed by identifying the evidence-based practices that would:

- Promote the social and emotional outcomes of all children,
- Promote the skill development of children with social, emotional, and behavioral delays to prevent the need for more intensive supports; and
- Intervene effectively when children have persistent challenging behavior.

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.

The Pyramid Model builds upon a tiered public health approach to providing universal supports to all children to promote wellness, targeted services to those who need more support, and intensive services to those who need them. It embeds strategies for promoting social skills and emotional development; classroom practices that are designed to prevent challenging behavior; positive parenting practices that promote young children's social and emotional development and prevent and remediate challenging behavior; individualized intervention for use when preventive strategies are not successful; and policy, procedural practices, and administrative practices that support the adoption and use of evidence-based practices.

The foundation for all of the practices in the Pyramid Model are the systems and policies necessary to ensure a workforce able to adopt and sustain implementation of these evidence-based practices. By focusing on these systems and policies, districts are able to create an environment and support structure that empowers and enables practitioners to create robust and effective learning environments that promote social emotional and behavioral competence.

Tier 1 of the Pyramid Model consists of Universal Supports that provide nurturing and responsive relationships, high quality and the promotion of the social development of all children.

Tier 2 of the Pyramid Model is aimed at Prevention. These practices utilize targeted social emotional strategies to prevent problems. The prevention level includes the provision of targeted supports to children at risk of challenging behavior, including explicit instruction and support for self-regulation, expressing and understanding emotions, developing social relationships and problem-solving.

Tier 3 of the Pyramid Model addresses Intervention and is comprised of individualized and intensive supports for the very small number of children with persistent challenges. These interventions are family centered, comprehensive and assessment-based and are aimed at building the skills and competence needed to effectively manage emotions, behaviors, and social interactions.

These tiered supports help practitioners and families understand and better support each child's unique development and support his or her social emotional growth trajectory reflected in the SiMR.

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

State activities

State Action Plan Progress Report: State Leadership Team Action Plan has grown substantially toward Data & Evaluation, Prof Dev & Guidance, and Leadership/Policy activities. In Fall 2021, the SLT identified that of the action steps in their state-level plan, 88% were either completed or progressing as expected, and 12% progressing slower than expected, a pattern that was similar across all infrastructure components

Stages of Implementation Checklist (SIC): The SIC is a self-assessment of state-level implementation benchmarks needed to implement and sustain Pyramid Model practices. Completed annually by the State Leadership Team, results have showed steady progress toward high fidelity implementation of the PM from 2017 to 2020, followed by some retrenchment in 2021 as transitions in PM implementation bring expansion as well as new challenges.

As of Fall 2021, 48% of the 109 SIC indicators Fully in Place; 50% Partially in Place; 2% Not in Place.

iSocial Training Feedback Survey: feedback iSocial delivered 36 training events with 1688 participants in the current reporting year. Participant feedback was available for 24 of these events, from 125 of 312 attendees (40%). Respondents rated presentation quality between 4 and 5 on a 5-point scale, knowledge gains of one full point on a 4-point scale, and a high degree of overall satisfaction.

District/Implementation Site activities

Site Action Plans: Due to COVID disruptions only one of the two , districts continuing to receive state fical supports submitted an SSIP district submitted an Action Plans Progress Report. Based on this report, 90% of action steps completed or progressing as expected, the remaining 10% not yet started or progressing slower than expected.

Program Wide Benchmarks of Quality (BOQ): Both SSIP sites showed slight regression in markers of PM fidelity from 2020 to 2021. All 7 elements remain rated between "Partially in Place" and "Fully in Place" in Fall 2021.

Barriers to implementation were assessed as part of both Action Planning and the Leadership Team Reflection and Planning Tool. Both sites were able document implementation successes, with COVID-related closures prominent among their barriers.

Practitioner activities

As described above, aggregate TPOT data is not yet available for the current reporting year.

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.

Program Fidelity Measures

The Pyramid Model (PM) is the evidence-based practice that drives iSocial. Because research supports the efficacy of the PM in supporting children's social-emotional development, measures of PM fidelity are expected to predict progress toward the SiMR. NH measures PM fidelity at the site level with the Program-Wide Benchmarks of Quality, and at the Practitioner level with the Teaching Pyramid Observation Tool (TPOT). The two SSIP districts that remained fully engaged with the State during the reporting year showed steadily improving trends in the BOQ until the pandemic struck, followed by slight decrements in 5 of 7 elements in Fall of 2021; we attribute this slight reversal to pandemic disruptions.

TPOTs were suspended in Spring of 2020 due to pandemic related closures, and administered sporadically and via remote (non-standard) observation through the ensuing year. This non-standard administration was implemented with the consent by the tool authors. Our evaluator compared patterns in

the TPOT data collected remotely during the pandemic, to that collected previously under standard administrations, and did not find any evidence of anomalies related to remote observation and scoring of the tool. This analysis led us to regard the data as meaningful, if not fully comparable to standard administrations. While our remaining SSIP sites had resumed standard TPOT administration and scoring protocols in Fall 2021, revisions to the State's database produced irregularities in data uploads this Fall that we are still working to resolve; we are unable to report TPOT results for our SSIP sites at this time.

Pyramid Model Related Training

During the current reporting period, iSocial continued to deliver expanded access to PM and data infrastructure training opportunities through synchronous and asynchronous online delivery models, often at no cost to participants. In addition to twenty-nine training events offered by NH trainers, the NH DOE was able to offer free access to seven online PM trainings. The NH events were delivered to 312 participants, whose feedback surveys (40% response rate) informed evolution of the training program. The additional online PM trainings were completed by 1376 participants through October of 2021.

Behavioral Incident Report (BIR)

The iSocial Evaluation Coordinator, PM Consortium, and Race2K (the iSocial lead for Process Coaches) developed a roll-out plan for programs to begin collecting BIR. The BIR System provides a system for programs to collect and analyze behavior incidents in their program. The system provides a mechanism for gathering information on elements related to behavior incidents that can be used make decisions about providing supports to teachers and children within their programs.

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

Moving forward, the work of the Pyramid model is being solidified underneath the Office of Student Wellness (OSEW) at the NHDOE and integrated with the state's current Multi-tiered Systems of Support work. Regional coaches under OSEW will provide continued support for the systems and policies change efforts at the district level to connect the Pyramid Model and ongoing MTSS efforts across the PreK-12 grade span. Practice level implementation of the strategies at each of the three tiers will be supported and sustained through ongoing professional development and coaching provided through OSEW as well as the statewide systemic efforts of the Pyramid Model State Leadership Team, Pyramid Model Master Cadre, and ProSolutions online training modules.

Section C: Stakeholder Engagement

Description of Stakeholder Input

The Bureau announced to the public on June 3, 2021, that it would be hosting a series of meetings to seek stakeholder input to set new targets for the FFY 2020-2025 State Performance Plan/Annual Performance Report (SPP/APR). Stakeholders would work with the Bureau to establish new targets for Indicators 1-16 of the 17 indicators listed in IDEA Part B. Stakeholders would also assist NH in evaluating the state's efforts to implement the requirements and purposes of the IDEA and describe how the state would improve its implementation. The announcement allowed for participants to register for the meetings so that an accurate account of participation would be afforded.

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

The Bureau held fourteen (14) stakeholder meeting opportunities, at various times during the day, including evenings, beginning in June of 2021. Representatives from the Parent Information Center, NH school districts, the New Hampshire Association of Special Education Administrators, the New Hampshire School Board Association and the New Hampshire Associate of School Administrators as well as the State Advisory Council and parents of students with disabilities were presented with indicator information and data. Members of these stakeholder groups provided feedback via meetings, emails and group calls and the Bureau used this input as the basis for the targets set and the choice of FFY 20 as the baseline year.

Of the 155 participants in these meetings, about half were parents representing themselves, parent information center representatives or advocates for parents such as agencies like the Disability Rights Center and the State Advisory Committee. School district representatives and other representatives from the NH legislature represented the balance of the participants. In addition to these meetings, the Bureau met with the State Advisory Committee (SAC), there were 18 attendees. The Bureau also met with the NH Association of Special Education Administrators (NHASEA), and presented to 16 members of this group.

The agenda at each of the SPP stakeholder meetings included such topics as review of the indicator details and expectations, the measurement of each indicator, review of previous year's performance and compliance outcomes, various data sources and collection procedures, and a discussion regarding proposed new targets. The stakeholders asked questions about the measurement of the indicators, specifically for indicator 3 as this indicator has recently changed and measures more than it has in the past. The discussions also centered around whether we could change the indicators to proficiency improvement (Indicator 3) rather than setting a target, if the parent survey (Indicator 8) could be a rolling survey as they feel they would get more parents to participate. Some stakeholders didn't realize the targets were, in many cases, dictated by OSEP and they were also surprised with some of the procedures regarding the setting and moving targets.

When reviewing the data and stakeholder input the Bureau made a few selected determinations for the following indicators: Indicator 4a regarding suspension and expulsion, the NHDOE reordered the calculation process to increase transparency per the suggestion of the IDEA Data Center (IDC). This suggestion was made to better align the representation of data with OSEP's preferences as they are expressed in the SPP/APR EMAPS application. This process changed the order of review of the data, but not the calculation or the methodology. As a result the NHDOE has reset baseline year to FFY 2019.

Indicator 15, resolution sessions, historically the number of resolutions sessions has been less than 10. Therefore, the previous target set in 2010 remains for indicator 15. New Hampshire is not required to set established baseline or targets as the number of resolutions sessions are less than 10. When the number of resolutions sessions reaches 10 or greater New Hampshire will develop baseline and targets report on them in the corresponding SPP/APR.

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

The iSocial State Leadership Team (SLT) is the primary venue for stakeholder involvement in the SSIP. The SLT includes State Personnel Development Grant (SPDG) stakeholders, leaders from the PM Leadership Team and the PDG, coordinators of P-B and Process Coaches, the iSocial Family Engagement Director, site-level and Higher Education representatives, and beginning in Fall 2021, representatives from DOE's Office of Social Emotional Wellness (OSEW). The SLT monitors progress with the State Action Plan, receives regular reports of evaluation results, and consults about evaluation plans and reporting strategies.

The PM and iSocial SLTs have developed joint workgroups to ensure their alignment. A PD Workgroup launched the PM Master Cadre: selection criteria, application process and selection of candidates; training the first cohort in early 2020 and a second in 2021; articulating competencies for

coaching, training, and TPOT/TPITOS administrators; developing procedures for promoting and requesting the services of the Master Cadre. A Communication Workgroup crafted messaging for families, a Facebook page, and a periodic newsletter for a broader stakeholder audience. An Implementation/Demo Site Workgroup developed an application and TA for new PM implementation sites. A Data and Evaluation Workgroup has negotiated refinements of the iSocial Data System to enhance access and utility for implementation partners. The iSocial Evaluation Coordinator convenes approximately quarterly meetings of an Evaluation Team and a Data Team to consult on evaluation progress, data use, and improvements to the iSocial data system. Approximately quarterly DC Cohort meetings facilitate data monitoring and quality improvement at the implementation site level, support DCs in their role, and design system improvements. The State convened a Home Visiting Task Force with representatives of community based and federal home visiting programs including Head Start; Healthy Families America; Maternal, Infant and Early Childhood Home Visiting (MIECHV); Early Intervention; Comprehensive Family Support; and community based programs. The task force provided key insight into the development of the PM pilot in home visiting. In Spring of 2020, the State began holding bi-monthly "Field Update" meetings with Process and P-B Coaching Coordinators, the iSocial Core Team, and External Evaluator. The purpose of these meetings is to share updates concerning the status of program activities with each local leadership team; highlight successes, challenges, resource needs; and facilitate systemic reflection and quality improvement. Both Process and P-B Coaches sit on local site leadership teams to offer their perspectives on such matters as who receives coaching, coaching delivery formats, understanding coaching cycles and needs a practitioner may have (i.e., time for coaching, resources, etc), monitoring implementation and outcomes of P-B Coaching, and supporting local data interpretation, sharing with stakeholders, and use for decision making. The iSocial Family Engagement Director provides training and consultation to local leadership teams to support recruiting family member participation in leadership teams. The FE Director meets individually with family members of leadership teams to debrief their experience and support them in understanding the work of the team, their role as members of the team, and how to be heard in discussions.

Behavior Incident Report: A stakeholder meeting was hosted in Fall 2021 to learn how implementation was going and what additional supports are needed for 2022.

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

YES

Describe how the State addressed the concerns expressed by stakeholders.

Stakeholders have consistently voiced worries about data collection burdens in early childhood settings. The State has worked to recruit stakeholder investment in iSocial data by empowering them to use it for local decision making. The collection of child-level outcome data, in particular, has been fraught with concerns about privacy, explaining how the data will be used, and capacities needed to assess and record it. Below are two measures that illustrate the State's response to these challenges.

Behavioral Incident Report (BIR)

The iSocial Evaluation Coordinator, PM Consortium, and Race2K (the iSocial lead for Process Coaches) developed a roll-out plan for the BIR that responds to stakeholder voices; supports programs in building implementation capacity; accommodates varying readiness; and provides training and TA for leadership teams, data coordinators, practitioners, and process and PB coaches. BIR Cohorts were created to support phased implementation throughout 2021 and 2022. PB coaches supported districts in the implementation and analyzing the data.

Desired Results Developmental Profile© (DRDP)

The (DRDP) is an observation tool for practitioners to record child growth and development in eight developmental domains. The current plan is that iSocial programs would be required to implement only the two domains – Approaches to Learning and Social and Emotional Development - that are most relevant to PM targets. The State continues to work toward integrating the DRDP with required Preschool Outcome Measures, and adapting California's DRDP data platform to meet NH's needs. Implementation of the DRDP has been deferred while that work continues.

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.

Relative to NH Changing SSIP/SiMR

NH has recently made some infrastructure improvements in the organization of the Bureau of Special Education Support. The State Director of Special Education and the Division Director of Learner Support have added three Administrators to the organization of the Bureau so as to provide additional leadership and support to implement the various program initiatives. In an effort to support the mission of the Bureau, the Director, Division Director, Administrators and the State leadership team discussed the current SSIP and SiMR. After lengthy discussion, the team decided to change the focus of the SSIP and SiMR to literacy. The State will need to assess whether additional staff and/or contracted vendors are necessary to employ to build capacity to conduct various activities necessary to implement the SSIP.

Previous and current data have shown that there are elementary schools in NH that are struggling with reading proficiency, remaining stagnant in the lower 25%, some at 10%, for the last 3 years. The State leadership team is interested in how this affects students with disabilities and their families. The team believes that by reviewing the reading assessment data, disaggregating the data to determine how students with disabilities are faring in reading, identifying the district/school/grade that is at highest risk for low proficiency, and a review of quantitative and qualitative data to determine root cause analysis, the State will increase the capacity of LEAs to implement and sustain evidence-based practices that will result in improved results. The State will conduct various stakeholder meetings at different times of the year (timeline below), to identify a measurable result, select improvement strategies, develop a Theory of Action and a new evaluation plan to report in the next fiscal year.

The State will assist schools with discovering new ways to review data, provide teacher training to utilize evidence-based practices (such as Science of Reading) to teach reading, identify the fidelity of implementation of practices and provide other evidence-based strategies, (such as UDL) to the school(s). The goal is to increase the performance of students with disabilities reading at 3rd grade (and higher) level, as measured by state assessments.

NH intends to implement certain activities, in the next year, to support the change in the SSIP and SiMR. The first activity involves gathering relevant results data, disaggregating the data to identify how students with disabilities are faring in reading proficiency, conduct a root cause analysis in a specific school and grade, make observations about the data (what are strengths/challenges), and select 2-4 results data areas to identify a measurable result. The State will also do an infrastructure analysis to determine the current system's capacity to support improvement and build capacity in LEAs to implement, scale up and sustain evidence-based practices to improve results. The State will determine whether it has the appropriate components to support change in the system.

The State will work to develop coherent improvement strategies that are sound, logical and aligned with measurable improvement in the SiMR by improving the State infrastructure and assisting the LEAs with implementation of evidence-based practices.

The State will develop a Theory of Action to demonstrate the rationale of how implementing the improvement strategies will increase meaningful change and achieve improvement on the SiMR.

The final activity for the State to accomplish will be to create a new evaluation plan based on the new SSIP/SiMR.

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

The State Leadership Team has begun work to gather relevant data to review and analyze in relation to changing the SSIP/SiMR to address literacy. Stakeholder meetings will be scheduled in early spring to present the literacy data, the disaggregated analysis of the data (state assessments, teacher feedback, parent feedback, current review of the literacy programs, what evidence-based programs are being used) and how the data relates to students with disabilities. Initial stakeholder feedback will be recorded and considered when developing the root cause analysis. NH expects to have 2-4 results data areas to work toward identifying a measurable result by early fall. In conjunction with the data review and stakeholder meetings, the State Leadership Team will also do an analysis of the current State infrastructure and what may be needed in order to move the subsequent phases of the SSIP forward. These needs will come into focus in more detail as this first phase moves forward in this year. The State will meet with stakeholders to identify improvement strategies that align with the analysis of the data and the root cause analysis and develop a Theory of Action in the fall of 2022. NH will also develop a new evaluation plan to address short and long-term outcomes for the SPP and SiMR, stakeholder input in the outcomes and data collection and analysis methods. Information regarding the changes and the new SSIP/SiMR will be reported in the SPP/APR FFY 2021 submission.

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

One barrier to changing the SSIP/SiMR could be attaining "buy in" from the schools so that there can be optimal understanding of the data, root cause analysis, measurable result and the improvement strategies. The results of the SSIP depend on the fidelity of implementation of the evidence-based practices, which begins with the teachers and leadership personnel.

The State Leadership team and the vendor contracted with the Bureau will work with the teachers to gain understanding and motivate them to become key participants in the process. The State may also provide incentives for the teachers to become leaders and trainers for the evidence-based practices.

Provide additional information about this indicator (optional).

Although a new target for indicator 17 would not be established in these meetings as the current target was still enabled until next reporting year, a meeting was held to discuss the current State Systemic Improvement Plan (SSIP). Through these discussions and other Bureau discussions, it has been decided to change the SSIP and the SiMR beginning next reporting year. Therefore, new baselines will be set next year.

17 - Prior FFY Required Actions

None

17 - OSEP Response

The State provided targets for FFYs 2020 through 2025 for this indicator, and OSEP accepts those targets.

The State did not provide the numerator and denominator descriptions in the FFY 2020 SPP/APR Data table.

The State provided an explanation of how COVID-19 impacted its ability to collect FFY 2020 data for this indicator and steps the State has taken to mitigate the impact of COVID-19 on data collection.

While the State has described the mechanisms for soliciting broad stakeholder input on the State's targets in the SPP/APR, any subsequent revisions that the State made to those targets, and the development and implementation of Indicator 17, that description does not contain the required information. Specifically, the State did not describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by the stakeholders.

17 - Required Actions

The State did not provide numerator and denominator descriptions in the FFY 2020 data table. The State must provide the required numerator and denominator descriptions for the FFY 2021 data in the FFY 2021 SPP/APR.

The State did not describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders. In the FFY 2021 SPP/APR, the State must include the information, as required by the measurement table, when reporting on this indicator.

Certification

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Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.

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I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.

Select the certifier's role:

Designated by the Chief State School Officer to certify

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.

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