

# **STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B**

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

**For reporting on  
FFY 2022**

**New Hampshire**



**PART B DUE February 1, 2024**

**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 ensure that New Hampshire is meeting their responsibility under federal law it was determined that the General Supervision system needed to be worked on to more closely align with state and federal regulations. During the 2022-2023 school year the NH ED worked on the process of redeveloping the general supervision system. NH has spent the last years diving deeply into their processes and practices to ensure alignment with state and federal regulations and to determine if their current practices are providing the supports and guidance needed by LEAs to ensure improved outcomes for students with disabilities. NH also wanted to ensure that parent voice was reflected in the processes within the Bureau.

NH determined that the components of general supervision would be:

1. State Performance Plan (SPP)
2. Integrated Monitoring Activities
  - a. LEA Determinations with root cause analysis work and data management review
  - b. Indicator Monitoring with Technical Assistance
  - c. Program Approval Monitoring and General Supervision (PAGS)
    - i. Special Education Program Review
      1. Organizational charts
      2. Policies, Procedures and Effective Implementation
    - ii. Performance Indicators and Data Dive
      1. Data dashboards provided to each district in the cycle of PAGS
      2. Analysis of child find data
      3. Examining and evaluating performance results and data
      4. Analyzing assessment data
      5. LEA Determinations
    - iii. Educational Environment Monitoring and Approval
    - iv. Equitable services monitoring
    - v. Fiscal Monitoring
3. Fiscal Monitoring
  - a. Through the grant approval process
  - b. Through the NH ED Office of Federal Compliance
  - c. As part of the PAGS process
4. Effective Dispute Resolution
5. Technical Assistance and Training

This system was developed to ensure alignment with state and federal regulations as well as providing a comprehensive approach to monitoring and supporting LEAs in improving systems and practices to improve outcomes for students with disabilities. Each LEA during the PAGS cyclical monitoring process will be monitored once in a 6 year cycle. During that monitoring they will work with the Bureau to review all aspects of their special education program and service delivery to develop an Individual Monitoring Plan (IMP) that provides targeted assistance to the specific areas of need in each LEA. PAGS also addresses areas of noncompliance and follows the federal guidelines for corrections of non-compliance and potential areas of non-compliance that can be corrected prior to the issuance of a finding. All aspects of the general supervision system rely on data to inform decisions, discussions and work. At any point an LEA could have their monitoring in the PAGS process moved up if the Bureau deems it necessary.

Through the PAGS process the Individual Monitoring Plan (IMP) may include:

- Corrections
- Targeted Technical Assistance
- Trainings
- PD Opportunities
- The SPP is described in the Executive Summary. The remainder of the components are described in the General Supervision and Technical Assistance sections.

1. The State Performance Plan (SPP) provides a foundation for systemic change for special education in New Hampshire. The data in the SPP provides the Bureau with a baseline to utilize in working with districts. It incorporates a variety of methods including the use of desk audits, on-site monitoring, root cause analysis 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 23-01 and as laid out in IDEA and New Hampshire laws.

### Additional information related to data collection and reporting

NH has intentionally focused much of the effort around systems development for general supervision around data, data collection, understanding the use of data and data literacy. We have developed data dashboards for districts that allow them to see their Unsuppressed data over time in an easy and understandable format to better inform their decision making when working with the Bureau. We have ensured our staff have the knowledge, training and assistance they need to assist districts in data based decision making.

With the implementation of a more rigorous LEA Determinations process NH works with districts who have been identified as Needs Assistance, Needs Intervention and Needs Substantial Intervention to develop a leadership team and conduct a root cause analysis of their data from the SPP. The districts work with the Bureau to develop a Root Cause Analysis Action Plan. Through this process one of the things districts have worked on is to develop or fine tune their practices around data entry through the state information system to ensure that data is entered correctly in the student's IEPs to inform the data in each indicator.

As stated last year, to ensure the accurate gathering and interpreting of data, the Bureau has developed the Office of Finance and Data Management (OFD). The OFD provides data support to the other offices within the Bureau in support of the SPP/APR for indicator reporting, indicator monitoring, LEA

Determinations and data reviews. Through the root cause analysis process with districts, our Data Staff were able to further develop our processes to ensure data is accurately reported from the field and for our federal reporting requirements.

#### **Number of Districts in your State/Territory during reporting year**

174

#### **General Supervision System:**

**The systems that are in place to ensure that the IDEA Part B requirements are met (e.g., integrated monitoring activities; data on processes and results; the SPP/APR; fiscal management; policies, procedures, and practices resulting in effective implementation; and improvement, correction, incentives, and sanctions).**

After the upheaval to our systems during COVID and a transition to a new state director it was determined that NH needed to revamp the General Supervision System. With the release of Memo 23-01 this provided support for NH in redeveloping the system and ensuring that NH is meeting their responsibility under state and federal regulations. NHED worked on this system through FFY22 and into FFY23. After the issuance of Memo 23-01 the system was finalized, and the fall of 2023 was meeting and working with stakeholders and TA centers to fine tune the process. While working on this NH engaged in the following described activities for the 22-23 year. The new general supervision system began implementation in January of 2024.

2. Integrated Monitoring Activities: For the 21-22 school year NH determined they needed to develop a baseline of understanding for where the districts were in their responsibilities for the implementation of IDEA and began with every district being monitored in the fall of 2021 for required policies, procedures and forms. We ensured that all districts had the required procedures needed to ensure compliance with state and federal regulations. We also reviewed required forms for adherence to state and federal regulations. NH determined this was the best place to start their reworking of the general supervision process as it gave us an understanding of some of the most basic requirements for districts in the implementation of IDEA. Corrective action letters were sent to those districts who needed to adjust or develop policies, procedures or forms. Corrective measures were completed within the 90 day timeline afforded to districts. No findings needed to be issued for this process.

While doing this we implemented our new LEA determinations process. As stated last year, discussions internally had determined that our LEA Determination process was not as comprehensive as it needed to be. We worked with our TA Centers to develop this process and fine tune our skills around assisting districts with understanding their data. We worked regularly with the field to ensure they had an active role in the development of a process they would ultimately be responsible for. Our first LEA determinations with the new process were issued in April of 2022. Consultants met with districts to outline expectations and Districts then began their work on creating a leadership team and completing a root cause analysis of their data. Consultants worked with these districts over the 22-23 year to develop an action plan to address a targeted area on their LEA Determinations as determined by their leadership team.

NHED also determined that the indicator 13 process needed to be redeveloped and we finalized work on this process with stakeholders. NHED moved from a selection of districts to all districts within the state as we did not see systemic changes regarding secondary transition with the process we had in place. Stakeholder meetings were held to receive input on the indicator 13 process and NHED collaborated with TA providers to ensure the requirements for indicator 13 were met. The new indicator 13 process was implemented for this reporting period. In January of 2024 NH implemented the new Program Approval and General Supervision Monitoring System (PAGS). This system ensures alignment for both the SEA and all LEAs with federal requirements and is outlined in the Executive Summary.

3. Fiscal Monitoring: To ensure the accurate oversight of finances, the Bureau developed the Office of Finance and Data Management during the 21-22 year. This office is responsible for the processing of NH's special ed reimbursement programs to LEAs 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 applied for, monitored and tracked. Additionally, the OFD provided support to LEAs on ensuring the proper use of federal funds allocated to them.

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 LEAs with calculating and spending their proportional share of funds on children with disabilities eligible for Equitable Services, specifies if they are using IDEA funds for C/CEIS to allow for monitoring, and collects program assurances.

Fiscal Monitoring has been incorporated into our PAGS monitoring as part of a comprehensive approach to monitoring and assisting LEAs in improving systems and practices to improve outcomes for students with disabilities.

As a "pass-through" entity for Federal funds, the NHED, Bureau of Federal Compliance completes annual fiscal compliance monitoring and single-audit reviews of its sub recipients in accordance with 2 CFR 200.331. <https://www.ed.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 LEA 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 Ed Due Process Hearings and Alternative Dispute Resolutions, go to: <https://www.ed.nh.gov/who-we-are/division-of-learner-support/bureau-of-student-support/special-ed/due-process-hearings>

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

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

The Bureau also offers IEP Facilitation services to LEAs and parents as a precursor to our more formal dispute resolution processes.

#### **Technical Assistance System:**

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

The Bureau provided a tiered approach to technical assistance (TA) to ensure the timely delivery of high-quality 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 but are not limited to:

- instructional or technical assistance memos,
- large group Director Meetings,

- general oversight and broad TA in targeted areas.
- fiscal assistance regarding use of IDEA funds as well as state funding for Court Ordered Placements and Special Education Aid
- technical guidance on the SPP Indicators to ensure understanding of the data points and the expectations of the districts with regard to interpretation of the data.
- technical guidance on the NH Special Education Information System (NHSEIS) to explain the use of the system and ensure compliance in writing IEPs and accurate data entry.
- extensive supports around accessibility with trainings on American Printing House for the Blind, NH Accessible Educational Materials library, and
- contracted with Scholars in the area of vision impairments and hearing impairments to support educators in the field
- in August of 2021 developed an annual statewide Information Day for directors and staff. This day provides an overview of the previous year in regard to data, legislation and any changes the bureau implemented. This day also outlined the work of the Bureau for the upcoming year.
- Technical guidance on assessment for students with disabilities as it relates to the statewide assessment, related to Indicator 3 targets and the 1% requirement regarding participation in the alternate assessment
- The director and staff attend regional state director meetings, monthly meetings with our state association for special educations directors (New Hampshire Association of Special Education Administrators NHASEA), as well monthly board meetings, and monthly calls with NHASEA
- bi-weekly calls open to stakeholders to share information from the Bureau and answer questions from stakeholders.
- Bureau staff work closely with our Parent Information Center to promote key initiatives across the State; including RACE2K which focuses on maximizing results for preschool children with disabilities and family engagement.
- The director and bureau staff have a seat on a variety of groups within the state to provide a voice for special education in other venues. These include:
  - o the Council for Thriving Children, focusing on early childhood learning, and the
  - o DHHS System of Care focusing on the mental health needs of youth. The Bureau also has a seat on the
  - o NH Developmental Disability Council,
  - o the Autism Council,
  - o the Deaf Bill of Rights Advisory Council,
  - o the Preschool Development Grant,
  - o Non-public Advisory Council, and the
  - o New Hampshire Educator Effectiveness for Student Success collaboration group.

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 on areas determined to be in need of support. They could also be episodic, less labor-intensive events that extend over a period of time. Some of those supports include but are not limited to:

- coaching sessions tied to our professional development on Measurable Annual Goals and Written Prior notice
- targeted supports around findings of noncompliance relative to indicators in the State Performance Plan and determinations of significant disproportionality as well as areas the Bureau becomes aware of in their daily work
- assistance by each indicator lead as they work with districts on their data and their progress towards the state targets
- reviewing of data, identification of root causes of potential noncompliance and support for district personnel with understanding the intricacies of the areas that need to be addressed
- 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), providing updates at each meeting on special education and areas of concern within the state to inform their work
- Targeted coordination with the NHSEIS stakeholder group to provide TA around issues reported from the field

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. Some of those supports include but are not limited to:

- specific targeted TA based on data from the indicators,
- onsite monitoring,
- fiscal audits through the NHDOE Bureau of Federal Compliance,
- technical assistance in conjunction with the complaints process
- enforcement of technical assistance around due process hearings decisions
- LEA Determinations Root Cause Analysis Process falls in this category as there is intensive, targeted process for support to 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 NHED developed new and more aligned general supervision activities to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities this included a review of all professional development offerings.

The General Supervision System (described above) includes the description of the mechanisms the State for professional development. Professional development opportunities include, but are not limited to,

- quarterly training opportunities, some which are Written Prior Notice, Measurable Annual Goals, Indicator 13 – Secondary Transition Trainings, Assessment for Students with Disabilities and Specially Designed Instruction
- district specific training,
- UDL Academy,
- root cause analysis instruction
- new Special Education Administrators series of professional development
- Special Education Coordinators series of professional development
- targeted PD that has been mandated as part of the correction of noncompliance
- collaboration with Secondary Transition Community of Practice for professional development

#### **Stakeholder Engagement:**

**The mechanisms for broad stakeholder engagement, including activities carried out to obtain input from, and build the capacity of, a diverse group of parents to support the implementation activities designed to improve outcomes, including target setting and any subsequent revisions to targets, analyzing data, developing improvement strategies, and evaluating progress.**

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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

#### **Apply stakeholder engagement from introduction to all Part B results indicators (y/n)**

YES

#### **Number of Parent Members:**

0

#### **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 NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We were not able to engage parents in providing input on the targets as well. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 for target setting and other areas of need. This will include but is not limited to district staff, parents (with the support of the Parent Information 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.**

As staffing has increased the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee. The NHED will be reviewing performance data for all Indicators for this SPP APR period and if necessary, revising targets for the results Indicators.

#### **Soliciting Public Input:**

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

As staffing has increased the NHED will be conducting stakeholder meetings in the summer of 2024 with stakeholders including but not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee. The NHED will be reviewing performance data for all Indicators for this SPP APR period and if necessary, revising targets for the results Indicators.

#### **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 2021 APR to the department website (<https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/sonh/2023-nh-01-spp-part-b-ffy-2021-22.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 has their data reported in the statewide data system called iPlatform. This is comprised of the LEAs performance on the targets of each indicator in the SPP/APR. This data is available on the NH Department of Education website at:

<https://www.education.nh.gov/who-we-are/division-of-educator-and-analytic-resources/iplatform>. LEAs are also issued an LEA Determination report each year.

#### **Reporting to the Public**

#### **How and where the State reported to the public on the FFY 2021 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 2021 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 revisions if the State has revised the targets that it submitted with its FFY 2021 APR in 2023, 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 2021 APR to the department website (<https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/sonh/2023-nh-01-spp-part-b-ffy-2021-22.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 has their data reported in the statewide data system called iPlatform. This is comprised of the LEAs performance on the targets of each indicator in the SPP/APR. This data is available on the NH Department of Education website at:

<https://www.education.nh.gov/who-we-are/division-of-educator-and-analytic-resources/iplatform>. LEAs are also issued an LEA Determination report each year.

## **Intro - Prior FFY Required Actions**

None

## **Intro - OSEP Response**

The State did not describe the mechanisms for soliciting broad stakeholder input on the State's targets in the SPP/APR and subsequent revisions that the State made to those targets. Specifically, the State did not report: (1) The number of parent members who provided stakeholder input and a description of how the parent members were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress; and (2) Description of the activities conducted to increase the capacity of diverse groups of parents; and (3) The mechanisms and timelines for soliciting public input.

## **Intro - Required Actions**

The State's IDEA Part B determination for both 2023 and 2024 is Needs Assistance. In the State's 2024 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2023 SPP/APR submission, due February 1, 2025, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

In the FFY 2023 SPP/APR, the State must describe the mechanisms for soliciting broad stakeholder engagement, including activities carried out to obtain input from, and build the capacity of, a diverse group of parents to support the implementation activities designed to improve outcomes, including target setting and any subsequent revisions to targets, analyzing data, developing improvement strategies, and evaluating progress.

# 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 ED*Facts* 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 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

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

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

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	2017	2018	2019	2020	2021
Target >=	95.00%	95.00%	95.00%	95.00%	95.00%
Data	74.26%	73.78%	80.16%	82.92%	78.45%

### Targets

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

### Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provided stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

### Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (ED <i>Facts</i> file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,348
SY 2021-22 Exiting Data Groups (ED <i>Facts</i> file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	152
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	30
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	148

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,348	1,678	78.45%	95.00%	80.33%	Did not meet target	No Slippage

**Graduation Conditions**

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

Explanation of Calculation:

Consistent with the OSEP instructions, the NHED has described the results of the examination of the data for the year before the reporting year (e.g. for the FFY 2022 APR, used data from 2021-2022), and compared the results to the target reported in the FFY 2022 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.

**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)**

**1 - Prior FFY Required Actions**

None

**1 - OSEP Response**

**1 - Required Actions**



## Indicator 2: Drop Out

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

**Data Source**

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in ED Facts 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 dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

**Instructions**

*Sampling is not allowed.*

Data for this indicator are "lag" data. Describe the results of the State's examination of the section 618 exiting data for the year before the reporting year (e.g., for the FFY 2022 SPP/APR, use data from 2021-2022), and compare the results to the target.

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

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

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

## 2 - Indicator Data

### Historical Data

Baseline Year	Baseline Data
2020	7.08%

FFY	2017	2018	2019	2020	2021
Target <=	0.76%	0.65%	0.65%	7.08%	7.00%
Data	1.05%	0.59%	1.54%	7.08%	9.54%

### Targets

FFY	2022	2023	2024	2025
Target <=	6.80%	6.80%	6.60%	6.40%

### Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

### Prepopulated Data

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (ED Facts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,348
SY 2021-22 Exiting Data Groups (ED Facts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	

Source	Date	Description	Data
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	152
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	30
SY 2021-22 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/24/2023	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	148

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
148	1,678	9.54%	6.80%	8.82%	Did not meet target	No Slippage

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

Consistent with the OSEP's Part B Indicator Measurement Table, the NHED has described the results of the examination of the data for the year before the reporting year (e.g. for the FFY 2022 APR, use data from 2021-2022). The results are compared to the target set for FFY 2022 in the State Performance Plan. Dropout numbers and rates for all students, including students with IEPs, are reported by LEAs. 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 but 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 2021-22 dropout is a public school student in grades 9 - 12 who completed the 2020-21 school year, did not return after the summer of 2021 or dropped out during the 2021-22 school year, and did not return by October 1, 2022.

**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)**

**2 - Prior FFY Required Actions**

None

**2 - OSEP Response**

**2 - Required Actions**

## Indicator 3A: Participation for Children with IEPs

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using ED Facts 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	2020	77.44%
Reading	B	Grade 8	2020	66.97%
Reading	C	Grade HS	2020	56.98%
Math	A	Grade 4	2020	78.29%
Math	B	Grade 8	2020	67.04%
Math	C	Grade HS	2020	56.98%

#### Targets

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

**Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

**FFY 2022 Data Disaggregation from EDFacts**

**Data Source:**

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

**Date:**

01/10/2024

**Reading Assessment Participation Data by Grade (1)**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	2,679	2,522	1,986
b. Children with IEPs in regular assessment with no accommodations (3)	1,254	1,432	591
c. Children with IEPs in regular assessment with accommodations (3)	1,095	532	637
d. Children with IEPs in alternate assessment against alternate standards	84	107	75

**Data Source:**

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

01/10/2024

**Math Assessment Participation Data by Grade**

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	2,679	2,522	1,986
b. Children with IEPs in regular assessment with no accommodations (3)	1,196	1,382	591
c. Children with IEPs in regular assessment with accommodations (3)	1,170	606	637
d. Children with IEPs in alternate assessment against alternate standards	84	106	74

(1) The children with IEPs who are English learners and took the ELP in lieu of the regular reading/language arts assessment are not included in the pre-filled data in this indicator.

(2) 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 pre-filled data in this indicator.

(3) The term "regular assessment" is an aggregation of the following types of assessments, as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the pre-filled data in this indicator.

**FFY 2022 SPP/APR Data: Reading Assessment**

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	2,433	2,679	88.57%	95.00%	90.82%	Did not meet target	No Slippage

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B	Grade 8	2,071	2,522	82.31%	95.00%	82.12%	Did not meet target	No Slippage
C	Grade HS	1,303	1,986	66.41%	95.00%	65.61%	Did not meet target	No Slippage

**FFY 2022 SPP/APR Data: Math Assessment**

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	2,450	2,679	89.31%	95.00%	91.45%	Did not meet target	No Slippage
B	Grade 8	2,094	2,522	82.64%	95.00%	83.03%	Did not meet target	No Slippage
C	Grade HS	1,302	1,986	66.41%	95.00%	65.56%	Did not meet target	No Slippage

**Regulatory Information**

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

**Public Reporting Information**

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

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>  
and

<https://dashboard.nh.gov/t/DOE/views/iReport/FrontPage?%3Aembed=y&%3Aiid=1&%3AisGuestRedirectFromVizportal=y&%3Atabs=no&%3Atoolbar=no> (select "district" and year, then click "view report", click IDEA in top right corner, the deselect indicator 1 and select indicator 3)

Students with Disabilities Participating in Assessments with and without Accommodations

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

**Provide additional information about this indicator (optional)**

New Hampshire state law permits a parent/legal guardian to exempt their student from participating in any of the required statewide assessments; however, there is no requirement for school districts to provide data related to this exemption to the SEA or to report the data publicly. On March 25, 2022, a letter was sent from Commissioner Edelblut to all district leaders urging schools to ensure that at least 95% of students participate in the 2022 assessment. Although NH did not meet the target of 95%, there was an increase in participation in grades 4 and 8

**3A - Prior FFY Required Actions**

None

**3A - OSEP Response**

**3A - Required Actions**

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

#### Data Source

3B. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* 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	2020	14.68%
Reading	B	Grade 8	2020	10.04%
Reading	C	Grade HS	2020	20.46%
Math	A	Grade 4	2020	15.76%
Math	B	Grade 8	2020	6.20%
Math	C	Grade HS	2020	7.47%

#### Targets

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

#### Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

**FFY 2022 Data Disaggregation from ED Facts**

**Data Source:**

SY 2022-23 Assessment Data Groups - Reading (ED Facts file spec FS178; Data Group: 584)

**Date:**

01/10/2024

**Reading Assessment Proficiency Data by Grade (1)**

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	2,349	1,964	1,228
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	195	231	102
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	123	39	120

**Data Source:**

SY 2022-23 Assessment Data Groups - Math (ED Facts file spec FS175; Data Group: 583)

**Date:**

01/10/2024

**Math Assessment Proficiency Data by Grade (1)**

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	2,366	1,988	1,228
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	257	117	33
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	193	27	54

(1)The term “regular assessment” is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	318	2,349	12.30%	16.68%	13.54%	Did not meet target	No Slippage

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
B	Grade 8	270	1,964	11.94%	12.04%	13.75%	Met target	No Slippage
C	Grade HS	222	1,228	23.39%	22.46%	18.08%	Did not meet target	Slippage

**Provide reasons for slippage for Group C, if applicable**

After reviewing data and district input on the impact of the Covid 19 Pandemic, the State has determined that high school students have experienced a high rate of learning loss due to remote instruction as well as interruptions in consistent teaching. The biggest instructional gains for students impacted by the pandemic have been at the foundational or early school age level whereas those students in Middle and High School are still catching up on interrupted course specific in-person instruction and have gaps in content specific course instruction. Districts have also reported that the number of students who are taking the 11th grade standardized assessment (the SAT) has decreased and many of those students who participate in the SAT do not have a vested interest in assessment outcomes as universities and colleges often do not require SAT scores for admission or the students are not planning on attending college.

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	450	2,366	15.87%	17.76%	19.02%	Met target	No Slippage
B	Grade 8	144	1,988	7.59%	8.20%	7.24%	Did not meet target	Slippage
C	Grade HS	87	1,228	7.80%	9.47%	7.08%	Did not meet target	Slippage

**Provide reasons for slippage for Group B, if applicable**

After reviewing data and district input on the impact of the Covid 19 Pandemic, the State has determined that middle school students have experienced a high rate of learning loss due to remote instruction as well as interruptions in consistent teaching. The biggest instructional gains for students impacted by the pandemic have been at the foundational or early school age level whereas those students in Middle and High School are still catching up on interrupted course specific in-person instruction and have gaps in content specific course instruction.

**Provide reasons for slippage for Group C, if applicable**

After reviewing data and district input on the impact of the Covid 19 Pandemic, the State has determined that high school students have experienced a high rate of learning loss due to remote instruction as well as interruptions in consistent teaching. The biggest instructional gains for students impacted by the pandemic have been at the foundational or early school age level whereas those students in Middle and High School are still catching up on interrupted course specific in-person instruction and have gaps in content specific course instruction. Districts have also reported that reported that the number of students who are taking the 11th grade standardized assessment (the SAT) has decreased and many of those students who participate in the SAT do not have a vested interest in assessment outcomes as universities and colleges often do not require SAT scores for admission or the students are not planning on attending college.



### **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>  
and

<https://dashboard.nh.gov/t/DOE/views/iReport/FrontPage?%3Aembed=y&%3Aiid=1&%3AisGuestRedirectFromVizportal=y&%3Atabs=no&%3Atoolbar=no> (select "district" and year, then click "view report", click IDEA in top right corner, the deselect indicator 1 and select indicator 3)

Students with Disabilities Participating in Assessments with and without Accommodations

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

### **Provide additional information about this indicator (optional)**

We are addressing the slippage in grade 11 reading as a state through additional literacy professional development opportunities and will be focusing on reading instruction for the State Systemic Improvement Plan (SSIP) and providing additional professional development and specific technical assistance with assessments. We are addressing the math slippage in grades 8 and 11, by providing additional support and training as well as technical assistance with assessments.

### **3B - Prior FFY Required Actions**

None

### **3B - OSEP Response**

### **3B - Required Actions**

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

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

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

### Data Source

3C. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* 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	2020	28.71%
Reading	B	Grade 8	2020	40.79%
Reading	C	Grade HS	2020	31.08%
Math	A	Grade 4	2020	49.00%
Math	B	Grade 8	2020	15.79%
Math	C	Grade HS	2020	29.73%

### Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A >=	Grade 4	37.53%	39.53%	41.53%	43.53%
Reading	B >=	Grade 8	42.79%	43.00%	43.25%	43.79%
Reading	C >=	Grade HS	37.53%	39.53%	41.53%	43.53%
Math	A >=	Grade 4	53.00%	55.00%	57.00%	59.00%
Math	B >=	Grade 8	19.80%	21.80%	23.80%	25.80%
Math	C >=	Grade HS	33.70%	35.70%	37.70%	39.70%

**Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

**FFY 2022 Data Disaggregation from EDFacts**

**Data Source:**

SY 2022-23 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

01/10/2024

**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	84	107	75
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	20	36	28

**Data Source:**

SY 2022-23 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

01/10/2024

**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	84	106	74
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	46	13	21

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	20	84	17.76%	37.53%	23.81%	Did not meet target	No Slippage
B	Grade 8	36	107	32.26%	42.79%	33.64%	Did not meet target	No Slippage
C	Grade HS	28	75	39.68%	37.53%	37.33%	Did not meet target	Slippage

**Provide reasons for slippage for Group C, if applicable**

After reviewing data and district input on the impact of the Covid 19 Pandemic, the State has determined that high school students have experienced a high rate of learning loss due to remote instruction as well as interruptions in consistent teaching. The biggest instructional gains for students impacted by the pandemic have been at the foundational or early school age level whereas those students in Middle and High School are still catching up on interrupted course specific in-person instruction and have gaps in content specific course instruction.

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	46	84	40.57%	53.00%	54.76%	Met target	No Slippage
B	Grade 8	13	106	15.22%	19.80%	12.26%	Did not meet target	Slippage
C	Grade HS	21	74	33.33%	33.70%	28.38%	Did not meet target	Slippage

**Provide reasons for slippage for Group B, if applicable**

After reviewing data and district input on the impact of the Covid 19 Pandemic, the State has determined that middle school students have experienced a high rate of learning loss due to remote instruction as well as interruptions in consistent teaching. The biggest instructional gains for students impacted by the pandemic have been at the foundational or early school age level whereas those students in Middle and High School are still catching up on interrupted course specific in-person instruction and have gaps in content specific course instruction.

**Provide reasons for slippage for Group C, if applicable**

After reviewing data and district input on the impact of the Covid 19 Pandemic, the State has determined that high school students have experienced a high rate of learning loss due to remote instruction as well as interruptions in consistent teaching. The biggest instructional gains for students impacted by the pandemic have been at the foundational or early school age level whereas those students in Middle and High School are still catching up on interrupted course specific in-person instruction and have gaps in content specific course instruction.

**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>  
 and  
<https://dashboard.nh.gov/t/DOE/views/iReport/FrontPage?%3Aembed=y&%3Aiid=1&%3AisGuestRedirectFromVizportal=y&%3Atabs=no&%3Atoolbar=no> (select "district" and year, then click "view report", click IDEA in top right corner, the deselect indicator 1 and select indicator 3)

Students with Disabilities Participating in Assessments with and without Accommodations  
<https://www.education.nh.gov/who-we-are/division-of-learner-support/bureau-of-student-support/special-education-data>

**Provide additional information about this indicator (optional)**

We are addressing the slippage in grade 11 reading as a state through additional literacy professional development opportunities and will be focusing on reading instruction for the State Systemic Improvement Plan (SSIP) and providing additional professional development and specific technical assistance with assessments. We are addressing the math slippage in grades 8 and 11, by providing additional support and training as well as technical assistance with assessments.

The NHED is working with the NHED data management division to update our public reporting site to include school level assessment proficiency data for students with disabilities.

**3C - Prior FFY Required Actions**

None

### **3C - OSEP Response**

The State did not provide a Web link demonstrating that the State reported publicly on the performance 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, compared with the achievement of all children, including children with disabilities, proficiency rate for children with IEPs and alternate assessments based on alternate academic achievement standards, at the district and school levels. The failure to publicly report as required under 34 C.F.R. § 300.160(f) is noncompliance.

### **3C - Required Actions**

Within 90 days of the receipt of the State's 2024 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2022, 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 2023 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2023.

### 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 ED*Facts* 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 2022-2023 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2022-2023 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 2022-2023 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2022-2023 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	2020	34.19
Reading	B	Grade 8	2020	39.13
Reading	C	Grade HS	2020	43.13
Math	A	Grade 4	2020	25.64
Math	B	Grade 8	2020	26.69
Math	C	Grade HS	2020	34.95

#### Targets

Subject	Group	Group Name	2022	2023	2024	2025
Reading	A <=	Grade 4	33.00	30.00	27.00	24.00
Reading	B <=	Grade 8	33.00	30.00	27.00	24.00
Reading	C <=	Grade HS	37.00	34.00	31.00	27.00
Math	A <=	Grade 4	29.00	26.00	23.00	20.00
Math	B <=	Grade 8	29.00	26.00	23.00	20.00
Math	C <=	Grade HS	29.00	26.00	23.00	20.00

#### Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain

feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

**FFY 2022 Data Disaggregation from ED Facts**

**Data Source:**

SY 2022-23 Assessment Data Groups - Reading (ED Facts file spec FS178; Data Group: 584)

**Date:**

01/10/2024

**Reading Assessment Proficiency Data by Grade (1)**

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	11,894	11,768	10,754
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	2,349	1,964	1,228
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	5,749	5,997	5,971
d. All students in regular assessment with accommodations scored at or above proficient against grade level	152	51	414
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	195	231	102
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	123	39	120

**Data Source:**

SY 2022-23 Assessment Data Groups - Math (ED Facts file spec FS175; Data Group: 583)

**Date:**

01/10/2024

**Math Assessment Proficiency Data by Grade (1)**

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	11,962	11,879	10,758
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	2,366	1,988	1,228
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	5,787	4,115	3,516
d. All students in regular assessment with accommodations scored at or above proficient against grade level	223	37	229
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	257	117	33
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	193	27	54

(1)The term “regular assessment” is an aggregation of the following types of assessments as applicable for each grade/ grade group: regular assessment based on grade-level achievement standards, advanced assessment, Innovative Assessment Demonstration Authority (IADA) pilot

assessment, high school regular assessment I, high school regular assessment II, high school regular assessment III and locally-selected nationally recognized high school assessment in the prefilled data in this indicator.

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	13.54%	49.61%	35.57	33.00	36.08	Did not meet target	No Slippage
B	Grade 8	13.75%	51.39%	34.05	33.00	37.65	Did not meet target	Slippage
C	Grade HS	18.08%	59.37%	38.17	37.00	41.30	Did not meet target	Slippage

**Provide reasons for slippage for Group B, if applicable**

After reviewing data and district input on the impact of the Covid 19 Pandemic, the State has determined that middle school students have experienced a high rate of learning loss due to remote instruction as well as interruptions in consistent teaching. The biggest instructional gains for students impacted by the pandemic have been at the foundational or early school age level whereas those students in Middle and High School are still catching up on interrupted course specific in-person instruction and have gaps in content specific course instruction.

**Provide reasons for slippage for Group C, if applicable**

After reviewing data and district input on the impact of the Covid 19 Pandemic, the State has determined that high school students have experienced a high rate of learning loss due to remote instruction as well as interruptions in consistent teaching. The biggest instructional gains for students impacted by the pandemic have been at the foundational or early school age level whereas those students in Middle and High School are still catching up on interrupted course specific in-person instruction and have gaps in content specific course instruction.

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A	Grade 4	19.02%	50.24%	32.19	29.00	31.22	Did not meet target	No Slippage
B	Grade 8	7.24%	34.95%	25.73	29.00	27.71	Met target	No Slippage
C	Grade HS	7.08%	34.81%	28.82	29.00	27.73	Met target	No Slippage

**Provide additional information about this indicator (optional)**

**3D - Prior FFY Required Actions**

None

**3D - OSEP Response**

**3D - Required Actions**



## Indicator 4A: Suspension/Expulsion

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

**Results Indicator:** Rates of suspension and expulsion:

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

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

#### Data Source

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

#### Measurement

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

Include State's definition of "significant discrepancy."

#### Instructions

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, LEAs that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs 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 2022 SPP/APR, use data from 2021-2022), 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 rates of suspensions and expulsions for 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 section 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 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 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 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon LEAs 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 child-specific and regulatory/systemic 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 QA 23-01, dated July 24, 2023.

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) 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 2022 SPP/APR, the data for FFY 2021), 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
2022	5.17%

FFY	2017	2018	2019	2020	2021
Target <=	1.15%	1.15%	1.15%	18.18%	17.18%
Data	0.00%	1.16%	18.18%	10.00%	Not Valid and Reliable

**Targets**

FFY	2022	2023	2024	2025
Target <=	5.17%	4.17%	4.17%	3.17%

**Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

The Bureau met with stakeholders regarding the change in methodology and subsequent change in baseline and targets for Indicator 4a. Based on stakeholder input the Bureau has chosen new targets for FFY22 – 25. As these new targets are based on limited years of data post COVID and with the new methodology the Bureau will be meeting with additional stakeholder groups in the coming year to review, and if necessary revise, the targets for Indicator 4a based on additional years of data analysis.

**FFY 2022 SPP/APR Data**

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

NO

Number of LEAs that have a significant discrepancy	Number of LEAs in the State	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
9	174	Not Valid and Reliable	5.17%	5.17%	N/A	N/A

**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 NHED defines a “significant discrepancy” for 4a as any LEA with a with a rate of suspension/expulsion of greater than 10 days for children with IEPs that is greater than 3.5 times the State’s rate for all students with IEPs (for FFY22 the State’s rate was 0.81). In order to review the maximum number of LEAs each year there is no cell or n size requirement for Indicator 4A.

**Provide additional information about this indicator (optional)**

Based on the large number of districts excluded from analysis in previous years and concerns with the methodology, New Hampshire met with stakeholders for input on the comparison method, threshold, and cell and N size requirements. Based on these meetings, and with the input of stakeholders, New Hampshire changed our calculation methodology including comparison method, threshold, and cell/N size requirements. New Hampshire determined that a threshold of greater than 3.5 times the State’s rate for all students with IEPs was a reasonable threshold to determine significant discrepancy. Greater than 3.5 times the State’s rate was determined reasonable as it was the average rate suggested by stakeholders when considering the removal of cell and n size requirements in order to review all districts. It aligns with New Hampshire’s threshold for Significant Disproportionality which was also determined reasonable with stakeholder input. This threshold allows New Hampshire to identify districts that may be over disciplining but not penalize small districts where +/- one student can significantly change the discipline ratio. With the change in methodology for Indicator 4 (the removal of minimum cell and n sizes, the comparison to the state’s rate of discipline for students with disabilities and setting a threshold of >3.5x the State’s rate) with stakeholder input we set a new baseline and targets for Indicator 4a. New Hampshire will be continuing to meet with stakeholders regarding the new targets as additional years of data are collected and analyzed.

**Review of Policies, Procedures, and Practices (completed in FFY 2022 using 2021-2022 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.**

For those districts with significant discrepancy in discipline the NHED reviewed policies, procedures and root cause analysis of practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that these comply with IDEA. The NHED compared the district's root cause self-assessment to the submitted policies and procedures as well and met with the LEA to discuss results of the review.

Upon review of all this information for the nine districts over the threshold for FFY22 it was determined that there were no individual instances of noncompliance with the implementation of regulations of IDEA relative to this indicator.

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 2021**

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 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**4A - Prior FFY Required Actions**

In the FFY 2022 SPP/APR, the State must provide valid and reliable data for this indicator for FFY 2022 using a methodology that meets one of the two comparison methods as required by 34 C.F.R. § 300.170(a) and the Measurement Table.

**Response to actions required in FFY 2021 SPP/APR**

In the FFY 2022 SPP/APR, the State provided valid and reliable data for this indicator for FFY 2022 using a methodology that meets one of the two comparison methods as required by 34 C.F.R. § 300.170(a) and the Measurement Table. The state selected the state's rate comparison methodology, which compares children with IEPs among LEAs within the state.

**4A - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.

The State has revised its targets through FFY 2025 for this indicator, and OSEP accepts those targets.

OSEP's Required Actions in response to the State's FFY 2021 SPP/APR required the State to explain, in its FFY 2022 SPP/APR, how its methodology is reasonably designed to determine if significant discrepancies are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs. OSEP appreciates the State reported it consulted with stakeholders to determine if its methodology is reasonably designed. However, OSEP notes that the State's revised methodology results in a threshold for measuring significant discrepancy in the rate of long-term suspension and expulsion rates of children with IEPs that falls above the median of thresholds used by all States.

**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 2022 SPP/APR, use data from 2021-2022), 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 the rates of suspensions and expulsions for 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 section 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 2021-2022 school year, those 100 LEAs would have reported section 618 data in 2021-2022 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2022-2023, suspension/expulsion data from those 15 new LEAs would not be in the 2021-2022 section 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 2022 SPP/APR submission, States must use the number of LEAs reported in 2021-2022 (which can be found in the FFY 2021 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, 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.

Provide detailed information about the timely correction of child-specific and regulatory/systemic 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 QA 23-01, dated July 24, 2023.

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) 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 2022 SPP/APR, the data for FFY 2021), 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
2022	0.00%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

**Targets**

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

**FFY 2022 SPP/APR Data**

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

NO

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 in the State	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
20	0	174	0.00%	0%	0.00%	N/A	N/A

**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

**Were all races and ethnicities included in the review?**

YES

**State's definition of "significant discrepancy" and methodology**

The NHED defines a "significant discrepancy" for 4b as any LEA with a rate of suspension/expulsion of greater than 10 days for children with IEPs in any racial/ethnic group that is greater than 3.5 times the State's rate for all students with IEPs (for FFY22 the State's rate was 0.81). In order to review the maximum number of LEAs each year there is no cell or n size requirement for Indicator 4B.

**Provide additional information about this indicator (optional)**

Based on the large number of districts excluded from analysis in previous years and concerns with the methodology, New Hampshire met with stakeholders for input on the comparison method, threshold, and cell and N size requirements. Based on these meetings, and with the input of stakeholders, New Hampshire changed our calculation methodology including comparison method, threshold, and cell/N size requirements. New Hampshire determined that a threshold of greater than 3.5 times the State's rate for all students with IEPs was a reasonable threshold to determine significant discrepancy. Greater than 3.5 times the State's rate was determined reasonable as it was the average rate suggested by stakeholders when considering the removal of cell and n size requirements in order to review all districts. It aligns with New Hampshire's threshold for Significant Disproportionality which was also determined reasonable with stakeholder input. This threshold allows New Hampshire to identify districts that may be over disciplining but not penalize small districts where +/- one student can significantly change the discipline ratio. With the change in methodology for Indicator 4 (the removal of minimum cell and n sizes, the comparison to the state's rate of discipline for students with disabilities and setting a threshold of >3.5x the State's rate) with stakeholder input we set a new baseline for Indicator 4a.

**Review of Policies, Procedures, and Practices (completed in FFY 2022 using 2021-2022 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.**

For those districts with significant discrepancy in discipline the NHED reviewed policies, procedures and root cause analysis of practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that these comply with IDEA. The NHED compared the district's root cause self-assessment to the submitted policies and procedures as well and met with the LEA to discuss results of the review.

Upon review of all this information for the twenty districts over the threshold for FFY22 it was determined that there were no individual instances of noncompliance with the implementation of regulations of IDEA relative to this indicator and based on this review did not have policies, procedures or practices that contributed to the significant discrepancy.

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 2021**

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 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**4B - Prior FFY Required Actions**

In the FFY 2022 SPP/APR, the State must provide data for this indicator for FFY 2022 using a methodology that meets one of the two comparison methods as required by 34 C.F.R. § 300.170(a) and the Measurement Table.

**Response to actions required in FFY 2021 SPP/APR**

The state selected the state’s rate comparison methodology, which compares children with IEPs among LEAs within the state.

**4B - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.

OSEP’s Required Actions in response to the State’s FFY 2021 SPP/APR required the State to explain, in its FFY 2022 SPP/APR, how its methodology is reasonably designed to determine if significant discrepancies, by race or ethnicity, are occurring in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs. OSEP appreciates the State reported it consulted with stakeholders to determine if its methodology is reasonably designed. However, OSEP notes that the State’s revised methodology results in a threshold for measuring significant discrepancy, by race or ethnicity, in the rate of long-term suspension and expulsion rates of children with IEPs that falls above the median of thresholds used by all States.

**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 ED*Facts* 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	2017	2018	2019	2020	2021
A	2020	Target >=	72.85%	74.00%	74.00%	74.00%	74.00%
A	73.75%	Data	70.81%	71.56%	72.19%	73.75%	75.42%
B	2020	Target <=	7.97%	7.00%	7.00%	7.00%	6.50%
B	8.95%	Data	9.05%	9.22%	9.08%	8.95%	8.38%
C	2020	Target <=	2.61%	2.05%	2.05%	2.05%	2.05%
C	2.46%	Data	2.84%	2.79%	2.66%	2.46%	1.95%

### Targets

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

### Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

**Prepopulated Data**

Source	Date	Description	Data
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	Total number of children with IEPs aged 5 (kindergarten) through 21	28,704
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	22,397
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	2,002
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	362
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	67
SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	08/30/2023	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	6

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 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	22,397	28,704	75.42%	74.50%	78.03%	Met target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	2,002	28,704	8.38%	6.50%	6.97%	Did not meet target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	435	28,704	1.95%	2.05%	1.52%	Met target	No Slippage

Provide additional information about this indicator (optional)

**5 - Prior FFY Required Actions**

None

**5 - OSEP Response**



## 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 ED*Facts* file specification FS089.

#### Measurement

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

#### Instructions

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

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

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

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

For Indicator 6C: States may express their targets in a range (e.g., 75-85%).

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

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

## 6 - Indicator Data

### Not Applicable

Select yes if this indicator is not applicable.

NO

### Historical Data (Inclusive) – 6A, 6B, 6C

Part	FFY	2017	2018	2019	2020	2021
A	Target >=	56.00%	60.00%	60.00%	60.00%	60.00%
A	Data	58.43%	59.99%	52.82%	41.51%	39.10%
B	Target <=	14.50%	12.00%	12.00%	12.00%	12.00%
B	Data	12.86%	11.75%	13.89%	12.48%	12.45%
C	Target <=					
C	Data				0.05%	0.15%

### Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

**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	2022	2023	2024	2025
Target A >=	60.00%	60.00%	60.00%	60.00%
Target B <=	12.00%	12.00%	12.00%	12.00%

**Inclusive Targets – 6C**

FFY	2022	2023	2024	2025
Target C <=				

**Prepopulated Data**

**Data Source:**

SY 2022-23 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

**Date:**

08/30/2023

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	979	1,178	56	2,213
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	434	515	23	972
b1. Number of children attending separate special education class	81	113	3	197
b2. Number of children attending separate school	0	0	0	0
b3. Number of children attending residential facility	0	0	0	0
c1. Number of children receiving special education and related services in the home	0	1	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 2022 SPP/APR Data - Aged 3 through 5**

<b>Preschool Environments</b>	<b>Number of children with IEPs aged 3 through 5 served</b>	<b>Total number of children with IEPs aged 3 through 5</b>	<b>FFY 2021 Data</b>	<b>FFY 2022 Target</b>	<b>FFY 2022 Data</b>	<b>Status</b>	<b>Slippage</b>
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	972	2,213	39.10%	60.00%	43.92%	Did not meet target	No Slippage
B. Separate special education class, separate school or residential facility	197	2,213	12.45%	12.00%	8.90%	Met target	No Slippage
C. Home	1	2,213	0.15%		0.05%	N/A	N/A

**Provide additional information about this indicator (optional)**

The State reported fewer than ten children receiving special education and related services in the home in FFY 2022. 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 - Prior FFY Required Actions**

None

**6 - OSEP Response**

The State reported fewer than ten children receiving special education and related services in the home in FFY 2022. 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 3 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	2017	2018	2019	2020	2021
A1	2020	Target >=	80.00%	80.00%	80.00%	80.00%	80.00%
A1	75.05%	Data	79.92%	77.56%	77.79%	75.05%	74.80%

A2	2020	Target >=	62.00%	62.00%	62.00%	62.00%	62.00%
A2	53.15%	Data	61.68%	58.12%	56.85%	53.15%	58.26%
B1	2020	Target >=	80.00%	80.00%	80.00%	80.00%	80.00%
B1	75.34%	Data	79.82%	78.97%	75.23%	75.34%	72.45%
B2	2020	Target >=	61.50%	61.50%	61.50%	61.50%	61.50%
B2	51.63%	Data	61.59%	57.06%	52.09%	51.63%	49.32%
C1	2020	Target >=	77.50%	77.50%	77.50%	77.50%	77.50%
C1	76.26%	Data	90.45%	61.60%	68.64%	76.26%	71.15%
C2	2020	Target >=	63.50%	63.50%	63.50%	63.50%	63.50%
C2	49.88%	Data	83.24%	56.49%	54.40%	49.88%	53.52%

**Targets**

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

**Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provided stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

**FFY 2022 SPP/APR Data**

**Number of preschool children aged 3 through 5 with IEPs assessed**

1,151

**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	14	1.22%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	259	22.50%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	245	21.29%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	391	33.97%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	242	21.03%

Outcome A	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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>	636	909	74.80%	80.00%	69.97%	Did not meet target	Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	633	1,151	58.26%	62.00%	55.00%	Did not meet target	Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	14	1.22%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	278	24.15%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	310	26.93%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	380	33.01%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	169	14.68%

Outcome B	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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>	690	982	72.45%	80.00%	70.26%	Did not meet target	Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	549	1,151	49.32%	61.50%	47.70%	Did not meet target	Slippage

**Outcome C: Use of appropriate behaviors to meet their needs**

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	17	1.48%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	241	20.94%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	234	20.33%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	435	37.79%

Outcome C Progress Category	Number of Children	Percentage of Children
e. Preschool children who maintained functioning at a level comparable to same-aged peers	224	19.46%

Outcome C	Numerator	Denominator	FFY 2021 Data	FFY 2022 Target	FFY 2022 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>	669	927	71.15%	77.50%	72.17%	Did not meet target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	659	1,151	53.52%	63.50%	57.25%	Did not meet target	No Slippage

Part	Reasons for slippage, if applicable
A1	<p>While the data submitted for Indicator 7 shows an improvement in the distribution of students within each progress category, Outcome A1, A2, B1 and B2 are areas of slippage reported. LEAs continue to report many of the preschool students have returned to school after the pandemic with significant deficits in their social emotional skills due to the lack of human interaction and peer engagement that was availed during the pandemic. Some of this group of students in this reporting period were born during the pandemic and had minimal exposure to individuals outside of their households.</p> <p>LEA's reported that there were significant staffing and administrative shortages as well as staffing and administrative turnover which led to a breakdown in reporting requirements across districts. It was discovered that 2 districts did not collect or report on Indicator 7 data on for the 2022-2023 year. This affected outcomes as accurate student numbers at the state level were not represented. These districts were given corrective actions plans for this reporting year which outlined the state reporting requirements. Their specific corrective action plans also indicated specific steps that they are required to take in their reporting process as well as mandatory trainings on collecting and entering data. They are required to enter Indicator 7 data as well as have check in with the SEA to ensure data is being entered upon reporting periods.</p> <p>In the outcome area A, category B we are seeing an increase in student improvement; however due to the pandemic, we are not seeing the number increase to nearer of their same aged peers.</p>
A2	<p>While the data submitted for Indicator 7 shows an improvement in the distribution of students within each progress category, Outcome A1, A2, B1 and B2 are areas of slippage reported. LEAs continue to report many of the preschool students have returned to school after the pandemic with significant deficits in their social emotional skills due to the lack of human interaction and peer engagement that was availed during the pandemic. Some of this group of students in this reporting period were born during the pandemic and had minimal exposure to individuals outside of their households.</p> <p>LEA's reported that there were significant staffing and administrative shortages as well as staffing and administrative turnover which led to a breakdown in reporting requirements across districts. It was discovered that 2 districts did not collect or report on Indicator 7 data on for the 2022-2023 year. This affected outcomes as accurate student numbers at the state level were not represented. These districts were given corrective actions plans for this reporting year which outlined the state reporting requirements. Their specific corrective action plans also indicated specific steps that they are required to take in their reporting process as well as mandatory trainings on collecting and entering data. They are required to enter Indicator 7 data as well as have check in with the SEA to ensure data is being entered upon reporting periods.</p> <p>In the outcome area A, category B we are seeing an increase in student improvement; however due to the pandemic, we are not seeing the number increase to nearer of their same aged peers.</p>
B1	<p>While the data submitted for Indicator 7 shows an improvement in the distribution of students within each progress category, Outcome A1, A2, B1 and B2 are areas of slippage reported. LEAs continue to report many of the preschool students have returned to school after the pandemic with significant deficits in their acquisition and use of knowledge and skills due to the lack of human interaction and peer engagement that was availed during the pandemic. Some of this group of students in this reporting period were born during the pandemic and had minimal exposure to individuals outside of their households.</p> <p>LEA's reported that there were significant staffing and administrative shortages as well as staffing and administrative turnover which led to a breakdown in reporting requirements across districts. It was discovered that 2 districts did not collect or report on Indicator 7 data on for the 2022-2023 year. This affected outcomes as accurate student numbers at the state level were not represented. These districts were given corrective actions plans for this reporting year which outlined the state reporting requirements. Their specific corrective action plans also indicated specific steps that they are required to take in their reporting process as well as mandatory trainings on collecting and entering data. They are required to enter Indicator 7 data as well as have check in with the SEA to ensure data is being entered upon reporting periods.</p>



Part	Reasons for slippage, if applicable
B2	<p>While the data submitted for Indicator 7 shows an improvement in the distribution of students within each progress category, Outcome A1, A2, B1 and B2 are areas of slippage reported. LEAs continue to report many of the preschool students have returned to school after the pandemic with significant deficits in their acquisition and use of knowledge and skills due to the lack of human interaction and peer engagement that was availed during the pandemic. Some of this group of students in this reporting period were born during the pandemic and had minimal exposure to individuals outside of their households.</p> <p>LEA's reported that there were significant staffing and administrative shortages as well as staffing and administrative turnover which led to a breakdown in reporting requirements across districts. It was discovered that 2 districts did not collect or report on Indicator 7 data on for the 2022-2023 year. This affected outcomes as accurate student numbers at the state level were not represented. These districts were given corrective actions plans for this reporting year which outlined the state reporting requirements. Their specific corrective action plans also indicated specific steps that they are required to take in their reporting process as well as mandatory trainings on collecting and entering data. They are required to enter Indicator 7 data as well as have check in with the SEA to ensure data is being entered upon reporting periods.</p>

**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 (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. 7 LEA's piloted the Desired Results Developmental Profile (DRDP) as a possible future reporting option for Indicator 7. All identified preschool children must be assessed for POMS (Preschool Outcome Measures) 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)**

Following a successful pilot of the Desired Results Developmental Profile (DRDP) as a POMS reporting tool, the Department has determined that they will be moving forward with this as an official reporting tool.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

## 7 - Required Actions

## Indicator 8: Parent involvement

### Instructions and Measurement

**Monitoring Priority:** FAPE in the LRE

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

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

#### Data Source

State selected data source.

#### Measurement

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

#### Instructions

*Sampling of parents from whom response is requested is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See [General Instructions](#) on page 3 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 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 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 must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

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

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

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

### 8 - Indicator Data

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

#### Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

#### Historical Data

Baseline Year	Baseline Data
2021	59.87%

FFY	2017	2018	2019	2020	2021

Target >=	37.00%	38.00%	38.00%	52.00%	54.00%
Data	41.50%	38.04%	Not Valid and Reliable	51.92%	59.87%

**Targets**

FFY	2022	2023	2024	2025
Target >=	56.00%	58.00%	60.00%	62.00%

**FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
914	1,453	59.87%	56.00%	62.90%	Met target	No Slippage

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 New Hampshire Department of Education (NHED) in partnership with Panorama Education, followed procedures used to combine data from both the school age and preschool surveys. Panorama Education is an independent education technology company that uses research backed survey instruments to collect valid and reliable data.

**The number of parents to whom the surveys were distributed.**

30,917

**Percentage of respondent parents**

4.70%

**Response Rate**

FFY	2021	2022
Response Rate	6.18%	4.70%

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

The metric used compared the New Hampshire Statewide Census for Students with Disabilities to the survey results where target respondents indicated race, disability, and student gender. We chose to increase the metric from 5% to 10% due to the low number of responses.

**Include the State's analyses of 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.**

Parents provided information on the survey about the demographics of their children. According to their responses, students who had parents respond to the survey were representative of the state's population of students receiving special education services (based on the population of students served during the 22-23 school year). New Hampshire's threshold is 10% discrepancy in the proportion of responders compared to the target. The demographic characteristics besides race and disability also included respondent gender and primary disability. The analysis determined that there were no cases that were 10% over or underrepresented with the survey.

The following provides greater detail of the analysis of any areas that were over or underrepresented:

**Gender**

- Male (-7.46%)
- Female (-2.65%)
- 10.12% of survey respondents did not identify a gender

**Primary Disability**

- Autism (2.52%)
- Developmental Delay (-.18%)
- Multiple Disabilities (4.03%)
- Other Health Impairment (-6.33%)
- Specific Learning Disability (-4.72%)
- Speech or Language Impairment (2.14%)

**Race**

- Black or African American (-1.52%)

- Hispanic/Latino (-6.43%)
- Two or more races (2.51%)
- White (3.65%)

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

YES

**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 Bureau formulated an internal leadership team in 2022-2023 school year with the goal to consider the findings and recommendations obtained from a Stakeholder Group formed in 2021-2022 with the assistance of IDC. The internal leadership group worked to create an action plan based on these recommendations.

For the release of the 2024 Indicator 8 survey the Bureau intends on implementing the following activities and practices:

- The 2023 Survey was the final year the indicator 8 parent survey questions were included in the NHED annual 603 Survey.
- The 2024 Indicator 8 Survey will stand alone and not be part of the 603 Survey and will include only the revised 11 survey items recommended by the Indicator 8 Stakeholder Group
- The Indicator 8 Survey results will be provided to each district to review results to make use of the data to increase response rates, reduce any identified bias, and promote response from a broad cross section of parents of children with disabilities.
- The Bureau will support LEAs in analyzing their data.
- The Bureau will provide support to the LEAs to market the survey, including families 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 Bureau worked with Panorama to analyze and determine representativeness for the FFY 2022 data. Our threshold is 10% discrepancy in the proportion of responders compared to the target. The data was analyzed, and the results are included in above pertaining to the State's analysis. The analysis determined that there were no cases that were 10% over or underrepresented. Both Hispanic/Latino and Other Health Impairment were underrepresented by more than 5%. In analyzing parent satisfaction in Hispanic versus non-Hispanic there was a less than 10% difference, with Hispanic response having a higher satisfaction. For Other Health Impairment there was less than .10% difference. Because response rates were representative and respondents did not vary greatly in their levels of parent satisfaction, nonresponse bias was not identified as an issue in the data. The primary step taken this year to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities was to establish the internal leadership team with the goal to consider the findings and recommendations from the Stakeholder Group and to create an action plan based on these recommendations Please see the action steps in the previous section.

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
If yes, provide a copy of the survey.	

**Provide additional information about this indicator (optional)**

### 8 - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must describe strategies which are expected to increase the response rate for those groups that are underrepresented and analyze the response rate to identify potential nonresponse bias and steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

#### Response to actions required in FFY 2021 SPP/APR

The Bureau formulated an internal leadership team in 2022-2023 school year with the goal to consider the findings and recommendations obtained from a Stakeholder Group formed in 2021-2022 with the assistance of IDC. The internal leadership group worked to create an action plan based on these recommendations.

In order to include the response rate for those groups that underrepresented ,f or the release of the 2024 Indicator 8 survey the Bureau intends on implementing the following activities and practices:

- The 2024 Indicator 8 Survey will stand alone and not be part of the 603 Survey and will include only the revised 11 survey items recommended by the Indicator 8 Stakeholder Group
- The Indicator 8 Survey results will be provided to each district to review results to make use of the data to increase response rates, reduce any identified bias, and promote response from a broad cross section of parents of children with disabilities.
- The Bureau will support LEAs in analyzing their data.
- The Bureau will provide support to the LEAs to market the survey, including families that are underrepresented.

### 8 - OSEP Response

### 8 - Required Actions



## 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. 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 2022 reporting period (i.e., after June 30, 2023).

#### 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. Provide the actual numbers used in the calculation.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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
2021	0.00%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

### Targets

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

### FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
0	0	65	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

Definition of "Disproportionate Representation" and Methodology

A Risk Ratio over 3.0 with the minimum cell size in the target group, and the comparison group (all other racial categories in specific area) and no minimum N size require.

Definition of Disproportionate Representation

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

Methodology

All racial/ethnic groups were included in the analysis, as required by OSEP. A risk ratio was used in analyzing the district data. In order to calculate the risk ratio, a target group had to meet the minimum cell size and the comparison group had to meet the minimum cell size in the district. The cell size (>9) 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. Stakeholder input was used to determine the use of a risk ratio that uses a minimum cell size only and not a minimum N size. Using the criteria established above, the NHED determined that, out of 174 school districts, 65 school districts met the cell size for both the target and comparison groups for data analysis. Of those 65 school districts, 0 were identified as meeting the risk ratio of greater than 3.0 for disproportionate representation.

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

Through the process used for this indicator (described above), if any districts identified in had been determined to have disproportionate representation in the identification of students with disabilities, the NHED would have utilized the following monitoring process to determine whether the disproportionate representation (see above definition) was the result of inappropriate identification. The NHED 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 NHED 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)

Correction of Findings of Noncompliance Identified in FFY 2021

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 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**9 - Prior FFY Required Actions**

None

**9 - OSEP Response**

**9 - Required Actions**



## Indicator 10: Disproportionate Representation in Specific Disability Categories

### Instructions and Measurement

**Monitoring Priority:** Disproportionality

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

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

#### Data Source

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

#### 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 section 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), (e.g., using monitoring data; reviewing policies, practices and procedures). 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 2022 reporting period (i.e., after June 30, 2023).

#### 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. Provide the actual numbers used in the calculation.

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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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
2021	0.00%

FFY	2017	2018	2019	2020	2021
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

#### Targets

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

**FFY 2022 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 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1	0	29	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

Definition of "Disproportionate Representation" and Methodology.

Definition of Disproportionate Representation

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

Methodology

All racial/ethnic groups were included in the analysis, as required by OSEP. A risk ratio was used in analyzing the district data. In order to calculate the risk ratio, a target group had to meet the minimum cell size and the comparison group had to meet the minimum cell size in the district. The cell size (>9) 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. Stakeholder input was used to determine the use of a risk ratio that uses a minimum cell size only and not a minimum N size. Using the criteria established above, the NHED determined that, out of 174 school districts, 29 school districts met the cell size for both the target and comparison groups for data analysis. Of those 29 school districts, 1 was identified as meeting the data threshold for disproportionate representation.

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

Through the process used for this indicator (described above), the district identified had been determined to have disproportionate representation in the identification of students with disabilities, in the specific disability category of speech-language impairment. The NHED utilized the following monitoring process to determine whether the disproportionate representation (see above definition) was the result of inappropriate identification. The NHED examined 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 the district that met the criteria in Step One, the State 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 NHED 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. After this review it was determined that the disproportionate representation was not the result of inappropriate identification.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2021

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 2021

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**10 - Prior FFY Required Actions**

In the State's FFY 2022 SPP/APR, the State must describe how it made the annual determination as to whether, in any district where the State identified disproportionate representation of racial and ethnic groups in specific disability categories, the disproportionate representation was the result of inappropriate identification (i.e., whether or not any identified districts were not in compliance with the child find, evaluation, and eligibility requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311).

**Response to actions required in FFY 2021 SPP/APR**

In the State's FFY 2022 SPP/APR, the State made its annual determination as to whether, in any district where the State identified disproportionate representation of racial and ethnic groups in specific disability categories, the disproportionate representation was the result of inappropriate identification (i.e., whether or not any identified districts were not in compliance with the child find, evaluation, and eligibility requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311).

**10 - OSEP Response**

**10 - Required Actions**

## Indicator 11: Child Find

### Instructions and Measurement

**Monitoring Priority:** Effective General Supervision Part B / Child Find

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

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

#### Data Source

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

#### Measurement

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

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

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

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

#### Instructions

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

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

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

Targets must be 100%.

Provide detailed information about the timely correction of child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	97.30%	98.27%	99.16%	98.03%	94.91%

### Targets

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

### FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
1,626	1,584	94.91%	100%	97.42%	Did not meet target	No Slippage

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

42

**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 1626 children for whom parental consent for initial evaluation was received, 42 children did not have evaluations completed within the 60-day timeframe within which the evaluation must be completed. The 42 children were from a total of 26 districts.

In analyzing the data, the majority of delays occurred in 1-15 days past the timeline.

1 - 15 Days = 25

16 - 30 Days = 7

31 - 45 Days = 1

46 - 60 Days = 2

61+ Days = 7

The reasons for delay the majority were attributed to staffing shortage and lack of knowledge of the evaluation process with new staff.

**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 22 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, 2022, and November 15, 2022.

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 22 APR, after completion of State monitoring to review exceptions, evidence of compliance with allowable exceptions applied to 22 students.

**Provide additional information about this indicator (optional)**

As a result of COVID, Districts have reported consistent staff shortages and scheduling issues and, as new staff are brought on, issues with lack of understanding of the evaluation process including timelines, as well as data entry errors.

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.

**Correction of Findings of Noncompliance Identified in FFY 2021**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
79	79	0	0

**FFY 2021 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 21 for this indicator has corrected the identified noncompliance, consistent with OSEP QA 2301 which follows: IDEA Part B requires that children with disabilities, ages three through 21, receive a free appropriate public education (FAPE). IDEA Part C requires States to make available early intervention services to infants and toddlers with disabilities and their families. This guidance applies to States (the State educational agency (SEA) under IDEA Part B Sections 611 and 619 and the State lead agency (LA) under IDEA Part C) that are responsible for implementing a general supervision system. State general supervision systems must include local educational

agencies (LEAs) under Part B and early intervention service (EIS) programs and providers under Part C. These findings reflect all noncompliance identified with this indicator through monitoring and data collections. Written findings were made consistent with OSEP QA 2301 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**

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 NHED verified that, for each of these individual cases, the district had completed the required action including ensuring evaluations were completed, unless the child was no longer in the jurisdiction of the LEA, prior to the identification of findings, as reported in the FFY 21 APR and were in 100% compliance. Subsequently the bureau reviewed these districts through our monthly review of all districts for compliance with Indicator 11 and determined that these districts were maintaining 100% compliance.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2021 SPP/APR**

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

**11 - OSEP Response**

The State did not demonstrate that each LEA corrected the findings of noncompliance identified in FFY 2021 because it did not report that it verified correction of those findings, consistent with OSEP QA 23-01. Specifically, the State did not report that it verified that each LEA with noncompliance identified in FFY 2021 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.

**11 - Required Actions**

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. In addition, the State must demonstrate, in the FFY 2023 SPP/APR, that the 79 uncorrected findings of noncompliance identified in FFY 2021 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2022 and each LEA with noncompliance identified in FFY 2021: (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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

## 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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	97.88%	98.35%	90.37%	95.39%	98.62%

#### Targets

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

#### FFY 2022 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	283
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	30

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	206
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.	12
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	9
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 2021 Data	FFY 2022 Target	FFY 2022 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.	206	232	98.62%	100%	88.79%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

Districts reported late referrals to Part C, difficulty scheduling transition meetings, often for children who are new to Part C close to the time of transition, issues with staff availability, personnel shortages, and turnover, and not holding meetings early enough to allow for rescheduling, when needed.

**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**

26

**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 26 transitions occurring across 19 districts. Two of the impacted children were found eligible and had IEPs implemented 1 day after their third birthday. Two children, two days after and four children three days after their third birthday. Four children impacted had their eligibility determined, but their IEP's were not signed until the fifth, seventh, eighth, and eleventh day after their third birthday. 5 students were found eligible but did not have their IEP's created until between 16-60 days. Nine students we found eligible but then did not have their IEPs created and implemented until sixty plus days after their third birthday. Reasons for delay included COVID illness of multiple key school personnel, systemic issues related to communication during the transition process, and confusion between early transition and initial evaluation timelines (Indicators 12 and 11 respectively).

Range of days beyond the third birthday: 0-15 days: 12, 16-60: 5 61+ days: 9

**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 eighth 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 NHED 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 whose third birthday occurred between July 1 – October 31, 2022. The data were collected from all geographic areas and accurately represent data for the full reporting period.

In order to ensure data quality, the NHED verified available data points in NHSEIS. In addition, NHED staff conducted virtual reviews of file documentation, policies and procedures as needed. This is the same process that was used to report in the FFY 2021 APR.

**Provide additional information about this indicator (optional)**

**Correction of Findings of Noncompliance Identified in FFY 2021**

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

**FFY 2021 Findings of Noncompliance Verified as Corrected**

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

The NHED has verified that each LEA with noncompliance identified in FFY 2021 for this indicator has corrected the identified noncompliance, consistent with OSEP QA 23-01, as follows:



The NHED verified that each district identified in FFY 2021 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 NHED, Bureau of Student Supports through the NH Parent Information Center (PIC) as well as the NHED 619 Coordinator 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 NHED verified that each of the districts identified in FFY 2021 with noncompliance for Indicator 12 was correctly implementing the regulatory requirements as soon as possible. All findings were corrected within one year from notification. Through an intensive support process involving Race2K, the 619 Coordinator, and the Administrator for Training and Monitoring at the Bureau of Special Education Supports, the remaining district completed its policy and systemic corrections 12 months following notification.

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

The NHED has verified that the identified districts had completed the special education process for each individual case of noncompliance. 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.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**12 - Prior FFY Required Actions**

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

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

**Response to actions required in FFY 2021 SPP/APR**

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

**12 - OSEP Response**

**12 - Required Actions**

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

## 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 child-specific and regulatory/systemic 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) 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 2022 SPP/APR, the data for FFY 2021), 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
2022	54.20%

FFY	2017	2018	2019	2020	2021
Target	100%	100%	100%	100%	100%
Data	71.88%	33.33%	90.22%	64.29%	79.07%

### Targets

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

### FFY 2022 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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
342	631	79.07%	100%	54.20%	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.

For the SPP beginning in FFY 2022, the NHED instituted a new monitoring process providing the opportunity to monitor every District in NH every year for Indicator 13 Compliance.

In New Hampshire there are 81 Public High Schools, Public Academies and JMA (Joint Maintenance Agreement) and 174 LEAs. Indicator 13 was previously monitored by high school using a six year rotation model. During the last 6 year rotation the Bureau monitored 641 IEPs, averaging 107 files or 1.5% each year, with a compliance rate of 56%.

It is the Bureau's belief that since student files (and findings of noncompliance) are the responsibility of the LEA, monitoring and reporting Indicator 13 data by district is a sounder practice, yielding better data and, in time, improved compliance. Consequently, instead of cyclical monitoring by high school, the Bureau now monitors a predetermined number of eligible student files (students 16 years old or older) in every LEA every year.

This new process allows the Bureau to review approximately 11% of files, compared to the 1.5% reviewed when conducting cyclical monitoring. Compliance for FFY 2022 monitoring was 54.20% which is now the state's baseline data. Once compliance with Indicator 13 improves, LEAs will have greater opportunity to maintain or cultivate better transition planning.

### The New NHED Indicator 13 Compliance Monitoring Process:

#### Stakeholder Input

In developing the new process, the Bureau announced scheduled stakeholder meetings to all special education directors, SAC, and PIC on 9/23/21. To maximize stakeholder input two virtual meetings were held, one on 10/12/21 and the other on 10/14/21. Each meeting began with the Bureau sharing the proposed changes for monitoring and data collection, followed by discussion and opportunities for stakeholder questions and feedback. An additional stakeholder meeting was held 12/13/21 for the Compliance Committee members of NHASEA (New Hampshire Association of Special Education Administrators). The Bureau utilized stakeholder feedback to inform and finalize the new process. The final agreed upon process was shared with LEA directors during the 1/20/22 Directors' call.

Nine months prior to the initial monitoring, three opportunities for training were made available to the special education directors. The same training was presented weekly to the field from mid-February 2022 through October 2022 so all district staff could be trained on the changes and requirements for compliance. These trainings also provided opportunities for participants to ask clarifying questions.

#### The Process

The NHED provides the student SASID list to Special Education administrators four weeks prior to the initial monitoring review.

For desk audits conducted via NHSEIS, required evidence, not reviewable in NHSEIS, needs to be paperclipped/attached to the most recent NHSEIS IEP. Such items include transition assessments, evidence that the student was invited to the IEP meeting, and evidence of prior parent or adult student consent to invite an outside agency to the IEP meeting if listed as responsible for a transition service. The four week period between Districts receiving their SASID list and the Bureau conducting the initial monitoring provided Districts time to verify student enrollment and attach required evidence.

The initial monitoring review was conducted between November and December. The NHED monitoring team, consisting of three NHED team members (see I-13 Guidance Document, <https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/sonh/indicator-13-guidance-document.pdf>), reviewed the secondary transition plans contained in the current IEP for each SASID on an LEA's list using The New Hampshire Indicator 13 Compliance Checklist (the Checklist). For Districts not using NHSEIS, a virtual meeting was scheduled during the first two weeks of November where the current IEP and required evidence for each SASID on the LEAs list was reviewed via screen sharing.

The new process included a revision to the Checklist which now consists of seven compliance components instead of eight. Questions 2 and 3 from the previous Checklist were combined and the required data is captured using Checklist question 2. All other items on the Checklist remain the same.

The NHED used the New Hampshire Special Education Information System (NHSEIS) to generate student level information for file selection. Each LEA was provided with a predetermined number of student files, (referred to as SASIDs – State Assigned Student Identifier) representative of gender, age, ethnicity, disability, case manager, high school(s), and placements (to include charter schools, out-of-district and out-of-state). The number of SASIDs monitored for each LEA was based on a percentage of the total number of eligible students enrolled at the time the SASID lists was generated. Two - five alternate SASIDs were provided (when possible) for unexpected changes to a selected student's status, such as transferring to another school district or exiting special education. Alternate SASIDs are used in the order listed.

The breakdown for how the NHED determined the number of files reviewed for each District during the 2022-2023 school year is as follows:

District enrollment: 1-9 – 1 file

10-19 – 2 files

20-39 – 4 files

40-59 – 6 files

60-79 – 8 files

80-99 – 10 files

100-149 – 12 files

150-199 – 17 files

200-299 – 22 files

300-399 – 32 files

400-499 – 40 files

500-599+ – 50 files

The NHED reviewers used the Checklist to monitor files during the desk audit or virtual meeting and documented compliance for each SASID using the Indicator 13 Compliance Matrix (Matrix). The Matrix documented, by SASID, compliance for each Checklist item and explained any noncompliance. To meet compliance requirements, all Checklist items must have been verified as correct (yes) or in some cases, N/A (see I-13 Guidance Document <https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/sonh/indicator-13-guidance-document.pdf>).

The NHED entered data from the Matrixes into the Indicator 13 Compliance database to include the following information: District Name, School Name, Student ID #, NHED 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 Closure Letter (noting 100% compliance). The NHED calculated the 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). LEAs were notified in writing of the findings of compliance or noncompliance, as soon as possible but no later than 60 days from the date of the initial desk audit or virtual meeting. This correspondence included a copy of each LEA's completed Matrix.

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)**

Although NH only monitors a percent of youth with IEPs aged 16 and above each year, NH increased the number of files monitored for Indicator 13 compliance by approximately 10% for FFY 2022 since the monitoring process moved from cyclical monitoring of high schools to monitoring student files in every District every year. This change in process is an attempt to improve the state's compliance as well as student outcomes. Due to these changes in methodology, the baseline for Indicator 13 is now 54.02%.

**Correction of Findings of Noncompliance Identified in FFY 2021**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
8	8	0	0

**FFY 2021 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, (now OSEP QA 23-01), the NHED groups individual instances of noncompliance for this indicator by District as one finding. Since there were 8 districts in noncompliance for FFY 2021, the NHED issued 8 written findings, and within the 8 written findings, there were 18 student-level records/cases. As a means to provide technical assistance to each District with findings on noncompliance, each written notification of noncompliance included an Indicator 13 Compliance Matrix, identifying SASID and detailing why an Indicator 13 Checklist item was noncompliant. Additionally, Districts were encouraged to request either training or a coaching session. The NHED conducted a verification visit in each of the Districts with noncompliance at a mutually agreed upon date. At the verification visit, the NHED 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 NHED verified that 8 of the 8 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**

Each of the 8 Districts with a finding of noncompliance were required to correct the 18 instances of child-specific noncompliance by amending the IEP within 60 days of the written finding of noncompliance. Prior to the expiration of the 60 day time frame for correction, 100% of individual child specific cases of noncompliance were verified as corrected. These corrections were verified by the NHED by either an on-site monitoring visit or desk audit followed by a Zoom meeting.

**Correction of Findings of Noncompliance Identified Prior to FFY 2021**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2021 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 2021, the State must report on the status of correction of noncompliance identified in FFY 2021 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2022 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2021 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2022 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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

**Response to actions required in FFY 2021 SPP/APR**

**13 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.

### **13 - Required Actions**

Because the State reported less than 100% compliance for FFY 2022, the State must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2023 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2022 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 QA 23-01. In the FFY 2023 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 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2022.

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

#### 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 3 for additional instructions on sampling.)*

Collect data by September 2023 on students who left school during 2021-2022, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2021-2022 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).

#### 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 2022 SPP/APR, compare the FFY 2022 response rate to the FFY 2021 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 analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in their analysis. In addition, the State’s analysis must include at least one of the following demographics: disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

If the analysis shows that the response data are not representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, describe the strategies that the State will use to ensure that in the future the response data are representative of those demographics. In identifying such strategies, the State should consider factors such as how the State collected the data.

## 14 - Indicator Data

### Historical Data

Measure	Baseline	FFY	2017	2018	2019	2020	2021
A	2020	Target >=	39.56%	40.40%	40.40%	45.45%	45.45%
A	45.45%	Data	36.36%	48.18%	41.80%	45.45%	35.59%
B	2020	Target >=	63.11%	64.00%	64.00%	80.30%	80.30%
B	80.30%	Data	66.23%	79.09%	68.85%	80.30%	71.19%
C	2020	Target >=	77.78%	78.20%	78.20%	93.94%	95.00%
C	93.94%	Data	75.97%	84.55%	83.61%	93.94%	84.75%

### FFY 2021 Targets

FFY	2022	2023	2024	2025
Target A >=	50.50%	50.50%	50.50%	50.50%
Target B >=	85.30%	85.30%	90.30%	90.30%
Target C >=	96.00%	97.00%	98.00%	98.00%

### Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

**FFY 2022 SPP/APR Data**

Total number of targeted youth in the sample or census	1,678
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	64
Response Rate	3.81%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	15
2. Number of respondent youth who competitively employed within one year of leaving high school	30
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)	5
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).	2

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 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
A. Enrolled in higher education (1)	15	64	35.59%	50.50%	23.44%	Did not meet target	Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	45	64	71.19%	85.30%	70.31%	Did not meet target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	52	64	84.75%	96.00%	81.25%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
A	Slippage ties directly back to the low response rate and further supports that the small sample size is not an appropriate representation measure. While 15 (22 total) more entities (districts, charter schools, adult ed) had responses to the survey and 105 more eligible youth in the census there were only 5 more responses overall than in FFY21 with 2 districts responsible for 25% of the responses. The uneven distribution of responses and lack of consistency in responses per district is the reason for the decrease in the FFY22 results.
C	Slippage ties directly back to the low response rate and further supports that the small sample size is not an appropriate representation measure. While 15 (22 total) more entities (districts, charter schools, adult ed) had responses to the survey and 105 more eligible youth in the census there were only 5 more responses overall than in FFY21 with 2 districts responsible for 25% of the responses. The uneven distribution of responses and lack of consistency in responses per district is the reason for the decrease in the FFY22 results.

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	2021	2022
Response Rate	3.75%	3.81%

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

Due to the low number of responses NH uses +/- 10% discrepancy in the proportion of responders compared to target group.

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

Due to a small number of completed surveys, there was limited data to determine representation of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. The Bureau completed a review of the limited responses based on demographic characteristics that included gender, primary disability, and race.

**Gender**

Female -7%  
Male +7%

**Race**

American Indian or Alaskan Native +1%  
Asian 0%  
Black or African American -3%  
Hispanic/Latino -5%  
Two or more races +8%  
White -2%

**Primary Disability**

Autism +10%  
Emotional Disturbance -6%  
Hearing Impairments +1%  
Intellectual Disability -5%  
Multiple Disabilities +3%  
Other Health Impairments -17%  
Specific Learning Disability +11%  
Speech-Language Impairments -1%  
Visual Impairments +2%

The threshold exceeded 10% in the following demographic areas

Autism +10%  
Other Health Impairments -17%  
Specific Learning Disability +11%

**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 Bureau will communicate directly with districts prior to the survey opening as well as periodically throughout the survey window regarding the demographics of the eligible students as well as the demographics of the respondents.

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

In the next survey year, the Bureau will implement more strategies to increase the response rate, with a particular focus on the response rate of those groups that are underrepresented. The Bureau will work on having more correspondence with the districts ahead of the window period opening and providing IDEA grant funds to pay stipends to staff enabling them to do the direct outreach to students. The Bureau will also move to a new survey system in the next year, which will allow for the use of push notifications via text message if the district has the student’s cell phone number on file. Lastly, the indicator lead will implement an ongoing communication model during the time leading up to the survey window, and throughout the survey window. The ongoing communication model will require communication between the bureau and the districts leading up to the survey window to help prepare for the survey period, and during the survey window, continually reminding the districts that they should be doing outreach to generate responses.

**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.**

Upon review of the demographics of the youth who responded to the survey, in combination with the examination of outcomes results across disability categories, the state was able to determine that

1. Students with an AUT identification were overrepresented on the survey and their outcomes results were more than 10% below the overall survey

- results. Non-AUT students had outcome results that were more than 10% higher than the overall survey results for 14b and 14c.
2. Students with OHI were underrepresented on the survey however their results were within 10% +/- of the overall survey results and non OHI students were also within 10% +/- overall survey as well.
  3. Students with SLD were overrepresented on the survey and their survey results for 14b and c were more than 10% higher than the overall survey results. Non SLD students were more than 10% lower than the overall survey results for 14b and 14c.

The lack of representativeness and variation in survey results across disability categories, combined with the low overall response rate, indicate the potential for nonresponse bias in the FFY2022 data.

The state will look to target non SLD students to increase the response rate, and work with districts to support students with an AUT identification to improve post-secondary outcomes.

Additionally, as we work towards increasing the response rate and move to collecting data throughout the school year, the Bureau will be able to take steps to reduce any identified bias and promote response from a broad cross section of eligible student respondents during the survey window. The Bureau is currently considering data base systems that will enable us to not only administer the survey through the system, but also provide us access to a multitude of reports that will allow us to track trends and complete ongoing in-depth data analysis.

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

**Provide additional information about this indicator (optional)**

#### 14 - Prior FFY Required Actions

In the FFY 2022 SPP/APR, the State must report whether the FFY 2022 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.

In the FFY 2022 SPP/APR, the State must analyze the response rate to identify potential nonresponse bias and identify steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

##### Response to actions required in FFY 2021 SPP/APR

The State included an analysis of the representativeness of the demographics of the youth who are no longer in secondary school and had IEPs in effect at the time they left school, including an analysis of the response rate to identify potential nonresponse bias and identified steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

#### 14 - OSEP Response

##### 14 - Required Actions

In the FFY 2023 SPP/APR, the State must report whether the FFY 2023 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 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1 Number of resolution sessions	1
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/15/2023	3.1(a) Number resolution sessions resolved through settlement agreements	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

**Targets: Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

**Historical Data**

Baseline Year	Baseline Data
2010	71.00%

FFY	2017	2018	2019	2020	2021
Target >=	63.00% - 73.00%	63.00% - 73.00%	63.00%-73.00%		
Data	100.00%	42.86%	75.00%	100.00%	75.00%

**Targets**

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

**FFY 2022 SPP/APR Data**

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2021 Data	FFY 2022 Target (low)	FFY 2022 Target (high)	FFY 2022 Data	Status	Slippage
1	1	75.00%			100.00%	N/A	N/A

**Provide additional information about this indicator (optional)**

Historically the number of resolutions sessions has been less than 10. 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 reported fewer than ten resolution sessions held in FFY 2022. 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 ED Facts Metadata and Process System (EMAPS)).

#### Measurement

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

#### Instructions

*Sampling is not allowed.*

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

States are not required to establish baseline or targets if the number of mediations is less than 10. In a reporting period when the number of 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 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1 Mediations held	25
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.a.i Mediations agreements related to due process complaints	11
SY 2022-23 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/15/2023	2.1.b.i Mediations agreements not related to due process complaints	2

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 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

### Historical Data

Baseline Year	Baseline Data
2020	67.86%

FFY	2017	2018	2019	2020	2021
Target >=	65.00% - 75.00%	70.00% - 80.00%	70.00%-80.00%	70.00%-80.00%	70.00%-80.00%
Data	72.73%	74.07%	82.50%	67.86%	54.55%

**Targets**

FFY	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%

**FFY 2022 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 2021 Data	FFY 2022 Target (low)	FFY 2022 Target (high)	FFY 2022 Data	Status	Slippage
11	2	25	54.55%	70.00%	80.00%	52.00%	Did not meet target	Slippage

**Provide reasons for slippage, if applicable**

In terms of mediation as part of due process appeal, 11 were successfully mediated this fiscal year, with 13 withdrawals and 4 (independent of process) settlements. The previous fiscal year saw 12 successful mediations with 10 withdrawals of appeal and 11 settlements. The “slippage” from the previous fiscal year to this fiscal year is the difference of 1 successful mediation. With there being an infinite number of exigent circumstances that may be the cause of this 1 difference, it is difficult for NHED to determine the exact cause of the “slippage”. However, NHED notes the increase in the number of withdrawals and decrease in number of independent settlements, which suggests there is a factor impacting parties’ willingness to reach agreements with or without the support of a NHED mediator.

**Provide additional information about this indicator (optional)**

NHED has drafted and plans to finalize a Parent Guide to Administrative Process and FAQs that will provide more in-depth information about both pre-process suggestions for parent/school district engagement as well as alternative dispute resolution processes. The goal remains to assist parents to engage with local resolution processes and the Department’s alternative dispute resolution processes more fully, thereby minimizing parental frustration with local district engagement.

In developing the Parent Guide to the Administrative Process and FAQ’s, NHED is seeking input from stakeholders which includes but is not limited to two parent advocates and the Disability Rights Center.

**16 - Prior FFY Required Actions**

None

**16 - OSEP Response**

**16 - Required Actions**

## Indicator 17: State Systemic Improvement Plan

### Instructions and Measurement

**Monitoring Priority:** General Supervision

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

#### Measurement

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

#### Instructions

**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) (SiMR) 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 2022 through February 2027, 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) 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 SPPs/APRs, 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., February 1, 2023). 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 2022 APR, report on anticipated outcomes to be obtained during FFY 2023, i.e., July 1, 2023-June 30, 2024).

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 (e.g., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (e.g., 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 2022 APR, report on activities it intends to implement in FFY 2023, i.e., July 1, 2023-June 30, 2024) 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)?

To increase the reading proficiency of all 4th grade students with disabilities in participating pilot schools, as measured by the New Hampshire Statewide Assessment System (NH SAS) by at least 10 percentage points by FFY 2026. Indicator 3B data are used; students with disabilities who are alternately assessed are excluded from the SiMR.

#### 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)

YES

#### Provide a description of the subset of the population from the indicator.

The state is using a cohort model. There are currently four schools participating in the pilot (Cohort 1). To measure progress toward the SiMR, we will compare the English Language Arts (ELA) performance of students enrolled currently in first grade—who will be in fourth grade in FFY26—to the baseline (current Cohort 1 4th grade students with disabilities' performance). Within Cohort 1's current first grade population, there are students with already identified disabilities and others who may be identified for special education under IDEA between now and FFY26. Additionally, some students may be exited from special education by the time they are in fourth grade. In FFY26, the performance of fourth grade students with disabilities within the Cohort 1 sites (excluding students who are alternately assessed) will be compared to the FFY22 baseline. The four schools participating in the pilot are located across rural and urban areas in the state and their demographic profile reflects that of the state (i.e., similar racial/ethnic makeup, similar percentages of students with disabilities). The current ELA performance of fourth grade students with disabilities within Cohort 1 (7.02% proficient) is less than the statewide proficiency rate (13.54%) for fourth grade students with disabilities. While the SiMR reflects fourth grade student data, all K-4 teachers (general and special education) within these sites will receive ongoing training/coaching for two years. Active recruitment for the second cohort will begin in fall 2024, with an application released in Spring 2025.

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

YES

#### Please provide a description of the changes and updates to the theory of action.

The theory of action (TOA) presents NH's change efforts through their implementation of the SSIP across four broad strands. Within these strands, there are broad improvement strategies at the SEA and LEA levels that the state theorizes will have an impact at the teacher- and student-level, resulting in the SiMR. In the TOA submitted last year, the strands were named (1) Effective Collaboration, (2) Implement Instructional Practices & Interventions, (3) Family Partnerships, and (4) Accountability. In the revised TOA, these strands were updated to better align with the revised logic model and evaluation plan. To better communicate the TOA to a broader stakeholder group, minor revisions were made, which were cosmetic in nature. For example, the strands are now named: (1) Collaboration for Capacity-Building, (2) Evidence-Based Instruction & Intervention, (3) Family Partnerships, and (4) Data-Based Decision-Making. In the revised TOA, language was clarified to ensure consistency with the revised logic model and evaluation plan. Additionally, the TOA was redesigned in a format that would be easier to understand by a variety of stakeholders.

#### Please provide a link to the current theory of action.

<https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/sonh/nh-part-b-ssip-indicator-17-theory-of-action.pdf>

### Progress toward the SiMR

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

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

NO

### Historical Data

Baseline Year	Baseline Data
2022	7.02%

### Targets



FFY	Current Relationship	2022	2023	2024	2025
Target	Data must be greater than or equal to the target	7.02%	7.02%	7.52%	8.52%

**FFY 2022 SPP/APR Data**

<Enter Numerator Description Here>	<Enter Denominator Description Here>	FFY 2021 Data	FFY 2022 Target	FFY 2022 Data	Status	Slippage
4	57	71.43%	7.02%	7.02%	N/A	N/A

**Provide the data source for the FFY 2022 data.**

The SiMR reflects NH SAS English Language Arts assessment, which examines the ELA proficiency rate for children with IEPs against grade-level academic standards. The SiMR is through FFY 2026, while targets are set through FFY 2025.

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

Except in cases where students are alternately assessed, or where parents opt out of having their children assessed on the NH SAS—which was not the case in pilot sites, all students in the state participate in the NH SAS annually in third through eighth grades in English Language Arts. Data are collected from the NH SAS. To analyze data for the SiMR, we calculated the proficiency rate in the pilot schools by dividing the number of students with IEPs at or above proficient by the total number of students with IEPs who received a valid score and for whom a proficiency level was assigned for the regular assessment.

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

NO

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

NO

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

NO

**Section B: Implementation, Analysis and Evaluation**

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

<https://www.education.nh.gov/sites/g/files/ehbemt326/files/inline-documents/sonh/nh-part-b-ssip-indicator-17-evaluation-plan.pdf>

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

YES

**If yes, provide a description of the changes and updates to the evaluation plan.**

To support the evaluation of the SSIP, we hired an external evaluator (PLACE, LLC). PLACE was brought onto the team in July 2023 and worked initially on revising the evaluation plan, logic model, and theory of action. The primary goal of the revisions across these three elements was to ensure alignment and consistency. More specifically, the evaluation plan was revised to include evaluation questions (see below) and then to align the performance indicators to the evaluation questions, as well as to articulate—in the logic model—the differences between “outputs” and “outcomes.”

**Collaboration and Capacity Building**

**1. To what extent does the SEA effectively collaborate to support LEAs in delivering effective early language and literacy (EL&L) instruction?**

Performance Indicators: Increased literacy initiative alignment; increased cross-department and interagency partner collaboration, including ongoing PTI engagement; increased trainings, coaching, networking opportunities, and support to implementing schools; and increased use of data-driven EL&L instruction statewide.

**2. To what extent do participating LEAs deliver effective EL&L instruction?**

Performance Indicators: Increased literacy initiative alignment, increased readiness across implementation phases, and increased internal capacity to lead EL&L efforts.

**Evidence-Based Instruction and Intervention**

**1. To what extent do educators in participating LEAs increase their knowledge of data-driven EL&L instruction?**

Performance Indicator: Increased knowledge and understanding of data-driven EL&L instruction.

**2. To what extent do educators in participating LEAs increase implementation fidelity of data-driven EL&L instruction?**

Performance Indicator: Increased use of evidence-based and EL&L practices.

**Family Partnerships**

**1. To what extent does family member confidence in supporting their child’s literacy development increase within participating LEAs?**

Performance Indicator: Increased family member confidence in their ability to understand and support their child’s EL&L skill development and progress.

**Progress Toward SiMR**

**1. To what extent do students with disabilities in participating sites make progress on EL&L skills?**

Performance Indicator: Increased student-level progress toward end-of-year benchmarks.

**2. To what extent do students with disabilities increase their reading proficiency within participating sites?**

Performance indicator: The SiMR, which is measured by an increase in proficiency on the fourth grade ELA state assessment (NHSAS) by FFY 2026. Lastly, the revised evaluation plan updated the data sources and data collection frequency and now includes the parties responsible for data collection.

**If yes, describe a rationale or justification for the changes to the SSIP evaluation plan.**

Like the changes to the TOA and Logic Model, the changes to the SSIP evaluation plan were primarily cosmetic; the previous draft was completed prior to bringing on the external evaluator. The revised plan updated content to ensure alignment with the revised TOA and Logic Model. Additionally, PLACE supported the state with identifying clear evaluation questions and with identifying data sources to better evaluate those questions. Further, the revised evaluation plan and Logic Model more clearly differentiates outputs and outcomes across implementation phases (exploration, installation, initial, and full implementation). Outputs refer to the results of a specific activity, such as the number of people trained or development/completion of guidance/processes/tools. Outcomes refer to the overall impact or value created by those outputs (i.e., change in educators' practice as a result of training or guidance). During the exploration and installation phases, outputs are expected, while short- and long-term outcomes of SSIP implementation are expected during the "initial implementation" and "full implementation" phases (see Logic Model). The SiMR is also considered a long-term outcome of the project.

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

SEA Infrastructural Improvement Strategies Implemented and Outputs Met. There are two primary SEA-level teams supporting SSIP implementation and evaluation. (1) SSIP Core Team. Purpose: To promote cross-departmental collaboration around effective, data-driven literacy instruction to better support the state with achieving its SiMR. Core Team Membership: The core team includes members from across the agency (Title Programs, Data Team, Monitoring, Accessibility, Assistive Technology, School Improvement); the state ELA Consultant; administrators from all offices; the state-level literacy coach, the external evaluator; and the Parent Information Center (PIC). During this reporting period, the SSIP Core Team met 14 times to review historical NH SAS data at the school level for each of the participating sites to help understand historical performance of students with disabilities in ELA. (2) SSIP Leadership Team. Purpose: The leadership team serves in an advisory capacity to SSIP implementation and evaluation activities. Additionally, the team is used to gain stakeholder feedback/input from different perspectives. Leadership Team Membership: NHED staff overseeing the SSIP work, the state-level literacy coach, NHED 619 Coordinator, ELA Consultant, School Improvement Consultant, External Evaluator, PIC representative (also on the state advisory committee), New Hampshire Association of Special Education Administrators representative, International Dyslexia Association representative, Council for Thriving Children representative, NH Council for Developmental Disabilities representative, and LEA/SSIP literacy coaches from each pilot site. The SSIP Leadership Team provided feedback on the draft application, TOA, SiMR, and literacy screener in March 2023; the NH Coaching Framework in May 2023; and the pilot site application and selection process in September 2023.

Generally, the management/oversight of the SSIP shifted to the SSIP Coordinator. Four site-level partners were selected after sending a statewide application. Additionally, we hired a State-level Literacy Coach whose responsibilities include providing systems-level coaching (framework developed with PIC) and ongoing technical assistance to sites. The goal of the systems-level coaching is to build the site-level coaching capacity to implement effective literacy instruction and intervention through implementation science. In addition, the SSIP Core team worked with the National Center for Systemic Improvement (NCSI) to develop a Statewide Coaching Framework that embeds effective coaching strategies (including fidelity protocols). The State-level Literacy Coach received training in this model to better provide support to the site-level coaches as they coach practitioners in using learned strategies from their LETRS training. We also initiated the development of a literacy training repository/suite to be housed in the Canvas LMS platform. The state also hired an external evaluator (PLACE, LLC) who has supported the SSIP Core Team in revising/developing tools related to monitoring fidelity of site-level implementation and coaching (e.g., LETRS observation tool, leadership team meeting fidelity tools, High Quality Professional Development (HQPD) coaching fidelity tool, coaching logs), in addition to creating a site level needs assessment/planning tool and action plan template. We adopted Acadience as the literacy screener and had the state-level literacy coach, external evaluator, and site-level coaches complete Acadience training (Data Interpretation and Essentials workshops). Additionally, the state contracted with PIC to support our efforts in engaging families in understanding their child's literacy progress. A PIC representative serves on both the SSIP Core and Leadership Team and as a participant on site-level leadership teams. We also developed a protocol to review resources developed by PIC. With new Dyslexia legislation in place, there has been strategic collaboration across agencies (internal SEA divisions; internal workgroup; external with PIC, International Dyslexia Association (IDA), the National Center to Improve Literacy, and the National Center on Intensive Intervention) to update Dyslexia Guidance (<https://nhdoe.instructure.com/courses/177>). The SSIP Core team helped inform the Dyslexia guidance document, which includes a list of recommended literacy screeners for LEAs to use. PIC was also instrumental in developing a Dyslexia infographic resource and support document for families, based on the Dyslexia Guidance. In addition, SEA leadership attended a conference promoting the Science of Reading (New England SoR Summit) and mCLASS (DIBELS-8); this allowed for SEA presence at an event with many teachers/practitioners across the state. In addition, the SSIP Core Team members participate in a cross-agency evidence-based practices group at NHED. The goal is to create training to support districts in how to select quality, evidence-based curriculum/instruction to support students. The SSIP Core Team members collaborate with the state ELA Consultant to align with broader literacy initiatives (NHLovesReading.org, IHE review, Leaning into Literacy). The effort includes a family-focused reading initiative, review of higher education standards, teacher dyslexia guide, and LETRS (Language Essentials for Teachers of Reading and Spelling) training initiative, in which SSIP sites are participating. The School Improvement/Title I Coordinator at the department is actively engaged so the state can provide support/guidance to sites on how to leverage Title funds to support their SSIP efforts.

LEA Infrastructural Improvement Strategies Implemented and Outputs Met. To train practitioners in evidence-based literacy instruction, we contracted with Lexia to provide LETRS training for all implementation sites (As of November 2023, n=35 administrators and educators are trained in all phases of LETRS training within the sites). Each pilot site committed to having all K-4 general education, special education, and administrative staff complete LETRS training. All four participating sites developed site-level leadership teams that include the site administrator, Special Education Director, Title I Coordinator, site-base coach(es), regular education teacher, special education teacher, a data coordinator, the State-level Literacy Coach, and a family member/PIC representative. The goal of having PIC/family representative involved on site-level teams is to build the State-Level Literacy Coach's capacity to support the school teams with ensuring the authentic engagement of parents and families. All sites completed a needs-assessment to support action planning and prioritized areas for improvement across the domains of (1) leadership and infrastructure, (2) professional development, (3) literacy assessment and data-based decision-making, (4) literacy instruction and intervention, and (5) community and family involvement. Additionally, the four pilot sites adopted Acadience as their literacy screener. As of November 2023, 23 practitioners across the four sites completed the Data Interpretation Workshop and 62 completed the Data Essentials Workshop offered by Acadience. Lastly, three sites completed screening using Acadience with all students and one site screened its students in K-1 for the fall benchmark. This site will complete screening with all students in K-4 moving forward but were unable to screen grade 2-4 students using Acadience in time for this report, as they needed to secure funds to purchase additional "seats" in the system. Screening all students (not just students with disabilities) is a recommended practice to ensure school teams are examining student data to inform potential risk for poor learning outcomes and to guide school teams/educators in making data-based decisions related to instruction/intervention delivery based on student need.

**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.**

The phased implementation model is applicable both to the systems-work at the state level, as well as the systems-work at the LEA level. At the state level, the following domains of a systems framework are in place and are being leveraged to support the uptake, sustainability, and scale-up of LEA's implementation of evidence-based literacy instruction and intervention to ensure students with disabilities make progress on their reading proficiency (i.e., SIMR). The systems factors outlined below directly relate to the outcomes met in this reporting period.

**Governance:** There are dedicated state-level staff in place to support SSIP implementation, namely the SSIP Coordinator and the State-Level Literacy Coach. Their oversight ensures that the SSIP work remains a priority, is aligned with other initiatives, and is adequately supported.

**Finance:** To support LEA implementation, pilot sites receive grant funding to support implementation. Funds were used by sites to purchase the Acadience screening data/technology system & staff training, technology to implement the screener, provide stipends to teachers/coaches, or to pay for LETRS/Acadience training.

**Accountability/Monitoring:** The state requires pilot sites to use the same literacy screener (i.e., Acadience) and use observational tools within coaching designed to examine the fidelity of LETRS implementation. This enables the SSIP Core Team to examine site level data on student performance alongside implementation fidelity data at regular intervals.

**Quality Standards:** The state hired an external evaluator to support the development and administration of data collection tools to measure site-level progress across implementation phases. Developed tools to date include: (a) a needs-assessment/site planning tool and action plan template, (b) coaching logs, (c) site-level leadership team fidelity survey. The evaluator has also provided insight into the specific tools used to measure the fidelity of implementation of both LETRS and the coaching model(s).

**Professional Development/TA:** All participating sites agree to have all K-4 instructional staff and administrators complete LETRS training and the Acadience Data Interpretation Training; in addition, participants who are responsible for screening students complete the Acadience Essentials Workshop. Additionally, each site must identify a staff member to support coaching others in effective, data-driven literacy instruction (site-level coach) at a minimum of .5 FTE. Site-level coaches are trained in effective coaching practices by the state and are supported by the state-level literacy coach to ensure their fidelity to the coaching model. Additionally, the state-level literacy coach provides ongoing TA to sites related to their identified areas of need; in areas where sites have common needs, the state-level literacy coach facilitates cross-site professional learning opportunities.

The state met all short-term outcomes related to building the infrastructure necessary to support LEAs with implementing evidence-based, data-driven early literacy and language instruction and interventions. Specifically, the state developed and disseminated the site application, reviewed applications for readiness factors, and selected four pilot sites to be involved in the first cohort (short and intermediate outcomes related to Governance). The state leadership team was created (short-term outcome related to Governance). A meeting schedule and roles and responsibilities were established, and the leadership team membership increased to include site-level coaches from all pilot sites (intermediate outcome related to Governance and Accountability/Monitoring). During the reporting period, the state also increased awareness across NHED divisions about the SSIP work to better align statewide literacy initiatives (short-term outcomes related to Governance). This increased awareness across divisions led to the collaborative development of Dyslexia Guidance and resulted in the adoption of an evidence-based early learning and literacy instruction (LETRS) within pilot sites as the professional development mechanism to make progress toward the SiMR (intermediate outcome related to Governance, Finance, and Professional Development/TA). The state also identified the systems-level and site-level coaching models to support LEA implementation of LETRS, in collaboration with the SSIP Core Team and NCSI TA Facilitators (short-term outcome related to Quality Standards and Professional Development/TA). As noted, the state identified Acadience as the literacy screener all participating sites must use and all sites were provided funding to purchase Acadience and have screened students using the screener (short-term outcome related to Finance and Accountability/Monitoring).

**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.**

The SSIP Implementation Plan articulates the next steps we will employ during the next reporting period; anticipated outcomes are identified in the logic model and evaluation plan.

**Planned Activities.** To continue building LEA capacity to support evidence-based and data-driven language and literacy instruction, we will regularly convene the SSIP Core Team and engage the SSIP State Leadership Team to examine progress toward intended outcomes and make any course corrections needed. The state-level literacy coach will continue providing systems-level coaching and technical assistance to the site-level coaches on their implementation of LETRS and in data-based decision-making using literacy screening and progress monitoring data. In collaboration with NCSI, the SEA will provide all site coaches with training in the NH Coaching Model and support coaches as they implement their coaching cycles in Spring 2024. The SEA will host a Learning Collaborative event for all SSIP implementation sites with role-specific opportunities. PIC will develop family literacy modules and the NHED website and Canvas platform will be updated with literacy-specific training and resources and made accessible to educators and parents/families. In addition, we will continue to engage key stakeholders in ongoing discussions related to the reading proficiency targets and SSIP implementation/evaluation. Specifically, we plan to engage stakeholders more deeply in discussions around the NH SAS data, and to analyze these data alongside Acadience benchmark data, as Acadience data were not previously available.

**Anticipated Outcomes.** The planned activities are anticipated to support the SEA in meeting the following intermediate outcomes: increased literacy initiative alignment; increased cross-department and interagency partner collaboration, including ongoing engagement with our Parent Training and Information Center (PTI) partner; and implementation of trainings, coaching, networking opportunities, and support to pilot schools to increase educators' understanding and use of data-driven EL&L instruction/intervention.

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

The Language Essentials for Teachers of Reading and Spelling (LETRS)  
Effective Coaching Practices

**Provide a summary of each evidence-based practices.**

LETRS is a professional course of study that helps educators master the content and principles of effective reading, language, and literacy instruction. This research-based course focuses on preparing teachers with the essential skills for diagnosing reading issues, prescription of evidence-based strategies and assessment of the effectiveness of the instruction provided to support all students. LETRS teaches educators the skills needed to master the fundamentals of reading instruction — phonological awareness, phonics, fluency, vocabulary, comprehension, writing, and language. The LETRS course has recently earned accreditation from the International Dyslexia Association. LETRS was also reviewed by the What Works Clearinghouse and is identified at their Tier 2 evidence level, indicating there is at least one finding from a high-quality study showing moderate evidence of effectiveness. LETRS provides a systematic process to educate teachers about the science of reading, the development of oral and written language, and how to incorporate knowledge of language into effective reading instruction and is applicable regardless of the literacy program being implemented. New Hampshire has invested in LETRS to promote evidence-based, structured literacy instruction; all Cohort 1 sites are required to train all K-4 educators to implement LETRS.

Coaching is “a form of professional learning within the classroom or school that helps [educators] develop and apply new knowledge, make strong plans for instruction and assessment, obtain feedback, refine their practices, and examine results” (The University of Florida Lastinger Center for Learning, Learning Forward, & Public Impact, 2016, p. 5). Coaching provides educators with the support they need to apply a newly learned skill within their own context (Horner, 2018). An analysis by Kraft and Blazar (2018) identified that coaching led to the quality of teachers’ instruction by “as much as—or more than—the difference in effectiveness between a novice and a teacher with five to ten years of experience.” The NH Coaching Framework is modeled after coaching models with demonstrated effectiveness and leverages the Effective Coaching Practices work of the National Center for Systemic Improvement (NCSI). This model includes four coaching practices with demonstrated effectiveness at improving teacher practice (Neuman & Cunningham, 2009; Wehby et al., 2012). The four effective coaching practices employed in this model include: alliance-building strategies, observation, modeling, and performance feedback (Pierce, 2015). This coaching model is used within the coaching provided to SSIP implementation site teams from the state-level literacy coach, as well as by site-level coaches. Both systems (coaching activities to support site-level leadership teams with building internal capacity and implementing with fidelity to sustain systemic change) and instructional coaching (coaching in LETRS implementation) are a focus at the SEA and LEA levels.

**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.**

Throughout the LETRS course of study, teachers are exposed to evidence-based research on reading and explore systems of oral and written language that are critical to literacy development. LETRS instruction is aligned to the Science of Reading and provides explicit, systematic, scaffolded, and differentiated instruction to students. Research suggests that when implemented with fidelity, LETRS/instruction in the Science of Reading leads to improved early language and literacy skills, which in turn should result in improved reading proficiency for students with disabilities (SiMR).

The NH Coaching Framework leverages the four effective coaching practices (i.e., observation, modeling, delivery of performance feedback, and use of alliance-building strategies) at the system and instructional level. Systems Coaches carry out activities and processes that assist teams in implementing, scaling, and sustaining systemic change (e.g., needs assessment, action planning, data-based decision making). Instructional Coaches engage in coaching cycles (pre-observation, observation, post-observation) with teachers to ensure that LETRS is implemented with fidelity.

Combined, LETRS training and systems and instructional coaching should improve schools’ use of data to drive instruction/intervention and teachers’ use of evidence-based literacy instruction, which in turn should lead to the SiMR results.

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

Multiple tools are in place to monitor implementation fidelity. These include coaching logs to measure the frequency/duration of coaching, coach observations of teacher instruction/implementation of LETRS to measure the quality of instruction, and the HQPD coaching fidelity tool to measure coaches’ adherence to the NH Coaching Framework. Additionally, site-level leadership teams complete a teaming fidelity check (modified from the Team Initiated Problem-Solving or TIPS process) that measures how well each leadership team meeting was facilitated, as well as how well team members perceived the team meeting as being beneficial for moving the work forward. Lastly, literacy screening and progress monitoring fidelity will be assessed at least twice annually using Acadience fidelity check tools.

To assess practice change, pre- and post-test results from LETRS training, post-test results from Acadience trainings, coaching observation data, and progress toward site-level action plan items are collected and analyzed. Sites will also complete the same needs-assessment annually, allowing for changes in needs/readiness to implement new implementation phases to be assessed. Site-level universal screening data are also collected and analyzed at each site (by its leadership team), as well as across sites (by the SSIP Core/Leadership Teams) to assess whether implementation is resulting in the desired impacts on student outcomes.

**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.**

A needs assessment was developed by members of the SSIP Core Team, including the external evaluator and PIC for the purpose of informing the development of site-level action plans, supporting the state-level coach with identifying areas of need to focus on for systems-coaching and coach PLC topics, and to determine each site’s progress/change over time. The needs assessment is divided into five sections (1) Leadership and Infrastructure, (2) Professional Development, (3) Literacy Assessment and Data-Based Decision-Making, (4) Literacy Instruction and Intervention, and (5) Community and Family Involvement. Each section contains a set of items that site-level leadership team members responded to using a Likert-type 3-point scale, with the option to select “Unsure,” which rendered a value of “0.” A score of “3” indicated the item was considered by the respondent to be “In Place;” a score of “2” indicated an item to be considered “Partially in Place;” and a score of “1” indicated that the item was considered “Not in Place.” The external evaluator created an online survey to collect individual site-level leadership team members’ responses. Once all members’ survey responses were captured, the external evaluator created a summary report of the data that included the mode score for each item (averages were not used, since respondents had the option to indicate “Unsure/0”). The state-level coach then facilitated a meeting with all site-level team members where they were provided their scores and the mode score for all team members at their site, along with bar graphs showing the range of responses for each item. The coach facilitated a discussion-based process with each site’s leadership team to have them arrive at a single “consensus” score for each item. This process allowed for each member to hear from others on their teams about why they rated something the way that they did. Each member did not have to fully agree with the final consensus score, but at least needed to be comfortable with it being the consensus score to use for action planning.

Once all sites’ consensus scores were received, the external evaluator analyzed the data. No sites included a score of “Unsure/0” for any single item. This allowed for averages to be taken, both at the item and section levels. For reporting purposes, the average score for each of the needs assessment sections are included, along with the lowest rated items overall. The section of the needs-assessment rated highest among the four sites was “Leadership & Infrastructure” (average = 2.61). The remaining section scores, in descending order, are as follows: “Instruction & Intervention” (average = 2.40), “Literacy Assessment & Data-Based Decision-Making” (average = 2.31), “Community & Family Involvement” (average = 2.19), and “Professional Development” (average = 1.95). The lowest rated items were indicated for the following items, each receiving a score of “1/Not in Place”:

Item: The team establishes an annual proficiency target on the NH SAS that guides their work.

Item: The literacy PD Plan includes activities to sustain the work of the pilot (e.g., strategic roll-out to other staff/grade levels).

Item: Student risk (based on literacy screening) is confirmed by follow-up progress monitoring based on guidance set forth in Acadience.

Item: Ongoing progress monitoring for students occurs at a frequency aligned to their level of intervention (i.e., the more intensive their intervention, the more frequently data are collected).

Item: There is a page on our school district website with literacy-specific resources for families.

The needs assessment data supports the decision to continue the ongoing use of each evidence-based practice: LETRS and effective coaching practices. Specifically, systems coaching can support sites as they address areas of need across the five sections, including the items identified as

lowest among all items. Further, the implementation of LETRS will need to be monitored alongside student-level data to ensure the sites make progress toward both their action plans and the SiMR.

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

The SSIP Implementation Plan articulates the next steps we will employ during the next reporting period; anticipated outcomes are identified in the logic model and evaluation plan.

**Planned Activities.** All SSIP pilot sites will engage their site-level leadership team in implementing their site-level action plans and re-assessing needs/action plans at the start of the 2024 school year. Teachers at each site will implement LETRS; all sites will select 4-8 practitioners who will receive coaching (number of practitioners based on school-based coach FTE). All site-level coaches will complete training in the NH Coaching Model and will engage in at least 2-3 coaching cycles with each practitioner identified for coaching. SSIP implementation sites will conduct—with fidelity and in accordance with HB377—literacy screening at specific benchmarks (spring 2023, fall 2024, and winter 2024). Leadership teams will examine student screening data to inform any course corrections needed to their action plan. Any new teachers will be trained in Acadience and LETRS. Lastly, LEAs will develop a communication plan that indicates how they will prioritize community and family engagement by increasing training/information session opportunities and adding a literacy resource page on their LEA website.

**Anticipated Outcomes.** The planned activities are anticipated to support the LEAs in meeting the following short-term outcome increasing LEA awareness of their need to better support family understanding of early language and literacy skill development and child progress. The planned activities are designed to support the LEAs with meeting the following intermediate outcomes: increased infrastructure to support LEA implementation of professional learning (LETRS and Coaching); increased dissemination of SEA-developed family resources within LEAs; more consistently implemented site leadership team meetings; increased implementation fidelity of LETRS and data-based decision making processes; and increased educator understanding of literacy screening and evidence-based, data-driven early language and literacy instruction.

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

YES

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

Literacy development is a priority, based on NH SAS data. Specifically, the baseline reading proficiency of fourth grade students with disabilities within the pilot sites (7.02%) and statewide (13.54%) is alarming and requires strategic investment and support from the state. Work in the four sites on early language and literacy professional development and coaching only began in Fall 2023, so more time is needed to inform any decisions related to modifying SSIP implementation. Further, the multiple opportunities and mechanisms for engaging stakeholders, detailed below, revealed a shared priority for the SSIP: improving reading proficiency in New Hampshire. Overall, multiple stakeholder groups recognize similar priorities to the SEA in terms of addressing literacy instruction/reading proficiency, specifically the use of Science of Reading practices. Both Science of Reading and Dyslexia are “hot topics” in the state, with key legislators making literacy/reading proficiency a priority (e.g., new legislation requiring LEAs to screen for Dyslexia).

## **Section C: Stakeholder Engagement**

### **Description of 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 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. Members of State Advisory Committee (SAC) are invited to participate in stakeholder meetings. 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. We use large group, targeted and on-going stakeholder groups to gain feedback on our services, supports and guidance.

The NHED was unable to provide stakeholder engagement sessions with parents due to a lack of staffing within the bureau. We had almost 60% of all positions vacant for a majority of this fiscal year.

As staffing has increased for the fiscal year 2023-2024, the NHED will be conducting stakeholder meetings in the summer of 2024 which includes but is not limited to district staff, parents (with the support of the Parent Information Center), and the State Advisory Committee.

While there is some divisiveness in the state in terms of how LEAs are addressing literacy instruction (i.e., the “reading wars”), there is alignment across the department to focus on literacy through the Science of Reading/LETRS. The SSIP Core Team, which includes stakeholders external to the Bureau and Department, met to set reading proficiency targets on the statewide assessment (NH SAS) after reviewing the baseline performance of the SiMR population. Our active engagement of a diverse group of stakeholders revealed concerns related to how best to measure student progress. Specifically, stakeholders expressed that the NH SAS is not the best way to measure reading proficiency, which led to the state selecting an additional data source (Acadience literacy screener) to help inform decision making at the local and state level, specifically with shifting the needle for learners with disabilities. The state’s selection of Acadience was met with some resistance; some stakeholders were concerned with the requirement to adopt the Acadience literacy screener by pilot sites (especially in districts where a different screener was required by local leadership). To address these concerns, the state is developing guidance around how LEAs can select an evidence-based screener, with recommended screeners included. In addition, stakeholders shared that they were also concerned by the curriculum/programs LEAs were using within their tiered literacy instruction/intervention and requiring sites to adopt specific curricula, citing local control as a concern. When we released the site application, some LEAs were concerned with their capacity to implement/participate as a pilot site due to initiative overload with other improvements they are making, like changing curricula. They also were concerned about getting staff to buy-in, especially at the level required for participation (i.e., all K-4 teachers and administrators trained in LETRS).

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

The SSIP Core and Leadership Teams include stakeholders from within and across SEA divisions, as well as interagency partners (e.g., PIC, IDA, NH Council for Developmental Disabilities), and site-level practitioners. Strategies to engage the SSIP Core Team members include soliciting their ongoing feedback related to implementation and evaluation through weekly to bi-weekly meetings. The SSIP State Leadership Team began meeting in March 2023 and has been leveraged to provide feedback on key decisions related to implementation and evaluation (see Section A). Aside from these two teams, the state has also engaged stakeholders through surveys and “listening sessions.” In August (2022) NHED held an “Info Day,” which is similar to a mini conference for special education directors. Updates were provided on various Bureau initiatives, including an overview of the SSIP and SiMR, specifically the decision and rationale to shift from the old SiMR to the new focus on literacy. The SSIP Core Team’s reading proficiency targets were also shared with stakeholders at the event. A post-event survey was sent to seek feedback from SpEd directors. The survey asked for their perspectives

on the update related to the SSIP/SiMR and the targets. In fall (2022), NHED sent a Literacy survey to NH school principals and special education directors. This survey captured information about what tools they were using for screeners, specific evidence-based practices/programs were in place, and details about their literacy curriculum/programs and tiered literacy interventions/programs. The survey also asked if they planned to adopt a new program and if they felt their current screener was effective. Lastly, the survey gauged LEA interest in partnering with department to improve literacy instruction in their district. Also, in fall (2022), NHED held a session with the Special Education Advisory Council (SAC) which oriented SAC to the SSIP and SiMR, as well as the reading proficiency targets. Separate from the state's priorities, the SAC had identified reading proficiency as a priority; we asked for feedback on how/why they arrived at their decision to focus on reading proficiency as a priority and what they envisioned work looking like at the SEA and LEA levels. Two additional sessions were held. The first was with special education directors; we asked for their feedback on what was already in place to improve reading proficiency, who was engaged in the work at the LEA level, collaboration across general and special education to improve reading proficiency, and what supports they would like to see from the SEA to help their work improving reading proficiency. The second was a session held with families (in collaboration with PIC) focused on what they saw happening in their district/community to improve reading proficiency, how their district/community engaged families, desired supports and resources from SEA to improve reading proficiency, and what they would expect to see at SEA and community level and how they would know it was happening

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

YES

**Describe how the State addressed the concerns expressed by stakeholders.**

Concerns are listed above in the summaries. To address these concerns, the SSIP Core Team decided to:

- Add the Acadience screener as an additional data source to measure early language and literacy skill development, as SAS is a distal outcomes measure;
- Have pilot sites agree to participate by signing a Memorandum Of Understanding;
- Provide a funding stipend and coaching support from a State-Level Literacy Coach to participating sites; and
- Develop tools and resources to ensure LEA readiness to gain buy-in and start implementation (i.e., signing up for LETRS training, book groups on SoR, Acadience training).

**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.**

N/A

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

N/A

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

N/A

**Provide additional information about this indicator (optional).**

The 2025 target is not the same as the state's SiMR, which was set through FFY 2026. However, the FFY 2025 target is an increase over baseline as required.

## **17 - Prior FFY Required Actions**

None

## **17 - OSEP Response**

The State has revised the baseline for this indicator, using data from FFY 2022, and OSEP accepts that revision.

The State revised its targets through FFY 2025 for this indicator, and OSEP accepts those targets.

## **17 - Required Actions**

## **Certification**

### **Instructions**

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

#### **Certify**

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.**

#### **Name:**

Lisa Moody

#### **Title:**

Part B Data Manager

#### **Email:**

lisa.m.moody@doe.nh.gov

#### **Phone:**

16033960511

#### **Submitted on:**

04/19/24 10:32:40 AM

Determination Enclosures

RDA Matrix

## New Hampshire 2024 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
77.50%	Needs Assistance

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	20	14	70.00%
Compliance	20	17	85.00%

(1) For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2024: Part B."

2024 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment (2)	Grade 4	91%	0
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	82%	0
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	22%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	94%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	37%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	96%	1

Math Assessment Elements

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4	91%	0
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	83%	0
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	41%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	95%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	26%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	92%	1

(2) Statewide assessments include the regular assessment and the alternate assessment.



**Exiting Data Elements**

<b>Exiting Data Elements</b>	<b>Performance (%)</b>	<b>Score</b>
<b>Percentage of Children with Disabilities who Dropped Out</b>	9	2
<b>Percentage of Children with Disabilities who Graduated with a Regular High School Diploma**</b>	80	2

\*\*When providing exiting data under section 618 of the IDEA, States are required to report on the number of students with disabilities who exited an educational program through receipt of a regular high school diploma. These students meet the same standards for graduation as those for students without disabilities. As explained in 34 C.F.R. §300.102(a)(3)(iv), in effect June 30, 2017, “the term regular high school diploma means the standard high school diploma awarded to the preponderance of students in the State that is fully aligned with State standards, or a higher diploma, except that a regular high school diploma shall not be aligned to the alternate academic achievement standards described in section 1111(b)(1)(E) of the ESEA. A regular high school diploma does not include a recognized equivalent of a diploma, such as a general equivalency diploma, certificate of completion, certificate of attendance, or similar lesser credential.”

2024 Part B Compliance Matrix

Part B Compliance Indicator (3)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2021 (4)	Score
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	0.00%	N/A	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	N/A	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	0.00%	N/A	2
Indicator 11: Timely initial evaluation	97.42%	NO	2
Indicator 12: IEP developed and implemented by third birthday	88.79%	YES	1
Indicator 13: Secondary transition	54.20%	YES	0
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	100.00%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			2
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	None		

(3) The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: [https://sites.ed.gov/idea/files/2024\\_Part-B\\_SPP-APR\\_Measurement\\_Table.pdf](https://sites.ed.gov/idea/files/2024_Part-B_SPP-APR_Measurement_Table.pdf)

(4) This column reflects full correction, which is factored into the scoring only when the compliance data are >=5% and <10% for Indicators 4B, 9, and 10, and >=90% and <95% for Indicators 11, 12, and 13.

**Data Rubric  
New Hampshire**

FFY 2022 APR (1)

Part B Timely and Accurate Data -- SPP/APR Data

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1

**APR Score Calculation**

<b>Subtotal</b>	21
<b>Timely Submission Points</b> - If the FFY 2022 APR was submitted on-time, place the number 5 in the cell on the right.	5
<b>Grand Total</b> - (Sum of Subtotal and Timely Submission Points) =	26

(1) In the SPP/APR Data table, where there is an N/A in the Valid and Reliable column, the Total column will display a 0. This is a change from prior years in display only; all calculation methods are unchanged. An N/A does not negatively affect a State's score; this is because 1 point is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the SPP/APR Data table.

**618 Data (2)**

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 8/30/23	1	1	1	3
Personnel Due Date: 2/21/24	1	1	1	3
Exiting Due Date: 2/21/24	1	1	1	3
Discipline Due Date: 2/21/24	1	1	1	3
State Assessment Due Date: 1/10/24	1	1	1	3
Dispute Resolution Due Date: 11/15/23	1	1	1	3
MOE/CEIS Due Date: 5/3/23	1	1	1	3

**618 Score Calculation**

Subtotal	21
Grand Total (Subtotal X 1.23809524) =	26.00

(2) In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.23809524 points is subtracted from the Denominator in the Indicator Calculation table for each cell marked as N/A in the 618 Data table.

**Indicator Calculation**

A. APR Grand Total	26
B. 618 Grand Total	26.00
C. APR Grand Total (A) + 618 Grand Total (B) =	52.00
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
<b>Denominator</b>	52.00
D. Subtotal (C divided by Denominator) (3) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

**(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.23809524.**

## APR and 618 -Timely and Accurate State Reported Data

DATE: February 2024 Submission

### SPP/APR Data

**1) Valid and Reliable Data** - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

### Part B 618 Data

**1) Timely** – A State will receive one point if it submits all *EDFacts* files or the entire *EMAPS* survey associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described the table below).

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part B Child Count and Educational Environments	C002 & C089	8/30/2023
Part B Personnel	C070, C099, C112	2/21/2024
Part B Exiting	C009	2/21/2024
Part B Discipline	C005, C006, C007, C088, C143, C144	2/21/2024
Part B Assessment	C175, C178, C185, C188	1/10/2024
Part B Dispute Resolution	Part B Dispute Resolution Survey in <i>EMAPS</i>	11/15/2023
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in <i>EMAPS</i>	5/3/2023

**2) Complete Data** – A State will receive one point if it submits data for all files, permitted values, category sets, subtotals, and totals associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. The data submitted to *EDFacts* aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in *EMAPS*. State-level data include data from all districts or agencies.

**3) Passed Edit Check** – A State will receive one point if it submits data that meets all the edit checks related to the specific data collection by the initial due date. The counts included in 618 data submissions are internally consistent within a data collection

## Dispute Resolution

### IDEA Part B

#### New Hampshire

#### School Year: 2022-23

A zero count should be used when there were no events or occurrences to report in the specific category for the given reporting period. Check "Missing" if the state did not collect or could not report a count for the specific category. Please provide an explanation for the missing data in the comment box at the top of the page.

#### Section A: Written, Signed Complaints

<b>(1) Total number of written signed complaints filed.</b>	55
(1.1) Complaints with reports issued.	32
(1.1) (a) Reports with findings of noncompliance	21
(1.1) (b) Reports within timelines	32
(1.1) (c) Reports within extended timelines	0
(1.2) Complaints pending.	0
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	23

#### Section B: Mediation Requests

<b>(2) Total number of mediation requests received through all dispute resolution processes.</b>	29
(2.1) Mediations held.	25
(2.1) (a) Mediations held related to due process complaints.	20
(2.1) (a) (i) Mediation agreements related to due process complaints.	11
(2.1) (b) Mediations held not related to due process complaints.	5
(2.1) (b) (i) Mediation agreements not related to due process complaints.	2
(2.2) Mediations pending.	1
(2.3) Mediations withdrawn or not held.	3

#### Section C: Due Process Complaints

<b>(3) Total number of due process complaints filed.</b>	37
(3.1) Resolution meetings.	1
(3.1) (a) Written settlement agreements reached through resolution meetings.	1
(3.2) Hearings fully adjudicated.	2
(3.2) (a) Decisions within timeline (include expedited).	2
(3.2) (b) Decisions within extended timeline.	0
(3.3) Due process complaints pending.	0
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	35

#### Section D: Expedited Due Process Complaints (Related to Disciplinary Decision)

<b>(4) Total number of expedited due process complaints filed.</b>	1
(4.1) Expedited resolution meetings.	0
(4.1) (a) Expedited written settlement agreements.	0
(4.2) Expedited hearings fully adjudicated.	0
(4.2) (a) Change of placement ordered	0
(4.3) Expedited due process complaints pending.	0
(4.4) Expedited due process complaints withdrawn or dismissed.	1

**State Comments:**

**Errors:**

Please note that the data entered result in the following relationships which violate edit checks:

State error comments:

This report shows the most recent data that was entered by:

New Hampshire

These data were extracted on the close date:

11/15/2023



## How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2024 will be posted in June 2024. Copy and paste the link below into a browser to view.

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



UNITED STATES DEPARTMENT OF EDUCATION  
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

**Final Determination Letter**

June 21, 2024

Honorable Frank Edelblut  
Commissioner  
New Hampshire Department of Education  
101 Pleasant Street  
Concord, NH 03301

Dear Commissioner Edelblut:

I am writing to advise you of the U.S. Department of Education's (Department) 2024 determination under Section 616 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that New Hampshire needs assistance in implementing the requirements of Part B of the IDEA. This determination is based on the totality of New Hampshire's data and information, including the Federal fiscal year (FFY) 2022 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

New Hampshire's 2024 determination is based on the data reflected in its "2024 Part B Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for each State and Entity and consists of:

- (1) a Compliance Matrix that includes scoring on Compliance Indicators and other compliance factors;
- (2) a Results Matrix that includes scoring on Results Elements;
- (3) a Compliance Score and a Results Score;
- (4) an RDA Percentage based on both the Compliance Score and the Results Score; and
- (5) the State's or Entity's Determination.

The RDA Matrix is further explained in a document, entitled "[How the Department Made Determinations under Section 616\(d\) of the Individuals with Disabilities Education Act in 2024: Part B](#)" (HTDMD).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making determinations in 2024, as it did for Part B determinations in 2014-2023. (The specifics of the determination procedures and criteria are set forth in the HTDMD document and reflected in the RDA Matrix for New Hampshire).

In making Part B determinations in 2024, OSEP continued to use results data related to:

- (1) the participation and performance of CWD on the most recently administered (school year 2021-2022) National Assessment of Educational Progress (NAEP), as applicable (For the 2024 determinations, OSEP using results data on the participation and performance of children with disabilities on the NAEP for the 50 States, the District of Columbia, and Puerto Rico. OSEP used the available NAEP data for Puerto Rico in making Puerto Rico's 2024 determination as it did for Puerto Rico's 2023 determination. OSEP did not use NAEP data in making the BIE's 2024 determination because the NAEP data available for the BIE were not comparable to the NAEP data available for the 50 States, the District of Columbia, and Puerto Rico; specifically, the most recently administered NAEP for the BIE is 2019, whereas the most recently administered NAEP for the 50 States, the District of Columbia, and Puerto Rico is 2022.)
- (2) the percentage of CWD who graduated with a regular high school diploma; and
- (3) the percentage of CWD who dropped out.

For the 2024 IDEA Part B determinations, OSEP also considered participation of CWD on Statewide assessments (which include the regular assessment and the alternate assessment). While the participation rates of CWD on Statewide assessments were a factor in each State or Entity's 2024 Part B Results Matrix, no State or Entity received a Needs Intervention determination in 2024 due solely to this criterion. However, this criterion will be fully incorporated beginning with the 2025 determinations.

You may access the results of OSEP's review of New Hampshire's SPP/APR and other relevant data by accessing the EMAPS SPP/APR reporting tool using your New Hampshire-specific log-on information at <https://emaps.ed.gov/suite/>. When you access New Hampshire's SPP/APR on the site, you will find, in applicable Indicators 1 through 17, the OSEP Response to the indicator and any actions that New Hampshire is required to take. The actions that New Hampshire is required to take are in the "Required Actions" section of the indicator.

It is important for you to review the Introduction to the SPP/APR, which may also include language in the "OSEP Response" and/or "Required Actions" sections.

You will also find the following important documents in the Determinations Enclosures section:

- (1) New Hampshire's RDA Matrix;
- (2) the HTDMD [link](#);

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- (3) "2024 Data Rubric Part B," which shows how OSEP calculated New Hampshire's "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and
- (4) "Dispute Resolution 2022-2023," which includes the IDEA Section 618 data that OSEP used to calculate the New Hampshire's "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, New Hampshire's 2024 determination is Needs Assistance. A State's or Entity's 2024 RDA Determination is Needs Assistance if the RDA Percentage is at least 60% but less than 80%. A State or Entity's determination would also be Needs Assistance if its RDA Determination percentage is 80% or above but the Department has imposed Specific Conditions on the State's or Entity's last three IDEA Part B grant awards (for FFYs 2021, 2022, and 2023), and those Specific Conditions are in effect at the time of the 2024 determination.

New Hampshire's determination for 2023 was also Needs Assistance. In accordance with Section 616(e)(1) of the IDEA and 34 C.F.R. §300.604(a), if a State or Entity is determined to need assistance for two consecutive years, the Secretary must take one or more of the following actions:

- (1) advise the State or Entity of available sources of technical assistance that may help the State or Entity address the areas in which the State or Entity needs assistance and require the State or Entity to work with appropriate entities;
- (2) direct the use of State-level funds on the area or areas in which the State or Entity needs assistance; or
- (3) identify the State or Entity as a high-risk grantee and impose Specific Conditions on the State's or Entity's IDEA Part B grant award.

Pursuant to these requirements, the Secretary is advising New Hampshire of available sources of technical assistance, including OSEP-funded technical assistance centers and resources at the following websites: [Monitoring and State Improvement Planning \(MSIP\) | OSEP Ideas That Work](#), [Individuals with Disabilities Education Act \(IDEA\) Topic Areas](#), and requiring New Hampshire to work with appropriate entities. In addition, New Hampshire should consider accessing technical assistance from other Department-funded centers such as the Comprehensive Centers with resources at the following link: <https://compcenternetwork.org/states>. The Secretary directs New Hampshire to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. We strongly encourage New Hampshire to access technical assistance related to those results elements and compliance indicators for which it received a score of zero. New Hampshire must report with its FFY 2023 SPP/APR submission, due February 1, 2025, on:

- (1) the technical assistance sources from which New Hampshire received assistance; and
- (2) the actions New Hampshire took as a result of that technical assistance.

As required by IDEA Section 616(e)(7) and 34 C.F.R. §300.606, New Hampshire must notify the public that the Secretary of Education has taken the above enforcement actions, including, at a minimum, by posting a public notice on its website and distributing the notice to the media and through public agencies.

IDEA determinations provide an opportunity for all stakeholders to examine State data as that data relate to improving outcomes for infants, toddlers, children, and youth with disabilities. The Department encourages stakeholders to review State SPP/APR data and other available data as part of the focus on improving equitable outcomes for infants, toddlers, children, and youth with disabilities. Key areas the Department encourages State and local personnel to review are access to high-quality intervention and instruction; effective implementation of individualized family service plans (IFSPs) and individualized education programs (IEPs), using data to drive decision-making, supporting strong relationship building with families, and actively addressing educator and other personnel shortages.

For 2025 and beyond, the Department is considering three criteria related to IDEA Part B determinations as part of the Department's continued efforts to incorporate equity and improve results for CWD. First, the Department is considering as a factor OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). This factor would be reflected in the determination for each State and Entity through the "longstanding noncompliance" section of the Compliance Matrix beginning with the 2025 determinations. In implementing this factor, the Department is also considering beginning in 2025 whether a State or Entity that would otherwise receive a score of Meets Requirements would not be able to receive a determination of Meets Requirements if the State or Entity had OSEP-identified longstanding noncompliance (i.e., unresolved findings issued by OSEP at least three or more years ago). Second, the Department is considering as potential additional factors the improvement in proficiency rates of CWD on Statewide assessments. Third, the Department is considering whether and how to continue including in its determinations criteria the participation and proficiency of CWD on the NAEP.

For the FFY 2023 SPP/APR submission due on February 1, 2025, OSEP is providing the following information about the IDEA Section 618 data. The 2023-24 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2023 SPP/APR and the 2025 IDEA Part B Results Matrix and States and Entities will not be able to resubmit their IDEA Section 618 data after the due date. The 2023-24 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform for Part B SPP/APR Indicators 3, 5, and 6 (as they have in the past). Under EDFacts Modernization, States and Entities are expected to submit high-quality IDEA Section 618 Part B data that can be published and used by the Department as of the due date. States and Entities are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States and Entities to take one of the following actions for all business rules that are triggered in the EDPass or EMAPS system prior to the applicable due date: 1) revise the uploaded data to address the edit; or 2) provide a data note addressing why the data submission triggered the business rule. States and Entities will be unable to submit the IDEA Section 618 Part B data without taking one of these two actions. There will not be a resubmission period for the IDEA Section 618 Part B data.

As a reminder, New Hampshire must report annually to the public, by posting on the State educational agency's (SEA's) website, the performance of each local educational agency (LEA) located in New Hampshire on the targets in the SPP/APR as soon as practicable, but no later than 120 days after New Hampshire's submission of its FFY 2022 SPP/APR. In addition, New Hampshire must:

- (1) review LEA performance against targets in the State's SPP/APR;

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- (2) determine if each LEA “meets the requirements” of Part B, or “needs assistance,” “needs intervention,” or “needs substantial intervention” in implementing Part B of the IDEA;
- (3) take appropriate enforcement action; and
- (4) inform each LEA of its determination.

Further, New Hampshire must make its SPP/APR available to the public by posting it on the SEA’s website. Within the upcoming weeks, OSEP will be finalizing a State Profile that:

- (1) includes New Hampshire’s determination letter and SPP/APR, OSEP attachments, and all State or Entity attachments that are accessible in accordance with Section 508 of the Rehabilitation Act of 1973; and
- (2) will be accessible to the public via the ed.gov website.

OSEP appreciates New Hampshire’s efforts to improve results for children and youth with disabilities and looks forward to working with New Hampshire over the next year as we continue our important work of improving the lives of children with disabilities and their families. Please contact your OSEP State Lead if you have any questions, would like to discuss this further, or want to request technical assistance.

Sincerely,

---

Valerie C. Williams  
Director  
Office of Special Education Programs

cc: New Hampshire Director of Special Education

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