STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

For reporting on
FFY 2024

Delaware

PART B DUE February 2, 2026

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

The U.S. Department of Education's Office of Special Education Programs (OSEP) requires states to exercise their general supervision responsibilities under the Individuals with Disabilities Education Act (IDEA) and ensure appropriate monitoring, technical assistance (TA), and enforcement regarding local programs. OSEP's accountability framework, Results Driven Accountability (RDA), brings into focus the educational results and functional outcomes for children with disabilities while balancing those results with the compliance requirements of IDEA. The purpose is to improve early intervention, provide equal access to a high quality education, help close the achievement gap and improve outcomes for students with disabilities while preparing them to have a range of college and career options appropriate to their individual needs and preferences in addition to continued efforts to protect their rights.

The Delaware Department of Education's (DDOE) Exceptional Children Resources (ECR) Workgroup has developed a Multi-Tiered System of Supervision and Accountability, based on the belief that that children with disabilities are general education students first and are to be a part of, not separate from, their nondisabled peers, to improve results for children with disabilities while ensuring compliance with IDEA requirements. This multi-tiered system includes the following components:

1. Integrated monitoring activities;
2. Data on processes and results;
3. The State Performance Plan/Annual Performance Report;
4. Fiscal management;
5. Effective dispute resolution;
6. Targeted technical assistance and professional development;
7. Policies, procedures and practices resulting in effective implementation; and
8. Improvement, correction, incentives, and sanctions.

Additional information related to data collection and reporting

The DDOE uses a longitudinal data system to collect and maintain detailed, quality student and staff level data on all students who attend public K-12 local education agencies. All LEAs are required to use the statewide data system to collect and to provide robust student data for reporting and analysis. Through this longitudinal data system, regular data reviews, and ongoing provision of training and technical assistance, the DDOE ensures that data collected and reported are accurate, valid, reliable, and timely.

Number of Districts in your State/Territory during reporting year

43

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). Include a description of all the mechanisms the State uses to identify and verify correction of noncompliance and improve results. This should include, but not be limited to, State monitoring, State database/data system, dispute resolution, fiscal management systems as well as other mechanisms through which the State is able to determine compliance and/or issue written findings of noncompliance. The State should include the following elements:

Describe the process the State uses to select LEAs for monitoring, the schedule, and number of LEAs monitored per year.

The DDOE has developed a Multi-Tiered System of Supervision and Accountability to improve early intervention, educational results and functional outcomes for children with disabilities and their families, and to ensure that LEAs are meeting regulatory requirements of the IDEA. In developing this multi-tiered system, the DDOE engaged and continues to engage with a wide range of stakeholders to obtain input and feedback including, but not limited to, Governor's Advisory Council for Exceptional Citizens (GACEC), Delaware's state IDEA advisory panel, Statewide Special Education Leadership, LEA Special Education Directors, Early Childhood/619 LEA staff, stakeholders specific to individual Indicators, parents and families in collaboration with Parent Information Center of Delaware (PIC), and work groups across the DDOE to align efforts, support and resources. Integrated monitoring activities are conducted annually and on a cyclical basis and include universal, focused, targeted, and intensive monitoring. Technical assistance and support are provided to LEAs to strengthen policies, procedures, and practices. In addition, the DDOE provides LEA Special Education Directors with an annual monthly calendar which includes regulatory references for all monitoring activities and timelines for annual and cyclical monitoring. Monitoring activities may include data analysis, on-site visits, desk audits, self-assessments reviewed/verified by DDOE, review of LEA policies and procedures, review of student records, staff/teacher interviews, and/or student observations. Individual student data/records are randomly selected and represent disability categories, race/ethnicity categories, gender, grade/grade band and school.

COMPLIANCE

Tier I: Universal Monitoring

-All LEAs are monitored on an annual basis.

-Areas of Universal Monitoring include Significant Discrepancy/Suspension & Expulsion (Indicator 4b), Disproportionate Representation in Special Education (Indicators 9 & 10), Initial Evaluation Timelines (Indicator 11), Transition of Part C to Part B (Indicator 12), Secondary Transition (Indicator 13), Significant Disproportionality, Comprehensive Coordinated Early Intervening Services (CCEIS), General Education Provisions Act, and fiscal (IDEA Subgrant Application, Maintenance of Effort, Excess Cost, Single Audits, High-Cost Subgrants, Discretionary Subgrants and use of IDEA funds for

CCEIS). Proportionate Share funds set aside for Equitable Services within the IDEA subgrant application? -If noncompliance is identified, the LEA moves to Tier II.

Tier II: Focused Monitoring

-All LEAs are monitored on a cyclical basis.

-Districts are monitored at least once every 5 years as follows:

2025-2026 SY: Delmar, Lake Forest, Woodbridge, New Castle County Vo-Tech, Dept. of Corrections

2026-2027 SY: Brandywine, Caesar Rodney, Smyrna, Department of Services for Children, Youth and Their Families

2027-2028 SY: Red Clay, Laurel, Polytech

2028-2029 SY: Cape Henlopen, Colonial, Indian River, Christina

2029-2030 SY: Milford, Sussex Technical High School, Seaford, Appoquinimink, Capital

-Charters are monitored at least once every 3 years as follows:

2025-2026 SY: Newark Charter, Early College, Delaware Military, 1st State Montessori, Thomas Edison, 1st State Military, Charter School of Wilmington, Providence Creek, Bryan Allen Stevenson

2026-2027 SY: Academy of Dover, Charter School of New Castle, Positive Outcomes, MOT, Sussex Academy, Freire, Odyssey

2027-2028 SY: Campus Community, Great Oaks, Kuumba, ASPIRA Delaware, Gateway, East Side, Antonia Alonso, Sussex Montessori

-Focused Monitoring includes, but is not limited to, Evaluation and Eligibility, Procedural Safeguards/Prior Written Notice, IEP Meeting Invitation, IEP Meeting Participants, IEP Development, Least Restrictive Environment, Transfer of Rights, provision of Equitable Services, and fiscal (use of IDEA Part B 611 and 619 funds including Coordinated Early Intervening Services (CEIS), and Proportionate Share).

-In addition, DDOE utilizes a risk-based analysis system to identify LEAs in need of increased or focused monitoring based on multiple data sources and including historical and/or continued noncompliance, administrative complaints, parent calls, and credible allegations.

-If continued noncompliance is identified, the LEA moves to Tier III.

Tier III: Targeted Monitoring

-LEAs may be identified for Targeted Monitoring based on risk factors including continued noncompliance identified in Tier I and/or Tier II monitoring activities.

-If continued noncompliance is identified, the LEA moves to Tier IV. Continued noncompliance is also reflected in LEA Annual Determination criteria.

Tier IV: Intensive Monitoring

-LEAs may be identified for Intensive Monitoring based on risk factors including outstanding noncompliance in Tier III.

-In Tier IV, the LEA enters into a Compliance Agreement with the DDOE which is also reflected in in LEA Annual Determination criteria.

Monitoring Activities During Disaster/Pandemic

-In accordance with OSEP guidance, during a disaster/pandemic (e.g., human-made, health related, or natural) the DDOE will continue to ensure the requirements of IDEA Part B are met under 34 C.F.R. § 300.149 (SEA responsibility for general supervision) and ensure the implementation of IDEA Part B. If traditional monitoring activities are not possible, the DDOE has the flexibility to collect information needed to ensure the implementation of IDEA by using the multiple components of the State's general supervision system such as the state data system and desk audits.

Describe how student files are chosen, including the number of student files that are selected, as part of the State's process for determining an LEA's compliance with IDEA requirements and verifying the LEA's correction of any identified noncompliance.

For all Tier I monitoring activities, including compliance indicators, the DDOE reviews student records in all 43 LEAs.

For cyclical monitoring, DDOE reviews special education records for 10% of the identified LEA's total number of students with IEPs with a minimum of 20 records and a maximum of 150 records. All records are reviewed for identified LEAs with less than 20 students with IEPs. Student records are randomly selected and represent disability categories, race/ethnicity categories, gender, grade/grade band and school.

For FFY 2024, the DDOE reviewed 645 student files across 13 LEAs.

When an LEA is identified with noncompliance, a letter of findings is issued to the LEA, within 90 days of identification of noncompliance, with required corrective actions and timelines including correction of each instance of individual student noncompliance. DDOE provides technical assistance to all LEAs regarding the areas of noncompliance and provides targeted technical assistance directly to the LEA(s) identified with noncompliance. After the LEA corrects all instances of individual student noncompliance, utilizing updated data, DDOE reviews each instance of individual student noncompliance to verify that each instance is 100% correct. If the LEA was directed to develop a Corrective Action Plan, DDOE reviews the plan including a root cause analysis, provision of professional development for staff in the areas of noncompliance and improvement activities to address root causes, to verify that all improvement activities have been completed. Utilizing updated data, the DDOE reviews new randomly selected student records within the LEA identified with noncompliance, to verify systemic compliance and that the LEA is correctly implementing regulatory requirements under IDEA, within one year of notification of noncompliance.

Describe the data system(s) the State uses to collect monitoring and SPP/APR data, and the period from which records are reviewed.

The DDOE uses a longitudinal data system to collect and maintain detailed, quality student and staff level data on all students who attend public K-12 local education agencies. All LEAs are required to use the statewide data system to collect to provide robust student data for reporting and analysis. Through this longitudinal data system, the DDOE ensures that data collected and reported are accurate, valid and reliable.

Data and student records are reviewed in accordance with federal data submission timelines and business rules for each indicator. In addition, student records are reviewed throughout the year within DDOE's Multi-Tiered System of Supervision and Accountability integrated monitoring activities.

Data Systems/Applications

– Delaware Longitudinal Student Information System (DELSIS) – where student ID's are assigned, overall tracking system for students in the state when they move through the districts.

-Infinite Campus - pupil accounting system and Delaware statewide online IEP management system – student identifiers are assigned (information comes from DELSIS on the back end), entry, exits, demographics, special education screen.

SPP/APR data from which records are reviewed aligns with federal reporting requirements for FFY 2024.

The DDOE provides a range of technical assistance and supports to ensure data submitted by LEAs is accurate, valid and reliable including, but not limited to, the following:

-Calendar of data submission due dates along with email reminders

-Training for all users of data applications

-Manuals detailing data systems, data entry, timelines, etc.

-Ongoing technical assistance by Part B Data Manager and ECR staff at LEA Special Education Director meetings and for individual LEAs/LEA Data Managers

-ECR staff regularly engages LEAs and other stakeholder groups in data analysis related to individual SPP/APR indicators to inform targets, review/identify improvement activities and evaluate progress.

-To maintain and strengthen SEA data process, the DDOE, with the support of OSEP funded IDEA Data Center, has developed internal protocols for the collection and reporting of child count 618 data and for each SPP/APR indicator. Protocols are aligned with IDEA requirements and provide policies and procedure that ensure collection of valid and reliable data including assigned roles and responsibilities that establish decision-making authority and accountability, business rules and processes, recording and communicating rules used during collection and validation of data, timeline and schedule for collecting and reviewing data, data quality and validation processes designed to support high quality data, data security policies and procedures and data governance requirements, data security processes for accessing, storing, backing up, recovering, transferring, encrypting, and destroying data and preventing breach or loss, communication mechanisms to share and disseminate information and data at the State and local levels, and processes to ensure that LEAs are implementing policies and procedures consistent with data collection requirements, including monitoring and oversight.

-The DDOE also utilizes resources and tools provided by OSEP and OSEP funded IDEA Technical Assistance Centers including, but not limited to EDPass - IDEA School Age Child Count, EDPass - IDEA Early Childhood Child Count, EDPass - IDEA Personnel, EDPass - IDEA Exiting, EDPass - IDEA Discipline, EMAPS - IDEA Part B Dispute Resolution Survey, EMAPS - IDEA Part B MOE Reduction and CEIS Survey. In addition, IDC has supported DDOE in developing Data Protocols for each indicator which include regulatory references, data stewards, data sources, data processes and timelines.

Data Privacy

-The DDOE values data transparency as well as security. DDOE complies with all federal and state data standards and laws, including the Family Educational Rights and Privacy Act (FERPA) in an effort to protect personally identifiable information (PII).

-While data used by DDOE and LEAs is comprehensive, data that can be used to uniquely identify a student that is presented to the public must be redacted, or masked, to avoid unintentionally identifying students. When reporting data to the public, redaction rules are strictly followed.

Describe how the State issues findings: by number of instances or by LEAs.

The DDOE issues letters of findings by LEA.

When an LEA is identified with noncompliance, a letter of findings is issued to the LEA, within 90 days of identification of noncompliance, with required corrective actions and timelines including correction of each instance of individual student noncompliance. DDOE provides technical assistance to all LEAs regarding the areas of noncompliance and provides targeted technical assistance directly to the LEA identified with noncompliance. After the LEA corrects all instances of individual student noncompliance, utilizing updated data, DDOE reviews each instance of individual student noncompliance to verify that each instance is 100% correct.

If the LEA was directed to develop a Corrective Action Plan, DDOE reviews the plan including a root cause analysis, provision of professional development for staff in the areas of noncompliance and improvement activities to address root causes, to verify that all improvement activities have been completed. Utilizing updated data, the DDOE reviews new randomly selected student records within the LEA identified with noncompliance, to verify systemic compliance and that the LEA is correctly implementing regulatory requirements under IDEA, within one year of notification of noncompliance.

If applicable, describe the adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction).

DDOE does not permit pre-finding correction.

Describe the State's system of graduated and progressive sanctions to ensure the correction of identified noncompliance and to address areas in need of improvement, used as necessary and consistent with IDEA Part B's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

Delaware has developed a continuum of incentives, corrections of identified noncompliance, and sanctions to improve results and outcomes for students with disabilities and to ensure compliance with IDEA. This continuum of actions shifts the emphasis from strictly punitive measures to recognizing progress toward improvement.

Incentives include awarding improvement toward meeting targets for compliance indicators in LEA Annual Determinations, celebrating and highlighting LEAs at Statewide Special Education Leadership meetings, Special Education Director County meetings as well as at other stakeholder meetings for meeting targets and for making marked improvement, providing opportunities for LEAs to share successful strategies and best practices at Statewide Special Education Leadership meetings, Special Education Director County meetings as well as at other stakeholder meetings, and recognizing LEA participation in State initiatives to improve outcomes for students with disabilities.

The DDOE has developed a Multi-Tiered System of Supervision and Accountability to ensure timely correction of noncompliance. When an LEA is identified with noncompliance, a letter of findings is issued to the LEA within 90 days of identification of noncompliance with required corrective actions and timelines including correction of each instance of individual student noncompliance. DDOE provides technical assistance to all LEAs regarding the areas of noncompliance and provides targeted technical assistance directly to the LEA identified with noncompliance. After the LEA corrects all instances of individual student noncompliance, utilizing updated data, DDOE reviews each instance of individual student noncompliance to verify that

each instance is 100% correct. In addition, the LEA may be required to develop and submit a Corrective Action Plan which includes review of policies/procedures/practices, data analysis, conducting a Root Cause Analysis, providing professional development for staff in the areas identified as noncompliant and improvement activities to address root causes. The DDOE reviews the Corrective Action Plan and required evidence to verify that all improvement activities have been completed. After all instances of individual student noncompliance are verified as corrected and professional development has been provided for staff, utilizing updated data, DDOE reviews new randomly selected student records, representative of disability categories, race/ethnicity categories, gender, grade/grade band and school, within the LEA identified with noncompliance, to verify systemic compliance and that the LEA is correctly implementing regulatory requirements under IDEA, within one year of notification of noncompliance. If continued noncompliance is identified, the LEA moves to Tier III which is also reflected in the LEA's Annual Determination.

In Tier III, the LEA and DDOE review data and develop an Intervention Plan with targeted interventions including correction of all instances of individual student noncompliance and timelines. The DDOE monitors the Intervention Plan to verify that all corrective actions have been completed. Sanctions may be imposed including directing or delaying of IDEA funds. If continued noncompliance is identified, the LEA moves to Tier IV. Continued noncompliance is also reflected in LEA Annual Determination criteria.

In Tier IV, the LEA enters into a Compliance Agreement with the DDOE which is also reflected in LEA Annual Determination criteria. Required corrective actions include correction of all instances of individual student noncompliance and timelines for submitting deliverables and status updates and may include required participation in professional development and/or technical assistance. Sanctions may be imposed including, but not limited to, directing, delaying or withholding of IDEA funds. DDOE monitors the status of the Compliance Agreement to ensure all requirements and corrective actions are completed.

Describe how the State makes annual determinations of LEA performance, including the criteria the State uses and the schedule for notifying LEAs of their determinations. If the determinations are made public, include a web link for the most recent determinations.

Delaware makes LEA Annual Determinations based on a combination of the following areas of compliance and results:

Compliance:

-Indicator 4B/Significant Discrepancy in the Rate of Long-Term Suspensions and Expulsions of Students with Disabilities by Race/Ethnicity and Noncompliant Policies, Procedures, and Practices

-Indicator 9/Disproportionate Representation of Race/Ethnic Groups Related to Identification

-Indicator 10/Disproportionate Representation of Race/Ethnic Groups in Disability Categories Related to Identification

-Indicator 11/Timely Initial Evaluations

-Indicator 12/Early Childhood Transition from Part C to Part B

-Indicator 13/Transition Planning in the IEP

-Timely/Accurate Data: Child Count Data, Exiting Data, Discipline Data, Maintenance of Effort, Excess Cost, Focused Monitoring, CEIS/CCEIS

-Additional Relevant Audit Findings: Cyclical Monitoring of Special Education Records, Cyclical Fiscal Monitoring, Single Audit/Delaware Division of Accounting

Results:

-Indicator 1/Graduate Rate

-Indicator 2/Drop-Out Rate

-Indicator 3A/Participation Rate for Children with IEPs in the State Assessment

-Indicator 3B/Proficiency Rate for Children with IEPs against Grade Level Academic Achievement Standards

-Indicator 3C/Proficiency Rate for Children with IEPS against Grade Level Modified and Alternate Academic Achievement Standards

-Indicator 4A/Significant Discrepancy in the Rate of Long-Term Suspension and Expulsions of Students with Disabilities

-Indicator 5/Education Environments (Children 5-21)

-Indicator 6/Preschool Environments (Children 3-5)

-Indicator 7/Early Childhood Outcomes: Positive Social-Emotional Skills, Acquisition and Use of Knowledge and Skills, and Use of Appropriate Behaviors

The DDOE considers continued/outstanding noncompliance when making final LEA Annual Determinations. LEA Annual Determinations are based on the following criteria:

-Meets Requirements: >/=80% (compliance and results combined)

-Needs Assistance: 60% to 79% (compliance and results combined) and/or LEA is engaged in Tier III Targeted Monitoring and/or outstanding noncompliance beyond 1 year

-Needs Intervention: <59% (compliance and results combined) and/or LEA is Needs Assistance for 2 consecutive years and/or LEA is engaged in Tier IV Intensive Monitoring and/or outstanding noncompliance beyond 2 years

-Needs Substantial Intervention: LEA in Needs Intervention for 3 or more consecutive years

LEAs are provided with a letter including an overview of the “IDEA General Supervision & Reporting Requirements”, an explanation of how LEA Annual Determination is calculated, the LEA’s Annual Determination based on identified compliance and results indicators, DDOE’s analysis of reported data for each indicator (1-14), and Business Rules used to determine the LEA’s status in meeting targets (1-14). Each LEA’s Annual Determination is publicly posted, per redaction rules, no later than 120 days following the submission of the SPP/APR to OSEP along with Business Rules and Redaction Rules.

https://education.delaware.gov/educators/academic-support/instructional-support/special-education/idea-part-b-compliance/

Results Indicators

All LEAs are monitored annually for Indicator 1/Graduation Rate, Indicator 2/Dropout Rate, Indicator 3/Participation and Performance on the State Assessment, Indicator 4A/Significant Discrepancy/Suspension and Expulsion, Indicator 5/Least Restrictive Environment, Indicator 6/Preschool Settings, and Indicator 7/Early Childhood Outcomes.

Over the past 2 years, OSEP funded IDC has worked with DDOE and ECR staff to inform our processes, strengthen our Multi-Tiered System for and ensure IDEA requirements are met. IDC's support included providing feedback on current policies/procedures/practices, improving Tier criteria, and designing and facilitating virtual and in-person data retreats for LEAs.

Tier I - Meets Requirements: LEA invited to attend a data retreat to focus on indicators the LEA chooses to target for improvement. Resources are provided for improvement planning. ECR Liaison meets monthly with LEA to review progress, celebrate successes and problem solve around challenges.

Tier II – Needs Assistance/Yr 1: LEA invited to attend a data retreat and required to develop a Continuous Improvement Plan and meet regularly with ECR Liaison to review progress, celebrate successes and problem solve around challenges.

Tier II – Needs Assistance/Yr 2: LEA required to attend a data retreat and develop a Continuous Improvement Plan including improvement strategies/family engagement activities, regular education/special education staff required to attend statewide professional learning focusing on Multi-Tiered Systems of Supports (MTSS) for academics and behavior/social-emotional, and LEA required to meet regularly with ECR Liaison to review progress, celebrate successes and problem solve around challenges. If an LEA continues in Need Assistance for 2 consecutive years, they move to Needs Intervention.

Tier III – Needs Intervention/Years 1 and 2: LEA required to attend two-day data retreat and develop a Continuous Improvement Plan including improvement strategies/family engagement activities, regular education/special education staff required to attend statewide professional learning focusing on MTSS for academics and behavior/social-emotional and develop a plan for disseminating information to staff, LEA required to meet regularly with staff implementing improvement strategies, and meet regularly with ECR Liaison to review progress, celebrate successes and problem solve around challenges. Sanctions may be imposed including directing of IDEA funds, in whole or in part.

Tier III – Needs Intervention/Year 3: LEA required to attend two-day data retreat and develop a Continuous Improvement Plan including improvement strategies/family engagement activities, regular education/special education staff required to attend statewide professional learning focusing on MTSS for academics and behavior/social-emotional and develop a plan for disseminating information to staff, LEA required to meet regularly with staff implementing improvement strategies/submit schedule, and required to meet monthly with ECR Liaison to review progress, celebrate successes and problem solve around challenges. Sanctions may be imposed including directing or delaying of IDEA funds, in whole or in part. If an LEA continues in Needs Intervention for 3 consecutive years, they move to Needs Substantial Intervention.

Tier IV – Needs Substantial Intervention: LEA required to attend two-day data retreat and develop a Continuous Improvement Plan including improvement strategies/family engagement activities, regular education/special education staff required to attend statewide professional learning focusing on MTSS for academics and behavior/social-emotional and develop a plan for disseminating information to staff, LEA required to meet regularly with staff implementing improvement strategies/submit schedule, and required to meet monthly with ECR Liaison to review progress, celebrate successes and problem solve around challenges. Sanctions may be imposed including delay or withholding of IDEA funds, in whole or in part.

In accordance with OSEP guidance, during a disaster/pandemic (e.g., human-made, health related, or natural) the DDOE will continue to issue LEA Annual Determinations and ensure the requirements of IDEA Part B are met under 34 C.F.R. § 300.149 (SEA responsibility for general supervision) and ensure the implementation of IDEA Part B. The DDOE will consider the impact of the disaster in making determinations and may consider a variety of factors when determining any enforcement actions.

Provide the web link to information about the State's general supervision policies, procedures, and process that is made available to the public.

The Delaware Administrative Code is considered the State's Special Education Policies and Procedures.

https://education.delaware.gov/legacy/wp-content/uploads/sites/4/2026/01/Delaware-Policies-Governing-Services-for-Children-with-Disabilities1-26-26.pdf

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 DDOE has developed a comprehensive technical assistance framework that moves beyond short-term, episodic training and support to a community of practice that is sustainable and builds LEA capacity to improve results for students with disabilities. The DDOE engages in an analysis of state-level, as well as LEA level data, and in meaningful discussions with LEA leadership to identify LEAs in need of technical assistance.

Following are examples of Technical Assistance provided:

ECR LEA Liaison

-ECR staff serve as liaison to individual LEAs to provide technical assistance and support on a daily basis. This includes, but is not limited to, monthly check-in meetings with the LEA Special Education Director to engaging in discussions around data analysis and improvement activities, and celebrate successes and problem solve around concerns, serve as lead for Focused Monitoring activities (identification of compliance/noncompliance, verification of correction of individual student noncompliance, verification of systemic compliance), review and approval of LEA IDEA Subgrant Applications, and review of LEA Annual Determination with the LEA and supporting the LEA's Continuous Improvement Planning Process. Technical assistance is provided through a variety of formats including individual conversations, peer to peer discussions, group training, on-site/online coaching, and consultation.

ECR Cross-DDOE Liaison

-ECR staff serve as liaisons to work groups across DDOE to align professional development, technical assistance and resources. Cross-DDOE collaboration includes, but is not limited to, Office of Equity and Innovation, Office of Assessment and Accountability, Office of Career and Technical Education, Office of Educator Excellence, Office of Curriculum, Instruction, Professional Development, Office of Title Programs, Office of Early Childhood Intervention, Charter School Office, Office of Licensure and Certification Professional Standards, Office of School Support Services, Office of World Language, and Office of Technology and Data. ECR has engaged in ongoing work with the Office of School Supports to align the LEA Annual Determination Continuous Improvement Planning Process with CSI and TSI requirements.

Special Education Director Meetings

-ECR meets with district Special Education Directors by county and with charter school Special Education Directors statewide throughout each school year. These meetings provide opportunities for deep and robust discussions and collaboration. Agenda items include, but are not limited to IDEA regulations, procedural safeguards, policies, procedures, and practices, legislative updates, policy issues, State Performance Plan/Annual Performance

Report, LEA Annual Determination, fiscal updates/requirements, Delaware's IDEA grant application, monitoring activities, updates from agency providers, other current issues in special education both national and those specific to Delaware as well as topics identified by the directors. In addition, ECR engages the directors in work around specific SPP/APR indicators including data analysis, discussions around targets and improvement activities and evaluation of progress.

Statewide Special Education Leadership Meetings

-Special Education Leadership meetings are held throughout each school year. Participants include LEA staff, state agencies, parents, parent advocates, PIC, GACEC, and other stakeholders across the state. Agenda items include IDEA regulations, procedural safeguards, policies, procedures, and practices, legislative updates, policy issues, State Performance Plan/Annual Performance Report, LEA Annual Determinations, fiscal updates/requirements, Delaware's IDEA grant application, updates from agency providers and other current issues in special education both national and those specific to Delaware.

State Performance Plan/Annual Performance Report

-Technical assistance is provided to individual LEAs around SPP/APR indicators to support LEAs with improving outcomes for students with disabilities.

-Technical assistance is provided through a variety of formats including individual conversations, peer to peer discussions, group training, on-site/online coaching, and consultation.

-Timely Evaluations: ECR continues to provide technical assistance to LEAs regarding implementation of initial evaluation times. Resources have been developed and provided for LEAs to increase accuracy and fidelity of data entry and data analysis including guidance documents, webinars, and training. ECR has also established an Evaluation/Eligibility Professional Learning Community to provide ongoing technical assistance relating to Child Find and identification.

-Least Restrictive Environment: ECR has partnered across work groups at the DDOE to develop and provide guidance documents for LEAs on selecting and implementing high quality instructional materials and high-quality professional learning to ensure fidelity of Tier I instruction. "Parents are the Key", has also been developed by DDOE/PIC and contains information about least restrictive environments and educational placements for families. This document can be accessed on both the DDOE and PIC websites.

-Parent Engagement: ECR has created a parent flyer to promote response to the Parent Engagement Survey. ECR has also collaborated with PIC to create an informational video to inform families about survey, and its importance. Both the flyer and video have been distributed to LEA Special Education Directors to be shared with families including social media and posting on the LEA website.

-Transition: ECR meets monthly with parents, students, LEA staff, state agencies and cross-DDOE groups from Higher Education and Career/Technical Education to engage in data analysis and review of improvement activities around graduation rate, dropout rate, transition planning and post-school outcomes.

LEA Annual Determinations

-Technical assistance is provided to individual LEAs to review SPP/APR indicator targets met and not met and to support the LEA with data analysis, root cause analysis, improvement strategies and completion of any required corrective action(s).

-Technical assistance is provided through a variety of formats including individual conversations, peer to peer discussions, group training, on-site/online coaching, and consultation.

-IDC has also provided technical assistance and support directly to LEAs during the virtual and in-person data retreates.

Timely & Accurate Data

-To ensure data submitted by LEAs is accurate, valid and reliable, the DDOE provides the following supports: calendar of data submission due dates along with email reminders, training for all users of data applications, manuals detailing data systems, data entry, timelines, etc., ongoing technical assistance by Part B Data Manager and ECR staff at LEA Special Education Director meetings and for individual LEAs/LEA Data Managers, ECR staff regularly engages LEAs and other stakeholder groups in data analysis related to individual SPP/APR indicators to inform targets, review/identify improvement activities and evaluate progress.

Fiscal

-Training and technical assistance is provided annually for all LEAs regarding the IDEA Subgrant Application Process.

-Guidance documents are provided detailing the online grant management system, allowable costs, Proportionate Share, CEIS/CCEIS, Equitable Services, and EDGAR and the monitoring process for use of IDEA funds.

-ECR provides technical assistance to LEA Chief Financial Officers to ensure understanding of IDEA requirements and the fiscal monitoring process.

-ECR provides technical assistance and guidance documents regarding the High-Cost Subgrant application process.

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 DDOE has developed a comprehensive professional development system that moves beyond short-term, episodic training to a community of practice that is sustainable and builds LEA capacity to improve results for students with disabilities. The system focuses on implementation of a Multi-tiered System of Support for both academic and behavioral/social/emotional supports.

DDOE's approach to professional learning is focused on strengthening multi-tiered systems of support at the district/systems and school levels, responsive to the needs of district and school staff, seamlessly aligned with Delaware's ESSA Plan and state and district initiatives/priorities. ECR staff serve as liaisons to work groups across DDOE to align professional development and resources. Cross-DDOE collaboration includes, but is not limited to, Office of Equity and Innovation, Office of Assessment and Accountability, Office of Career and Technical Education, Office of Educator Excellence, Office of Curriculum, Instruction, Professional Development, Office of Title Programs, Office of Early Childhood Intervention, Charter School Office, Office of Licensure and Certification Professional Standards, Office of School Support Services, Office of World Language, and Office of Technology and Data. DDOE engages in ongoing data analysis and evaluation of all professional development and coaching to ensure fidelity of implementation of evidenced-based strategies and attainment of measurable outcomes. The DDOE engages in an analysis of state-level, as well as LEA level data and in meaningful discussions with LEA leadership to identify LEAs in need of professional development. Once identified, the LEA and the DDOE enter into a Memorandum of Understanding, which outlines the roles and responsibilities of both the LEA and the Department. Professional Development is provided through a variety of formats including group training, on-site/online coaching, and consultation.

Following are examples of the professional development and coaching provided:

-Integrated MTSS: ECR continues to facilitate and collaborate across the DDOE to support efforts around MTSS for both academics and non-academics, including Mental Health Literacy, through universal and targeted tiered supports. Professional learning/coaching/dissemination of resources are provided to LEAs and families. In addition, the DDOE's work around MTSS aligns with the State's State Systemic Improvement Plan to improve third grade literacy.

-Implicit Bias and Restorative Practice: ECR has contracted with a national expert, Eddie Fergus, to provide coaching for the DDOE and LEAs around addressing implicit bias. Coaching and professional learning focuses on analyzing discipline policies, procedures and practices to identify strategies and alternatives to suspension.

-Systematic Processes for Enhancing and Assessing Communication Supports (SPEACS): The SPEACS initiative collaborates with educators to create communication rich classrooms through research-based literacy strategies for students with the most significant disabilities. SPEACS provides professional learning and coaching on literacy and communication strategies to teams of educators. Support is tailored to each educator team through the use of observations, modeling, online learning, experiences, book studies, lesson studies and technical assistance.

-Universal Design for Learning (UDL): Focus on universal design, differentiated instructional and engagement strategies to support the rigor of the Delaware State Standards. LEAs participate in a UDL Community of Practice to collaborate with other Delaware schools focusing on implementation of UDL and to proactively remove barriers to ensure student learning and cultivate expert learners. Participating LEAs engage in a multi-year collaboration with the DDOE to improve systems and practices that support effective teaching strategies to improve student learning. Professional learning is provided through professional learning communities and coaching sessions with a focus on instructional planning, includes coaching sessions, modeling of instructional strategies, and facilitation of teacher self-reflection.

-Career Pathways: ECR continues to work with groups across the DDOE around Delaware Career Pathways System to support LEAs with engaging students in transition planning activities which in turn increase graduation rate, decrease dropout rate and increase post-school outcomes. Ongoing professional development and technical assistance are provided to LEAs focusing on the following: Education: Rigorous career pathways for all students, across key industry sectors, to ensure students earn early college credit and industry recognized credentials; Experience: Meaningful work experiences and opportunities for career coaching, provided by a network of engaged employers, to ensure students' skills have value in the marketplace; Support: Connected services across partnering state agencies and community organizations, to ensure all youth are able to realize their postsecondary identifies

-Optimizing World Language Learning for All: ECR partnered with the DDOE World Language Work Group to provide an opportunity for LEAs to receive a grant which provides funding and guided professional learning to LEA teams in how to plan for and design their curriculum based on a framework for inclusive language learning. Professional learning incudes essential structures needed for students to be successful in learning a new language, maintaining a culturally responsive education mindset that intentionally acknowledges/values the diversity, contributions and experiences of every learner, and instructional strategies that address each student's levels of readiness, interest and learning profile.

-Educational Benefit Review Project: ECR has established the Educational Benefit Review Project which introduces a systemic approach to reviewing students' IEPs across three consecutive years. LEAs engage in self-reflective protocols to determine whether the design of the IEP was reasonably calculated for the student to receive meaningful educational benefit. This analysis allows the LEA to determine identify areas in need of targeted professional learning for staff.

-Delaware IEP Initiative: This initiative focuses on empowering teams to engage in a four phased approach to IEP development and implementation: Data-Based Decision-Making; Phase 2/Identifying Strengths/Needs/Barriers; Phase 3/Adapting the General Education Curriculum; and Phase 4/Implementing Specially Designed Instruction focuses on how intentionally aligned adaptations and specially designed instruction allow for enhanced access to general education competencies and grade-level skills.

-Dispute Resolution: ECR has contracted with national expert, Perry Zirkel, Esquire, to provide professional development for LEAs around topics such as Systematic Comparison of Due Process Hearing and State Complaints, Compensatory Education (Recovery) Services, National Update of Court Decisions, and Recent Trends in Frequency and Outcomes of Hearing Officer and State Complaint Decisions: Delaware and National.

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 DDOE embraces authentic stakeholder engagement and utilizes Leading by Convening principles to deepen levels of interactions among stakeholders:

-Informing (sharing information with others who care about the issue)

-Networking (asking others what they think about the issue and listening to what they say)

-Collaborating (engaging people in trying to do something by working together about the issue)

-Transforming (doing things The Partnership Way: leading by convening, cross-stakeholder engagement, shared leadership, and consensus building).

All stakeholder groups include parents and educators in various roles throughout the state along with representatives from the GACEC and PIC.

The DDOE regularly meets with stakeholders to build capacity by engaging in data analysis and discuss around targets, improvement activities, evaluating progress and obtain input/feedback. Stakeholder groups include, but are not limited to, the following including the ECR lead:

-Statewide Transition Cadre: Kathi Stephan (kathleen.stephan@doe.k12.de.us)

-MTSS Cadre: Susan Veenema (susan.veenema@doe.k12.de.us)

-Access to the General Education Curriculum Committee: Joyce Leatherbury (joyce.leatherbury@doe.k12.de.us)

-Early Childhood Inclusion Committee: Jeri Turner (Jeri.turner@doe.k12.de.us)

-Statewide Special Education Leadership: Dale Matusevich (dale.matusevich@doe.k12.de.us)

-Visual Impairment Collaborative: Barbara Mazza (barbara.mazza@doe.k12.de.us)

-Evaluation and Eligibility Professional Learning Community: Maria Locuniak (maria.locuniak@doe.k12.de.us)

To develop Delaware's State Performance Plan in FFY 2020, the DDOE engaged stakeholders in the process of analyzing statewide data, data trends, setting targets, and identifying improvement strategies and activities to improve outcomes for students with disabilities. DDOE utilized the Delaware Stakeholder Engagement Analysis Tool to ensure all demographics were addressed when inviting stakeholders (e.g.: race/ethnicity/ geographic locations/disability categories/advocacy groups/advisory groups/parents/families/etc.). 59 individual indicator stakeholder meetings took place that included sharing data, rich discussions regarding data analysis, target setting and improvement strategies.

During monthly meetings with GACEC as a whole council, as well as with council subcommittees, DDOE engaged with the council in data analysis and discussion of improvement activities around individual indicators. In addition, individual members represent GACEC on each specific indicator stakeholder committee(s). DDOE also presented to and engaged all stakeholders/parents from the GACEC in discussion on indicator data analysis, input/feedback on target setting, and input/feedback on improvement activities and provided GACEC an additional opportunity to ask questions/provide input during an evening Q and A session designed specifically for them after which the GACEC provided DDOE with written input.

Presentations, data analysis, target setting discussions and improvement activities also took place at all Statewide Special Education Leadership meetings and County LEA Special Education Director meetings. In addition, PIC provided support and strategies to increase the breadth of representation and depth of interactions including the development of parent friendly fact sheets for each SPP/APR indicator, share information with all 42 LEA Parent Councils for Special Education, and sharing information with PIC's parent distribution list of over 5,000 families. In addition, PIC utilized their social media platform to invite all parents to engage in Lunch and Learn Facebook Live sessions, where DDOE presented their indicator information, engaged in a data analysis discussion, presented target proposals and improvement strategies and obtained input. These sessions were scheduled both during the day and in the evening to ensure further opportunities for parent participation. In addition, DDOE created individual indicator surveys to gather further input from parent stakeholders which was communicated during the "Lunch and Learn" sessions. Both the one-page fact sheets and surveys were translated from English into Spanish and Haitian Creole to reach a wide range of families. To centralize all this information and to gain even further public input, DDOE created an IDEA SPP/APR webpage which contains the one-page fact sheets for each indicator, a live link for individual surveys to gain additional input/feedback, the power point presentation used during stakeholder presentations and a copy of the previous SPP/APR, for reference.

DDOE utilized social media, such as the DDOE Facebook Page, to share this information statewide, in addition to posting info and live links in the Principals' Weekly Newsletter. To support this effort, PIC created a similar webpage which links to DDOE's webpage.

Number of stakeholders who received information through social media and websites: 30,902

Number of stakeholders who engaged with information through social media and websites: 1,035

Number of stakeholders who provided input/feedback and engaged in activities through completing surveys and participating in meetings: 1,191

DDOE continues to meet regularly with stakeholders to build capacity and deepen knowledge and understanding of each indicator resulting in rich discussions around data, targets, progress, and evaluation of improvement activities. Stakeholders include, but are not limited to, LEA staff, state agencies, parents, community members, GACEC, and cross-DDOE staff. Stakeholders are engaged through medium such as in-person meetings, virtual meetings, lunch and leans, and newsletters.

For FFY 2024, 3,915 stakeholders participated across all indicators. Of the 3,915, 432 were parents.

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

NO

Number of Parent Members:

432

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 DDOE embraces authentic stakeholder engagement and utilizes Leading by Convening principles to deepen levels of interactions amount stakeholders:

-Informing (sharing information with others who care about the issue)

-Networking (asking others what they think about the issue and listening to what they say)

-Collaborating (engaging people in trying to do something by working together about the issue)

-Transforming (doing things The Partnership Way: leading by convening, cross-stakeholder engagement, shared leadership, and consensus building).

State Advisory Panel

In accordance with IDEA, the Governor's Advisory Council for Exceptional Citizens (GACEC) serves as the State Advisory Panel to act in an advisory capacity to the State Board of Education and other state agencies on the needs of exceptional citizens. The role of the GACEC, as defined in IDEA is: -Advise the DDOE of unmet needs within the state in the education of children with disabilities;

-Comment publicly on any rules or regulations proposed for issuance by the state regarding the education of children with disabilities and the procedures for distribution of funds; and

-Assist the DDOE in developing and reporting data and evaluations as may assist the Secretary under Section 618.

The Director of ECR attends GACEC monthly meetings during which policies, procedures and practices updates are shared and input/feedback is provided by council members. ECR staff also meets with the whole council as well as with council subcommittees to engage in data analysis and discuss around targets, improvement activities and evaluating progress. Input/feedback is provided by the council during meetings as well as through other means such as written communication. In addition, ECR provides opportunities for GACEC to engage and provide input/feedback related to policies, procedures and practices such as the Multi-Tiered System of Supervision and Accountability, LEA Annual Determination, and the Continuous Improvement Planning process. GACEC includes parent representation which provides opportunities for parent engagement and feedback. Council members also serve on stakeholder groups related to SPP/APR indicators and other topic specific stakeholder groups.

Parent Training and Information Center

In accordance with IDEA, the Parent Information Center (PIC) of Delaware serves as Delaware's Parent Training and Information Center to provide information and support to parents with disabilities to help them access appropriate educational services for their children. The DDOE has built a strong relationship with PIC to advance engagement with parents and families and to build their capacity around educating students with disabilities. Through this collaborative partnership, parent engagement activities include, but are not limited to, Lunch and Learn sessions related to SPP/APR indicators, support for LEA Parent Councils for Special Education, PIC Professional Development Day for families, development of parent friendly resources to increase response rate for the Indicator 8 Parent Survey and supporting individual parents with questions and/or concerns. Resources and documents are provided in multiple languages and through multiple mediums.

Parent Mentor Program

DDOE has partnered with PIC to establish a Parent Mentor Program. This initiative funded in part, by the Delaware Department of Education and facilitated by Parent Information Center of Delaware will provide comprehensive training for parents and stakeholders in special education and advocacy. The program is designed to train parents with lived experience to become leaders by helping other families secure more effective services supports, and to promote systems change children and families through creating agreement among families, professionals, and other system stakeholders. Graduates of the program will serve as trained parent advocates available to provide peer support to families statewide.

Activities to Improve Outcomes for Children with Disabilities:

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

The DDOE has built a strong relationship with PIC to advance engagement with parents and families and to build their capacity around educating students with disabilities. Through this collaborative partnership, parent engagement activities include, but are not limited to, Lunch and Learn sessions related to SPP/APR indicators, support for LEA Parent Councils for Special Education, PIC Professional Development Day for families, development of parent friendly resources to increase response rate for the Indicator 8 Parent Survey and supporting individual parents with questions and/or concerns. Resources and documents are provided in multiple languages and through multiple mediums.

In addition, parents are represented on all stakeholder groups in various roles. DDOE continues to work collaboratively with LEAs, PIC, GACEC and others to increase parent engagement and build capacity around data analysis, target setting, and improvement strategies and to broaden the reach to underrepresented families.

Soliciting Public Input:

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

To gain public input regarding target setting, data analysis, improvement strategies and evaluating progress, ECR created an IDEA APR webpage which contained one-page fact sheets for each indicator, a live link for individual surveys to gain additional input/feedback, the power point presentation used during stakeholder presentations and a copy of the previous APR, for reference. The webpage was open for public input from December 10, 2021 through January 28, 2022. DDOE communicated the request for public input through an announcement on the DDOE website and social media including multiple informational posts on Facebook and Twitter. Both the one-page fact sheets and surveys were translated from English into Spanish and Haitian Creole to reach a wide range of families. DDOE utilized social media, such as the DDOE Facebook Page, to share this information statewide, in addition to posting info and live links in the Principals' Weekly Newsletter. To support this effort, Parent Information Center created a similar webpage which links to DDOE's webpage.

In addition, public meetings are held annually in each county to gain public input into and to inform the development of Delaware's IDEA grant application including identifying targeted areas, improvement strategies and allocation of IDEA funds.

The DDOE continues to engage with the public through stakeholder groups, social media and other special interest groups.

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.

Delaware's IDEA Annual Determination along with Delaware's State Performance Plan/Annual Performance Report is posted on the DDOE website to provide the public stakeholders and the public with the results of target setting, data analysis, development of improvement strategies, and evaluation of progress.

https://education.delaware.gov/educators/academic-support/instructional-support/special-education/idea-part-b-compliance/

As soon as the FFY 2024 IDEA Part B State Performance Plan/Annual Performance Report is posted by OSEP, it will be posted on the Delaware Department of Education website.

Reporting to the Public

How and where the State reported to the public on the FFY 2023 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 2023 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 2023 APR in 2025, is available.

Each LEA's Annual Determination, including an overview of the "IDEA General Supervision & Reporting Requirements", an explanation of how LEA Annual Determination is calculated, the LEA's Annual Determination based on identified compliance and results indicators, DDOE's analysis of reported data for each indicator (1-14), and Business Rules used to determine the LEA's status in meeting targets (1-14) is publicly posted, per redaction rules, no later than 120 days following the submission of the SPP/APR to OSEP. Redaction Rules are also posted for public reference.

https://education.delaware.gov/educators/academic-support/instructional-support/special-education/idea-part-b-compliance/

Intro - Prior FFY Required Actions

The State's IDEA Part B determination for both 2024 and 2025 is Needs Assistance. In the State's 2025 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 2024 SPP/APR submission, due February 1, 2026, 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.

Response to actions required in FFY 2023 SPP/APR

In order to accomplish a multi-tiered system of accountability to improve results for children and ensure compliance with IDEA, OSEP identified Delaware as Needs Assistance and has provided Delaware with TA supports and resources through OSEP funded TA Centers such as the National Center for Systemic Improvement (NCSI), the IDEA Data Center (IDC), the Center for IDEA Fiscal Reporting (CIFR), the National Technical Assistance Center on Transition: The Collaborative (NTACT:C), Early Childhood TA Center and Early Childhood Data Center (DaSy), Center for Appropriate Dispute Resolution in Special Education's (CADRE) Written State Complaint Intensive Technical Assistance Workgroup.

ECR greatly appreciates all the technical assistance and support that OSEP has provided. Each TA Center has provided a wealth of experience and expertise in their respective areas and worked side-by-side with us to develop policies, procedures, practices and systems to improve results for our students with disabilities.

IDEA Data Center (IDC): To address timely and accurate state reported data, the DDOE enlisted the support of IDC to develop and strengthen policies and procedures using the protocols from the Part B IDEA 618 Data Processes Toolkit. These protocols include the processes and timelines that guide our work around each individual indicator. In addition, IDC has provided technical assistance to strengthen our multi-tiered system for both compliance and results including development of processes, tools and resources and facilitating data retreats to support both the DDOE as well as LEAs. ECR staff continues to participate in IDC's SPP/APR Data Quality Peer Group, IDC webinars, attend in-person convenings, and looks forward to participating in the Indicator 18 Data Quality Peer Group and Stakeholder Cadre. IDC's podcasts and newsletters are also a great support. Staff from IDC are extremely responsive and go above and beyond to tailor their technical assistance to our needs.

Center for IDEA Fiscal Reporting (CIFR): DDOE has received support from the Center for IDEA Fiscal Reporting (CIFR) to develop a new workbook for MOE, Excess Costs calculations under IDEA and improve the consolidated grant process including allocations. In addition, CIFR staff has provided feedback to support the DDOE with developing and refining fiscal policies/procedures, enhancing the High-Cost Funds application process and with strengthening fiscal monitoring practices. DDOE staff continues to participate in CIFR's New IDEA State Fiscal Staff CoP, CIFR Problem of Practice CoP, CIFR Fiscal Timeline Community of Practice, CIFR's Cashing In On Compliance, CIFR webinars on specific topics and attend in-person convenings. Again, staff from CIFR are extremely responsive to all our technical assistance needs.

The National Center for Systemic Improvement (NCSI): In prior years, NCSI has been an integral part in the development of Delaware's IDEA State Systemic Improvement Plan and the establishment of the Delaware Early Literacy Initiative to improve results for students with disabilities. DDOE has utilized NCSI's support to strengthen the Continuous Improvement Process for LEAs to address the results of their Annual Determinations. ECR staff participated in the NCSI/IDC Summer Learning Series on General Supervision and the SPP/APR and continue to participate in NCSI's General Supervision Collaborative, NSCI's DMS SIG-Cohort 3, Staff are also engaged in SEAL, a group supporting State Directors of Special Ed, and Significant Disproportionality Peer to Peer Group and Results Driven Accountability Learning Collaborative. ECR also participates in the NCSI DMS SIG-Cohorts 3, 4, 5 group. Staff from NCSI provide numerous supports to Delaware throughout the year regarding all indicators.

Delaware receives technical assistance from the National Alliance for Partnerships in Equity (NAPE) through the DDOE's PIPEline for Career Success for Students with Disabilities (PIPEline). NAPE's Program Improvement Process for Equity™ (PIPE) has been successfully implemented with school districts across the country to close gender gaps in CTE career pathways leading to nontraditional career fields. PIPE engages teams of educators, community members, and other stakeholders to: use data to conduct a performance and participation gap analysis; learn about the research literature on root causes for these gaps; conduct action research to identify the root causes in play at their institution; select and implement an aligned intervention that directly addresses the identified root causes; and evaluate their success. This iterative process is being applied to the context of SWD to increase the enrollment, matriculation, graduation, and transition to postsecondary education and competitive employment of SWD through CTE career pathways. A team of subject matter experts and instructional designers are modifying the PIPEline curriculum and tools and creating new tools in the context of SWDs. DDOE is currently implementing this process in Delaware schools to implement the PIPEline to Career Success for Students with Disabilities (PIPEline) project, to determine its efficacy, and to inform modifications or refinements.

NTACT:C has provided support to the DDOE with TA around Indicators 1, 2, 13 and 14 through emails, phone calls, face to face and virtual meetings, informational resources, and guidance for moving from compliance to best practice. Delaware participated in the NTACT State Capacity Building Institute and Delaware continues to be one of the states who receives intensive technical assistance with secondary transition. DDOE then provides support and TA to LEAs to improve results and compliance in this area. Delaware Transition Team also engages with the National Technical Assistance Center on Transition: Collaborative (NTACT:C): Alternative Diploma Workgroup, Service Delivery Solutions Peer Network, SPED/CTE/VR Peer Network, Complex Support Needs Community of Practice, Center for Advancing Policy on Employment for Youth (CAPE-Youth), Transition Indicator group and National Center for Systemic Improvement (NCIS) for support.

Delaware is a member of the Center for Appropriate Dispute Resolution in Special Education's (CADRE) Written State Complaint Intensive Technical Assistance Workgroup. Delaware was one of nine states selected to participate in this intensive technical assistance. Delaware has completed a self-assessment, engaged in a two-day workshop completed a logic model, provides quarterly progress reports, engages in quarterly workgroup calls, networking, and resource sharing, and accessing individual state technical assistance as needed.

Delaware takes part in all monthly support meetings with our OSEP liaison. Delaware wants to thank OSEP for the opportunities of all valuable and productive technical assistance. This support is certainly assisting Delaware in improving outcomes for students with disabilities.

Intro - OSEP Response

The State's determinations for both 2024 and 2025 were Needs Assistance. Pursuant to Section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 20, 2025 determination letter informed the State that it must report with its FFY 2024 SPP/APR submission, due February 2, 2026, 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. The State provided the required information.

Intro - Required Actions

The State's IDEA Part B determination for both 2025 and 2026 is Needs Assistance. In the State's 2026 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 2025 SPP/APR submission, due February 1, 2027, 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.

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 2024 SPP/APR, use data from 2023-2024), 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	80.62%

FFY	2019	2020	2021	2022	2023
Target >=	68.50%	80.62%	81.12%	81.62%	82.12%
Data	73.34%	80.62%	80.97%	80.31%	81.82%

Targets

FFY	2024	2025
Target >=	82.62%	83.12%

Targets: Description of Stakeholder Input

To develop Delaware’s State Performance Plan in FFY2020, and in cooperation with Parent Information Center (PIC), DDOE developed one-page, parent friendly fact sheets for each SPP/APR indicator and partnered with PIC to share with all 42 Local Education Agencies (LEA) Parent Councils for Special Education, and to the PIC parent distribution list of over 5,000 families. PIC utilized their social media platform to invite all parents to engage in Lunch and Learn Facebook Live sessions, where the Exceptional Children’s Resource (ECR) presented their indicator information, engaged in a data analysis discussion, presented target proposals and improvement strategies. These sessions were scheduled both during the day and in the evening to ensure further opportunities for parent participation. In addition, ECR staff created individual indicator surveys to gather further input from parent stakeholders which was communicated during the "Lunch and Learn" sessions. Both the one-page fact sheets and surveys were translated from English into Spanish and Haitian Creole to reach a wide range of families. To centralize all this information and to gain even further public input, ECR created an IDEA SPP/APR webpage which contains the one-page fact sheets for each indicator, a live link for individual surveys to gain additional input/feedback, the power point presentation used during stakeholder presentations and a copy of the previous SPP/APR, for reference. DDOE utilized social media, such as the DDOE Facebook Page, to share this information statewide, in addition to posting info and live links in the Principals' Weekly Newsletter. To support this effort, PIC created a similar webpage which links to DDOE’s webpage.

To support the Informing stage of Leading by Convening, DDOE collected data to support the efforts on increasing the appropriate breadth of representation and depth of interactions from stakeholders through social media and websites. In addition, DDOE collected data on Networking, Collaborating and Transforming efforts.

Number of stakeholders who were reached by DDOE/PIC through Informing on social media and websites: 30,902

Number of stakeholders who were engaged by DDOE/PIC by Informing on social media and websites: 1,035

Number of stakeholders who were engaged with DDOE/PIC by Networking, Collaborating and Transforming through completing surveys and participating in meetings: 1,191

For Indicator 1, 15 stakeholder meetings were held which include Statewide Transition Cadre, ,NTACT:C Leadership Group at Capacity Building Institute, Lunch & Learn sessions in collaboration with Parent Information Center of Delaware, Division for Visual Impairments Vocational Rehab Advisory Council, Developmental Disabilities Council, Employment First Commission, Governor’s Advisory Council for Exceptional Citizens (GACEC) (IDEA State Advisory Panel), GACEC Transition Advisory Group, and LEA Special Education Directors.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,284
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	62
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	2
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	123

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
1,284	1,471	81.82%	82.62%	87.29%	Met target	No Slippage

Graduation Conditions

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

Delaware Graduation information can be found within:

Delaware Regulations: Administrative Code : Title 14

500 Curriculum and Instruction

505 High School Graduation Requirements and Diplomas

505.5 Credit Requirements for State of Delaware Diploma - Beginning with the Graduation Class of 2019 (Freshman Class of 2015-2016)

5.1 Beginning with the graduating class of 2019, a public school student shall be granted a State of Delaware Diploma when such student has successfully completed a minimum of twenty-four (24) credits to graduate including: four (4) credits in English Language Arts, four (4) credits in Mathematics, three (3) credits in Science, three (3) credits in Social Studies, two (2) credits in a World Language, one (1) credit in Physical Education, one-half (1/2) credit in Health Education, three (3) credits in a Career Pathway, and three and one-half (3 ½) credits in elective courses.

5.1.1 The student shall earn credit upon completion of Mathematics course work that includes no less than the equivalent of the traditional requirements of Geometry, Algebra I and Algebra II courses. The student shall complete an Algebra II or Integrated Mathematics III course as one of the mathematics credits.

5.1.2 Scientific investigations related to the State Science Standards shall be included in all three (3) Science course requirements. The student shall complete a Biology course as one (1) of the Science credits.

5.1.3 The student shall complete a U. S. History course as one (1) of the Social Studies credits.

5.1.4 During the senior year the student shall maintain a credit load each semester that earns the student at least a majority of credits that could be taken that semester. A credit in Mathematics shall be earned during the senior year. Further provided, a student participating in a dual enrollment course or dual credit course, as defined in 14 DE Admin. Code 506 Policies for Dual Enrollment and Awarding Dual Credit, shall be considered to be meeting the majority of credits, as long as a credit in Mathematics is earned during the senior year.

5.1.4.1 Senior year credits shall include regular High School course offerings, the options available in Section 8.0, or a combination of both.

5.2 World Language:

5.2.1 Students may fulfill the two (2) credit World Language requirement by either:

5.2.1.1 Earning a minimum of two (2) World Language credits in the same language; or

5.2.1.2 Demonstrating Novice-high or higher proficiency level on a nationally recognized assessment of language proficiency, except English, in the skill areas of oral or signed expressive and receptive communication, reading and writing, that uses the levels of proficiency as identified by the American Council for the Teaching of Foreign Language, or as approved for use by the Delaware Department of Education.

5.2.2 Any student enrolling in a Delaware public High School from an out-of-state school or nonpublic Delaware High School between and including October 1st of the 11th grade year and September 30th of the 12th grade year with one (1) World Language credit from a previous school shall be required to earn the second credit in that language unless the language is not offered at the enrolling school. In such case, the student shall earn one (1) credit in an additional language for a total of two (2) credits or pursue available options in Section 8.0 to earn the second credit of the original language.

5.2.3 Any student enrolling in a Delaware public High School from an out-of-state school or nonpublic Delaware High School between and including October 1st of the 11th grade year and September 30th of the 12th grade year with no World Language credits shall be required to earn at least one (1) World Language credit prior to graduation. Provided further, the minimum twenty-four (24) total credits outlined in this section shall still be met, or any other credit requirements pursuant to Section 8.0.

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)

Stakeholder meetings continue to be organized throughout the year to include reviewing targets, engage the data and providing input on impact. Some of the activities to network, collaborate, and inform included:

Career Pathways: ECR continues to work with groups across the DDOE around Delaware Career Pathways System to support LEAs with engaging students in transition planning activities which in turn increase graduation rate, decrease dropout rate and increase post-school outcomes. Ongoing professional development and technical assistance are provided to LEAs focusing on the following: Rigorous career pathways for all students, across key industry sectors, to ensure students earn early college credit and industry recognized credentials · Experience: Meaningful work experiences and opportunities for career coaching, provided by a network of engaged employers, to ensure students' skills have value in the marketplace · Support: Connected services across partnering state agencies and community organizations, to ensure all youth are able to realize their postsecondary identifies. Collaboration with the Delaware Career and Technical (CTE) Work Group occurs monthly.

PIPELine Initiative: ECR continues to engage in collaborative efforts with DDOE's CTE work group, Division of Vocational Rehabilitation, Division on Developmental Disabilities Services, and Division for Visually Impairments to provide and expand PIPEline to Career Success for Students with Disabilities. This multigenerational team initiative works in the context of students with disabilities to increase the enrollment, matriculation, graduation, and transition to postsecondary education and competitive employment of students with disabilities through CTE career pathways. The Student-Led PIPEline leadership program is a combination of Work-Based Learning and leadership development, offering a way for students to support their schools by recommending equity-building tools for their districts. This PIPEline program is based on best practices to get student insights, gathered in groups of students working together and empowered to research, observe, and present their understanding of ways to increase equity for students with disabilities in CTE.

Transition Cadre: ECR continues to facilitate monthly statewide Transition Cadre meetings to provide professional learning and targeted technical assistance for LEAs, state agencies and community members. Including "hot topics" around transition, post-secondary outcomes, and strengthening collaboration and communication.

Transition Cadre Email Blast: For informative, consistent, and clear communication with stakeholders there is a sent out at least twice a month with opportunities from around the state. After the Cadre meeting, an email goes out with Highlights from the meeting including PowerPoints and video recordings.

Project Search: ECR continues to partner with Project Search, a business-led, school-to-work program to support students preparing for and transitioning to post high school life. Students develop competitive, marketable, and transferable skills in areas such as communication, teamwork, and problem solving to prepare them for employment in an integrated setting. Currently, there are four sites in Delaware: BayHealth, DelDOT, Christiana Hospital and Tidal Health.

Employment for Individuals with Moderate/Significant Disabilities: ECR continues to support training through the Customized Employment Boot Camp. This course has been designed as a "hit the ground running" experience for employment professionals and school personnel interested in a non-traditional approach to job development, known as Customized Employment (CE). Enhances opportunities of employment for individuals with moderate/significant disabilities.

DEDelHub Website: ECR continues to collaborate with the GACEC to create resources in multi-media formats focused on transition throughout a student's educational career. This year we partnered to do a Success Story on a young woman. This was shown throughout the state and featured Jillian, who is now employed, and her journey to live a fulfilling and enjoyable life.

Transition Advisory Group: ECR and GACEC have established a Transition Advisory Group, a team focused on building capacity of LEA staff.

NTACT:C Capacity Building Institute Lead Team: In May, 2024, under the leadership of ECR, Delaware sent a team to NTACT:C's Post Secondary Transition Capacity Building Institute including parents, a student, and representatives from the Indian River School District, Division of Vocational Rehabilitation, Division of Visual Impairments, Parent Information Center and the DDOE. The team worked collaboratively to develop a plan to guide Post Secondary Transition in Delaware focused on the following goals: · Increase Student Engagement in IEP and the Post Secondary Transition Process · Increase and sustain youth Involvement and voice long-term · Reach students and families in all areas and racial/minority identities · Deliver concise and effective messaging to students and families about post-secondary transition · Promote effective collaboration across agencies/schools/educators

Mini-Youth Leadership Conference Around Self Determination: Collaboration with PIC to hold a mini conference in which the DOE Indicator Lead spoke to students and parents about Transition, graduation options, and self-determination.

Informing stakeholders is also done by sharing information in multiple ways. The DDOE social media pages highlight initiatives and opportunities within the state.

Participation in the Recharged Virtual Bash for educators and families was offered for free July through December. A podcast like interview with Haley, a young lady with significant support needs. She was able to discuss her support staff, and how through self-determination, she can be fully included in her community.

The Life Conference is held yearly in Dover Delaware. The mission of the LIFE Conference is to be at the forefront of providing information, educational resources, and opportunities for persons with disabilities, their families, caregivers, educators, and providers. The primary goal of the LIFE Conference is to promote and support full community integration by focusing on the four areas of Legislation, Independence, Families, and Education.

Delaware Connections Newsletter: Future Ready: Planning Today, Empowering Every Tomorrow has been implemented. The audience is Students, families and Transition Staff. It goes out the first Tuesday of the month and has anywhere from 294-662 views monthly. Topics range from Self Determination, Student Success Stories, Disability awareness, Transition Assessments, Family Transition Resources, Delaware Transition Partner Spotlight, upcoming Transition events, and a Resource Roundup.

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 2024 SPP/APR, use data from 2023-2024), 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	8.57%

FFY	2019	2020	2021	2022	2023
Target <=	3.70%	8.57%	8.27%	7.97%	7.67%
Data	2.07%	8.57%	9.99%	12.62%	10.79%

Targets

FFY	2024	2025
Target <=	7.37%	7.07%

Targets: Description of Stakeholder Input

To develop Delaware's State Performance Plan in FFY2020, and in cooperation with Parent Information Center (PIC), developed one-page, parent friendly fact sheets for each SPP/APR indicator and partnered with PIC to share with all 42 Local Education Agencies (LEA) Parent Councils for Special Education, and to the PIC parent distribution list of over 5,000 families. PIC utilized their social media platform to invite all parents to engage in Lunch and Learn Facebook Live sessions, where the Exceptional Children's Resource (ECR) presented their indicator information, engaged in a data analysis discussion, presented target proposals and improvement strategies. These sessions were scheduled both during the day and in the evening to ensure further opportunities for parent participation. In addition, ECR staff created individual indicator surveys to gather further input from parent stakeholders which was communicated during the "Lunch and Learn" sessions. Both the one-page fact sheets and surveys were translated from English into Spanish and Haitian Creole to reach a wide range of families. To centralize all this information and to gain even further public input, ECR created an IDEA SPP/APR webpage which contains the one-page fact sheets for each indicator, a live link for individual surveys to gain additional input/feedback, the power point presentation used during stakeholder presentations and a copy of the previous SPP/APR, for reference. DDOE utilized social media, such as the DDOE Facebook Page, to share this information statewide, in addition to posting info and live links in the Principals' Weekly Newsletter. To support this effort, PIC created a similar webpage which links to DDOE's webpage.

To support the Informing stage of Leading by Convening, DDOE collected data to support the efforts on increasing the appropriate breadth of representation and depth of interactions from stakeholders through social media and websites. In addition, DDOE collected data on Networking, Collaborating and Transforming efforts.

Number of stakeholders who were reached by DDOE/PIC through Informing on social media and websites: 30,902

Number of stakeholders who were engaged by DDOE/PIC by Informing on social media and websites: 1,035

Number of stakeholders who were engaged with DDOE/PIC by Networking, Collaborating and Transforming through completing surveys and participating in meetings: 1,191

For Indicator 2, 15 stakeholder meetings were held which include Statewide Transition Cadre, ,NTACT:C Leadership Group at Capacity Building Institute, Lunch & Learn sessions in collaboration with Parent Information Center of Delaware, Division for Visual Impairments Vocational Rehab Advisory Council, Developmental Disabilities Council, Employment First Commission, Governor's Advisory Council for Exceptional Citizens (GACEC) (IDEA State Advisory Panel), GACEC Transition Advisory Group, and LEA Special Education Directors.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,284
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	62
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	2
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education (EDFacts file spec FS009; Data group 85)	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	123

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
123	1,471	10.79%	7.37%	8.36%	Did not meet target	No Slippage

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

Delaware Criteria for being identified as a dropout:

• A student who completed the previous school year and who did not reach their 16th birthday by the beginning of the current school and did not attend any days of the current school year is considered dropout underage from the receiving school. This student should be coded in Infinite Campus as Dropout-Underage. This underage dropout should have a withdrawal date that is the same as the entry date (i.e., first day of school of the reporting year).

• A student who completed the previous school year and who did reach their 16th birthday by the beginning of the current school and did not attend any days of the current school year is considered dropout-truancy from the receiving school. This student should be coded in Infinite Campus as Dropout-Truancy. This dropout should have a withdrawal date that is the same as the entry date (i.e., first day of school of the reporting year).

• If a student has moved and there is no official documentation that he or she has transferred to another school, he or she is counted as a dropout and coded in Infinite Campus as Dropout-Underage or Dropout-Truancy depending on age.

• A student who transfers to James H. Groves Adult High School during the current school year and is not in attendance (enrolled) by September 30 of the next school year, is counted as Dropout-Academic from the home school.

• A student who transfers to James H. Groves Adult Basic Education (ABE) programs during the current school year is counted as Dropout-Academic from the home school.

• An expelled student is counted as a dropout if he or she does not return at the end of the disciplinary period. This student should be coded in Infinite Campus as Dropout-Behavior.

• A school leaver who has joined the military is counted as a dropout. This student should be coded in Infinite Campus as Dropout-Military.

• A school leaver who has joined Job Corps is counted as a dropout. This student should be coded in Infinite Campus as Dropout Employment.

• A student withdrawn because of truancy is counted as a dropout. This student shall be coded in Infinite Campus as Dropout-Underage or Dropout-Truancy depending on age. (A student with an active truancy case with the Justice of the Peace Court shall not be withdrawn from Infinite Campus.

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).

Youth who are 14 or 8th grade and older are included in the data for this indicator network, collaborate, and inform included:

Career Pathways: ECR continues to work with groups across the DDOE around Delaware Career Pathways System to support LEAs with engaging students in transition planning activities which in turn increase graduation rate, decrease dropout rate and increase post-school outcomes. Ongoing professional development and technical assistance are provided to LEAs focusing on the following: Rigorous career pathways for all students, across key industry sectors, to ensure students earn early college credit and industry recognized credentials · Experience: Meaningful work experiences and opportunities for career coaching, provided by a network of engaged employers, to ensure students' skills have value in the marketplace · Support: Connected services across partnering state agencies and community organizations, to ensure all youth are able to realize their postsecondary identifies. Collaboration with the Delaware Career and Technical (CTE) Work Group occurs monthly.

PIPELine Initiative: ECR continues to engage in collaborative efforts with DDOE's CTE work group, Division of Vocational Rehabilitation, Division on Developmental Disabilities Services, and Division for Visually Impairments to provide and expand PIPEline to Career Success for Students with Disabilities. This multigenerational team initiative works in the context of students with disabilities to increase the enrollment, matriculation, graduation, and transition to postsecondary education and competitive employment of students with disabilities through CTE career pathways. The Student-Led PIPEline leadership program is a combination of Work-Based Learning and leadership development, offering a way for students to support their schools by recommending equity-building tools for their districts. This PIPEline program is based on best practices to get student insights, gathered in groups of students working together and empowered to research, observe, and present their understanding of ways to increase equity for students with disabilities in CTE.

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Employment for Individuals with Moderate/Significant Disabilities: ECR continues to support training through the Customized Employment Boot Camp. This course has been designed as a "hit the ground running" experience for employment professionals and school personnel interested in a non-traditional approach to job development, known as Customized Employment (CE). Enhances opportunities of employment for individuals with moderate/significant disabilities.

DEDelHub Website: ECR continues to collaborate with the GACEC to create resources in multi-media formats focused on transition throughout a student's educational career. This year we partnered to do a Success Story on a young woman. This was shown throughout the state and featured Jillian, who is now employed, and her journey to live a fulfilling and enjoyable life.

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Informing stakeholders is also done by sharing information in multiple ways. The DDOE social media pages highlight initiatives and opportunities within the state.

The Life Conference is held yearly in Dover Delaware. The mission of the LIFE Conference is to be at the forefront of providing information, educational resources, and opportunities for persons with disabilities, their families, caregivers, educators, and providers. The primary goal of the LIFE Conference is to promote and support full community integration by focusing on the four areas of Legislation, Independence, Families, and Education. The LIFE Conference offers its attendees the opportunity to learn, network, and participate in sessions designed to share information with all participants, including policy makers and the public.

Delaware Connections Newsletter: Future Ready: Planning Today, Empowering Every Tomorrow has been implemented. The audience is Students, families and Transition Staff. It goes out the first Tuesday of the month and has anywhere from 294-662 views monthly. Topics range from Self Determination, Student Success Stories, Disability awareness, Transition Assessments, Family Transition Resources, Delaware Transition Partner Spotlight, upcoming Transition events, and a Resource Roundup.

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 C.F.R. §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	2018	98.16%
Reading	B	Grade 8	2018	95.70%
Reading	C	Grade HS	2018	74.76%
Math	A	Grade 4	2018	98.06%
Math	B	Grade 8	2018	95.38%
Math	C	Grade HS	2018	74.68%

Targets

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

Targets: Description of Stakeholder Input

To support the development and reporting of targets for Indicator 3 in the FFY 2020 SPP/APR, staff from the Exceptional Children Resources (ECR) workgroup facilitated a series of stakeholder engagement activities. Ten meetings were held with a range of advisory and community groups, including the Multi-Tiered System of Support (MTSS) Advisory Council, the Access to General Education Curriculum (AGEC) Committee, and parent-focused Lunch and Learn sessions conducted in partnership with the Parent Information Center of Delaware. Additional input was gathered from members of the Governor's Advisory Council for Exceptional Citizens (IDEA State Advisory Panel) and LEA Special Education Directors.

ECR intentionally sought participation from a diverse group of stakeholders representing varied racial and ethnic backgrounds, geographic regions, disability classifications, advocacy organizations, and family perspectives. These collaborative sessions centered on reviewing longitudinal and current performance data, establishing meaningful targets, and identifying strategies to support improved outcomes.

Stakeholder engagement remains an ongoing component of ECR's work. Throughout the year, stakeholders continue to participate in discussions focused on monitoring progress, examining data trends, and refining improvement efforts. For example, stakeholders examined assessment results for students with disabilities in comparison to statewide outcomes and contributed to the development of targeted strategies to address identified needs. In

addition, the DDOE facilitated data retreats that provided LEAs with structured opportunities to analyze assessment data, identify underlying factors contributing to participation and performance gaps, created actionable steps for addressing these gaps, and established benchmarks to monitor progress.

FFY 2024 Data Disaggregation from ED*Facts*

Data Source:

SY 2024-25 Assessment Participation in Reading/Language Arts (EDFacts file spec FS188; Data Group: 882, 883)

Date:

01/07/2026

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	2,165	2,050	1,637
b. Children with IEPs in regular assessment with no accommodations (3)	388	495	427
c. Children with IEPs in regular assessment with accommodations (3)	1,614	1,319	920
d. Children with IEPs in alternate assessment against alternate standards	109	116	106

Data Source:

SY 2024-25 Assessment Participation in Mathematics (EDFacts file spec FS185; Data Group: 880, 881)

Date:

01/07/2026

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	2,165	2,049	1,637
b. Children with IEPs in regular assessment with no accommodations (3)	311	295	427
c. Children with IEPs in regular assessment with accommodations (3)	1,691	1,494	920
d. Children with IEPs in alternate assessment against alternate standards	108	116	106

(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 prefilled 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 prefilled 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 prefilled data in this indicator.

FFY 2024 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	2,111	2,165	97.44%	95.00%	97.51%	Met target	No Slippage
B	Grade 8	1,930	2,050	93.20%	95.00%	94.15%	Did not meet target	No Slippage
C	Grade HS	1,453	1,637	88.35%	95.00%	88.76%	Did not meet target	No Slippage

FFY 2024 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	2,110	2,165	97.16%	95.00%	97.46%	Met target	No Slippage
B	Grade 8	1,905	2,049	92.62%	95.00%	92.97%	Did not meet target	No Slippage
C	Grade HS	1,453	1,637	88.29%	95.00%	88.76%	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.

The FFY 2024 public reports of disaggregated state assessment reports for students with disabilities are posted at the following link: https://education.delaware.gov/educators/academic-support/instructional-support/special-education/idea-part-b-compliance/

Suppression Rules:

Pursuant to the Family Education Rights and Privacy Act (FERPA) (34 CFR §99), the DDOE applies the following statistical methods to avoid disclosure of personally identifiable information in aggregate reporting. 1. For all data, counts for groups or subgroups with 15 or fewer students are suppressed and represented by "-" in data reports. Complementary suppression of one or more non-sensitive cells in a table may be required so that the values of the suppressed cells may not be calculated by subtracting the reported values from the row and column totals. Percentages are suppressed when the underlying student counts can be derived for groups or subgroups with 15 or fewer students (i.e., if the number tested and proficient are reported, then the percentage may need to be suppressed).

Provide additional information about this indicator (optional)

The Delaware Department of Education (DDOE) ensures that data for Indicator 3A is complete, accurate, reliable, and valid. In alignment with the Every Student Succeeds Act (ESSA), DDOE has placed particular emphasis on adhering to the federal requirement that no more than 1% of students statewide participate in assessment of alternate achievement standards. This requirement is intended to safeguard against disproportionality and ensure that students are appropriately assessed. As a result of sustained monitoring and technical assistance, Delaware has observed a continued decline in the number of students participating in alternate assessment, reflecting progress toward compliance with this requirement.

To support improved outcomes, DDOE provides ongoing professional learning and technical assistance informed by stakeholder input to promote effective assessment practices and instructional alignment. To further guide improvement efforts, stakeholders collaborated to review historical assessment data, establish performance targets, and identify strategies to improve proficiency outcomes. The baseline for Indicator 3 was set using FFY 2017 data, reflecting student performance prior to the 2020 pandemic. Stakeholder participants included LEA special education leadership, members of the MTSS Advisory Council, the Access to General Education Curriculum (AGEC) Committee, educators, administrators, parents, school psychologists, and DDOE staff. Suggested strategies included expanded enrichment opportunities outside of the school day, increased access to instructional resources, enhanced family communication, and targeted supports for multilingual learners (MLLs).

DDOE regularly convenes statewide meetings with special education leaders and directors to examine Indicator 3 data, track progress toward targets, and identify areas for improvement. These data are also reviewed by the MTSS Advisory Council, which supports the implementation of a statewide multi-tiered framework focused on academic and behavioral success. Council discussions emphasize strengthening Tier 1 instruction, addressing the needs of multilingual learners, aligning math instruction to standards, and integrating MTSS practices to support academic achievement and social-emotional development. Delaware's MTSS regulations, enacted in 2021, reinforce the use of high-quality instructional materials, evidence-based interventions, early identification practices, and data-informed decision-making. DDOE further enhances its efforts through collaboration with national technical assistance partners, including the Office of Special Education Programs (OSEP), participating in webinars, peer learning networks, and resource development through organizations such as IDC, Signetwork, the IDEA Data Center, CCSSO, and NCSI.

Beginning in the 2023–2024 school year, DDOE launched a four-year collaboration with the SWIFT National Center on Inclusion Toward Rightful Presence. This initiative strengthens the State's commitment to building inclusive and equitable systems that ensure meaningful participation for all learners. Two LEAs and eight schools were selected as demonstration sites to model inclusive practices that support dynamic learners with intensive cognitive needs. These sites will serve as exemplars of effective inclusive practices, with a focus on improving academic and social outcomes and supporting successful transitions to postsecondary education, employment, and adult life. Lessons learned from this work will be expanded statewide to support broader system improvement.

3A - Prior FFY Required Actions

None

3A - OSEP Response

3A - Required Actions

Indicator 3B: Proficiency for Children with IEPs Against 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	2017	16.30%
Reading	B	Grade 8	2017	10.01%
Reading	C	Grade HS	2017	10.21%
Math	A	Grade 4	2017	15.52%
Math	B	Grade 8	2017	4.21%
Math	C	Grade HS	2017	3.46%

Targets

Subject	Group	Group Name	2024	2025
Reading	A >=	Grade 4	31.60%	34.66%
Reading	B >=	Grade 8	28.21%	31.85%
Reading	C >=	Grade HS	28.31%	31.93%
Math	A >=	Grade 4	31.17%	34.30%
Math	B >=	Grade 8	25.01%	29.17%
Math	C >=	Grade HS	24.61%	28.84%

Targets: Description of Stakeholder Input

To support the development and reporting of targets for Indicator 3 in the FFY 2020 SPP/APR, staff from the Exceptional Children Resources (ECR) workgroup facilitated a series of stakeholder engagement activities. Ten meetings were held with a range of advisory and community groups, including the Multi-Tiered System of Support (MTSS) Advisory Council, the Access to General Education Curriculum (AGEC) Committee, and parent-focused Lunch and Learn sessions conducted in partnership with the Parent Information Center of Delaware. Additional input was gathered from members of the Governor's Advisory Council for Exceptional Citizens (IDEA State Advisory Panel) and LEA Special Education Directors.

ECR intentionally sought participation from a diverse group of stakeholders representing varied racial and ethnic backgrounds, geographic regions, disability classifications, advocacy organizations, and family perspectives. These collaborative sessions centered on reviewing longitudinal and current performance data, establishing meaningful targets, and identifying strategies to support improved outcomes.

Stakeholder engagement remains an ongoing component of ECR's work. Throughout the year, stakeholders continue to participate in discussions focused on monitoring progress, examining data trends, and refining improvement efforts. For example, stakeholders examined assessment results for students with disabilities in comparison to statewide outcomes and contributed to the development of targeted strategies to address identified needs. In addition, the DDOE facilitated data retreats that provided LEAs with structured opportunities to analyze assessment data, identify underlying factors

contributing to participation and performance gaps, created actionable steps for addressing these gaps, and established benchmarks to monitor progress.

FFY 2024 Data Disaggregation from ED*Facts*

Data Source:

SY 2024-25 Academic Achievement in Reading/Language Arts (EDFacts file spec FS178; Data Group: 876, 877)

Date:

01/07/2026

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	2,002	1,814	1,347
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	139	96	31
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	133	97	103

Data Source:

SY 2024-25 Academic Achievement in Mathematics (EDFacts file spec FS175; Data Group: 874, 875)

Date:

01/07/2026

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	2,002	1,789	1,347
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	158	42	8
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	141	47	14

(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 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	272	2,002	13.01%	31.60%	13.59%	Did not meet target	No Slippage
B	Grade 8	193	1,814	7.81%	28.21%	10.64%	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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
C	Grade HS	134	1,347	8.85%	28.31%	9.95%	Did not meet target	No Slippage

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	299	2,002	13.98%	31.17%	14.94%	Did not meet target	No Slippage
B	Grade 8	89	1,789	3.42%	25.01%	4.97%	Did not meet target	No Slippage
C	Grade HS	22	1,347	1.89%	24.61%	1.63%	Did not meet target	Slippage

Provide reasons for slippage for Group C, if applicable

For FFY 2024, the number of students with disabilities proficient on the High School Math assessment decreased when compared to FFY 2023. Student participation in the High School Math assessment increased from 1,327 students in FFY 2023 to 1,453 students in FFY 2024, representing an increase of 126 students or 9.49%. Despite the increase in participation, the number of students demonstrating proficiency decreased slightly from 23 students in FFY 2023 to 22 students in FFY 2024.

As a result, the proficiency rate decreased from 1.89% in FFY 2023 to 1.63% in FFY 2024, reflecting a 0.26 percentage point decrease. This decline indicates that while more students with disabilities participated in the assessment, a smaller proportion met proficiency expectations in FFY 2024.

In examining the reasons for slippage, the DDOE analyzed statewide High School Math assessment data for all students. Although the State experienced an increase in assessment participation, with 250 additional students tested (a 2.63% increase), the overall proficiency rate for all students taking the High School Math assessment decreased by 0.06 percentage points.

This slippage may be attributed to several factors, including the inclusion of a larger number of students with significant academic needs as participation increased, which may have influenced overall proficiency outcomes. A key focus of DDOE has been meeting the Every Student Succeeds Act (ESSA) requirement, which limits the percentage of students statewide who may take alternate assessments to no more than 1%. This federal regulation aims to reduce disproportionality and prevent the over-identification of students for alternate assessments. DDOE's continued efforts to meet the 1% cap have yielded positive results, as evidenced by a decrease in the number of students taking alternate assessments. Students with the most significant cognitive impairments remain on alternate assessments, while those with less severe impairments are transitioned to the more rigorous general assessments. Some students with disabilities continue to demonstrate gaps in foundational math skills that require sustained, targeted instructional support. In addition, LEAs continue to focus on recruiting and supporting appropriately certified mathematics and special education educators, as well as strengthening the consistent implementation of instructional supports and accommodations. These factors, taken together, may have contributed to the slight decrease in proficiency despite increased participation.

The DDOE will continue to examine assessment data to identify trends across LEAs and student subgroups and will provide targeted technical assistance focused on strengthening standards-aligned instruction, improving access to evidence-based interventions, and ensuring appropriate use of accommodations. These efforts are intended to support improved mathematics proficiency outcomes for students with disabilities and to address areas contributing to 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.

The FFY 2024 public reports of disaggregated state assessment reports for students with disabilities are posted at the following link: https://education.delaware.gov/educators/academic-support/instructional-support/special-education/idea-part-b-compliance/

Suppression Rules:

Pursuant to the Family Education Rights and Privacy Act (FERPA) (34 CFR §99), the DDOE applies the following statistical methods to avoid disclosure of personally identifiable information in aggregate reporting. 1. For all data, counts for groups or subgroups with 15 or fewer students are suppressed and represented by "-" in data reports. Complementary suppression of one or more non-sensitive cells in a table may be required so that the values of the suppressed cells may not be calculated by subtracting the reported values from the row and column totals. Percentages are suppressed when the

underlying student counts can be derived for groups or subgroups with 15 or fewer students (i.e., if the number tested and proficient are reported, then the percentage may need to be suppressed).

Provide additional information about this indicator (optional)

The Delaware Department of Education (DDOE) ensures that data for Indicator 3B is complete, accurate, reliable, and valid. In alignment with the Every Student Succeeds Act (ESSA), DDOE has placed particular emphasis on adhering to the federal requirement that no more than 1% of students statewide participate in assessment of alternate achievement standards. This requirement is intended to safeguard against disproportionality and ensure that students are appropriately assessed. As a result of sustained monitoring and technical assistance, Delaware has observed a continued decline in the number of students participating in alternate assessment, reflecting progress toward compliance with this requirement.

Students with the most significant cognitive disabilities continue to be appropriately assessed using assessment of alternate achievement standards, while students with less intensive needs are increasingly participating in the assessment of grade-level standards. As expected, this shift has influenced performance results across both assessment types, as students transitioning to the grade-level standards assessment may initially experience difficulty meeting grade-level expectations. To support improved outcomes, DDOE provides ongoing professional learning and technical assistance informed by stakeholder input to promote effective assessment practices and instructional alignment. To further guide improvement efforts, stakeholders collaborated to review historical assessment data, establish performance targets, and identify strategies to improve proficiency outcomes. The baseline for Indicator 3 was set using FFY 2017 data, reflecting student performance prior to the 2020 pandemic. Stakeholder participants included LEA special education leadership, members of the MTSS Advisory Council, the Access to General Education Curriculum (AGEC) Committee, educators, administrators, parents, school psychologists, and DDOE staff. Suggested strategies included expanded enrichment opportunities outside of the school day, increased access to instructional resources, enhanced family communication, and targeted supports for multilingual learners (MLLs).

DDOE regularly convenes statewide meetings with special education leaders and directors to examine Indicator 3 data, track progress toward targets, and identify areas for improvement. These data are also reviewed by the MTSS Advisory Council, which supports the implementation of a statewide multi-tiered framework focused on academic and behavioral success. Council discussions emphasize strengthening Tier 1 instruction, addressing the needs of multilingual learners, aligning math instruction to standards, and integrating MTSS practices to support academic achievement and social-emotional development. Delaware's MTSS regulations, enacted in 2021, reinforce the use of high-quality instructional materials, evidence-based interventions, early identification practices, and data-informed decision-making. DDOE further enhances its efforts through collaboration with national technical assistance partners, including the Office of Special Education Programs (OSEP), participating in webinars, peer learning networks, and resource development through organizations such as IDC, Signetwork, the IDEA Data Center, CCSSO, and NCSI.

Beginning in the 2023–2024 school year, DDOE launched a four-year collaboration with the SWIFT National Center on Inclusion Toward Rightful Presence. This initiative strengthens the State's commitment to building inclusive and equitable systems that ensure meaningful participation for all learners. Two LEAs and eight schools were selected as demonstration sites to model inclusive practices that support dynamic learners with intensive cognitive needs. These sites will serve as exemplars of effective inclusive practices, with a focus on improving academic and social outcomes and supporting successful transitions to postsecondary education, employment, and adult life. Lessons learned from this work will be expanded statewide to support broader system improvement.

3B - Prior FFY Required Actions

None

3B - OSEP Response

3B - Required Actions

Indicator 3C: Proficiency for Children with IEPs Against 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	2017	23.53%
Reading	B	Grade 8	2017	42.41%
Reading	C	Grade HS	2017	41.42%
Math	A	Grade 4	2017	30.15%
Math	B	Grade 8	2017	18.89%
Math	C	Grade HS	2017	8.98%

Targets

Subject	Group	Group Name	2024	2025
Reading	A >=	Grade 4	35.58%	37.99%
Reading	B >=	Grade 8	45.86%	46.55%
Reading	C >=	Grade HS	45.32%	46.10%
Math	A >=	Grade 4	39.15%	40.95%
Math	B >=	Grade 8	33.04%	35.87%
Math	C >=	Grade HS	27.63%	31.36%

Targets: Description of Stakeholder Input

To support the development and reporting of targets for Indicator 3 in the FFY 2020 SPP/APR, staff from the Exceptional Children Resources (ECR) workgroup facilitated a series of stakeholder engagement activities. Ten meetings were held with a range of advisory and community groups, including the Multi-Tiered System of Support (MTSS) Advisory Council, the Access to General Education Curriculum (AGEC) Committee, and parent-focused Lunch and Learn sessions conducted in partnership with the Parent Information Center of Delaware. Additional input was gathered from members of the Governor's Advisory Council for Exceptional Citizens (IDEA State Advisory Panel) and LEA Special Education Directors.

ECR intentionally sought participation from a diverse group of stakeholders representing varied racial and ethnic backgrounds, geographic regions, disability classifications, advocacy organizations, and family perspectives. These collaborative sessions centered on reviewing longitudinal and current performance data, establishing meaningful targets, and identifying strategies to support improved outcomes.

Stakeholder engagement remains an ongoing component of ECR's work. Throughout the year, stakeholders continue to participate in discussions focused on monitoring progress, examining data trends, and refining improvement efforts. For example, stakeholders examined assessment results for students with disabilities in comparison to statewide outcomes and contributed to the development of targeted strategies to address identified needs. In addition, the DDOE facilitated data retreats that provided LEAs with structured opportunities to analyze assessment data, identify underlying factors contributing to participation and performance gaps, created actionable steps for addressing these gaps, and established benchmarks to monitor progress.

FFY 2024 Data Disaggregation from ED*Facts*

Data Source:

SY 2024-25 Academic Achievement in Reading/Language Arts (EDFacts file spec FS178; Data Group: 876, 877)

Date:

01/07/2026

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	109	116	106
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	27	15	14

Data Source:

SY 2024-25 Academic Achievement in Mathematics (EDFacts file spec FS175; Data Group: 874, 875)

Date:

01/07/2026

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	108	116	106
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	8	9	8

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	27	109	25.25%	35.58%	24.77%	Did not meet target	No Slippage
B	Grade 8	15	116	17.48%	45.86%	12.93%	Did not meet target	Slippage
C	Grade HS	14	106	9.35%	45.32%	13.21%	Did not meet target	No Slippage

Provide reasons for slippage for Group B, if applicable

When compared to FFY 2023, the proficiency rate for Grade 8 students with disabilities participating in the reading assessment aligned to alternate achievement standards decreased slightly in FFY 2024. Participation in the assessment increased from 103 students in FFY 2023 to 116 students in FFY 2024, representing an increase of 13 students or 12.62%. During the same period, the proficiency rate decreased from 17.48% in FFY 2023 to 12.93% in FFY 2024, reflecting a decline of 4.55 percentage points. The Delaware Department of Education (DDOE) continues to address the federal 1% participation cap by ensuring that only students with the most significant cognitive disabilities participate in the alternate assessment.

This slippage may be attributed to the increase in the number of students participating in the alternate assessment, including students with more significant and complex instructional needs, which may have impacted overall proficiency outcomes. As additional students requiring intensive and individualized supports participated, maintaining prior proficiency levels became more challenging. In addition, due to the relatively small number of students assessed at this grade level, year-to-year changes in performance can result in larger percentage fluctuations, and trends should be interpreted with caution. LEAs continue to focus on recruiting and supporting appropriately certified special education and content-area educators, as well as strengthening the consistent implementation of high-quality Tier 1 instructional materials and supports aligned to alternate achievement standards. Collectively, these factors may have contributed to the slight decrease in proficiency despite increased participation.

The DDOE will continue to monitor participation and performance data for the alternate assessment and provide targeted technical assistance to local education agencies to support high-quality, standards-aligned instruction and effective implementation of instructional supports aligned to alternate achievement standards. These efforts are intended to improve reading outcomes for students with the most significant cognitive disabilities while ensuring appropriate participation decisions under Indicator 3C.

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	8	108	5.05%	39.15%	7.41%	Did not meet target	No Slippage
B	Grade 8	9	116	11.65%	33.04%	7.76%	Did not meet target	Slippage
C	Grade HS	8	106	14.02%	27.63%	7.55%	Did not meet target	Slippage

Provide reasons for slippage for Group B, if applicable

For FFY 2024, he proficiency rate for students with disabilities taking the 8th Grade Mathematics assessment aligned to alternate achievement standards decreased when compared to FFY 2023 proficiency rates. Participation in the assessment increased from 103 students in FFY 2023 to 116 students in FFY 2024, representing an increase of 13 students or 12.62%. During the same period, the proficiency rate decreased from 11.65% in FFY 2023 to 7.76% in FFY 2024, reflecting a decline of 3.89 percentage points.

The Delaware Department of Education (DDOE) continues to address the federal 1% participation cap by ensuring that only students with the most significant cognitive disabilities participate in the alternate assessment. As participation becomes more appropriately focused on students with the most intensive instructional needs, proficiency rates may be impacted, while overall compliance with the 1% cap improves. Additionally, due to the relatively small number of students participating in the Grade 8 alternate assessment, year-over-year changes in performance can result in larger percentage fluctuations, and trends should be interpreted with caution, as the sample size limits the ability to draw meaningful conclusions from more detailed subgroup analyses. As participation expanded to include additional students requiring intensive and individualized supports, maintaining prior proficiency levels became more challenging. LEAs continue to focus on recruiting and supporting appropriately certified special education and content-area educators, as well as strengthening the consistent implementation of high-quality Tier 1 instructional materials and supports aligned to alternate achievement standards. Collectively, these factors may have contributed to the slight decrease in proficiency despite increased participation.

The DDOE will continue to monitor participation and performance trends for the alternate assessment and provide targeted technical assistance to local education agencies to support high-quality, standards-aligned instruction and effective implementation of instructional supports aligned to alternate achievement standards. These efforts are intended to improve mathematics outcomes for students with the most significant cognitive disabilities while ensuring appropriate participation decisions under Indicator 3C.

Provide reasons for slippage for Group C, if applicable

For FFY 2024, the proficiency rate for students with disabilities taking the High School Mathematics assessment aligned to alternate achievement standards decreased when compared to FFY 2023 proficiency rates. Student participation in the assessment decreased slightly from 107 students in FFY 2023 to 106 students in FFY 2024, representing a 0.94% decrease. During the same period, the proficiency rate declined from 14.02% in FFY 2023 to 7.55% in FFY 2024, a decrease of 6.47 percentage points. Despite this decline, the FFY 2024 proficiency rate remains higher than the FFY 2022 proficiency rate of 5.50%, indicating improvement over time. The Delaware Department of Education (DDOE) continues to address the federal 1% participation cap by ensuring that only students with the most significant cognitive disabilities participate in the alternate assessment.

This slippage may be attributed to several factors, including the small number of students participating in the alternate assessment at the high school level, where slight changes in student performance can result in notable percentage fluctuations. Additionally, students participating in the alternate assessment are students with more significant and complex instructional needs, and year-to-year changes in student composition may impact overall proficiency outcomes. LEAs continue to focus on recruiting and supporting appropriately certified special education and content-area educators, as well as strengthening the consistent implementation of high-quality Tier 1 instructional materials and supports aligned to alternate achievement standards. Collectively, these factors may have contributed to the slight decrease in proficiency despite increased participation.

The DDIE will continue to monitor participation and performance trends for the high school mathematics alternate assessment and provide targeted technical assistance to local education agencies focused on strengthening high-quality, standards-aligned instruction and effective implementation of instructional supports. These efforts are intended to support continued improvement in mathematics outcomes for students with the most significant cognitive disabilities while ensuring appropriate participation decisions under Indicator 3C.

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.

The FFY 2023 public reports of disaggregated state assessment reports for students with disabilities are posted at the following link: https://education.delaware.gov/educators/academic-support/instructional-support/special-education/idea-part-b-compliance/

Suppression Rules:

Pursuant to the Family Education Rights and Privacy Act (FERPA) (34 CFR §99), the DDOE applies the following statistical methods to avoid disclosure of personally identifiable information in aggregate reporting. 1. For all data, counts for groups or subgroups with 15 or fewer students are suppressed and represented by "-" in data reports. Complementary suppression of one or more non-sensitive cells in a table may be required so that the values of the suppressed cells may not be calculated by subtracting the reported values from the row and column totals. 29 Part B Percentages are suppressed when the underlying student counts can be derived for groups or subgroups with 15 or fewer students (i.e., if the number tested and proficient are reported, then the percentage may need to be suppressed).

Provide additional information about this indicator (optional)

The Delaware Department of Education (DDOE) ensures that data for Indicator 3C is complete, accurate, reliable, and valid. In alignment with the Every Student Succeeds Act (ESSA), DDOE has placed particular emphasis on adhering to the federal requirement that no more than 1% of students statewide participate in assessment of alternate achievement standards. This requirement is intended to safeguard against disproportionality and ensure that students are appropriately assessed. As a result of sustained monitoring and technical assistance, Delaware has observed a continued decline in the number of students participating in alternate assessment, reflecting progress toward compliance with this requirement.

Students with the most significant cognitive disabilities continue to be appropriately assessed using assessment of alternate achievement standards, while students with less intensive needs are increasingly participating in the assessment of grade-level standards. As expected, this shift has influenced performance results across both assessment types, as students transitioning to the grade-level standards assessment may initially experience difficulty meeting grade-level expectations. To support improved outcomes, DDOE provides ongoing professional learning and technical assistance informed by stakeholder input to promote effective assessment practices and instructional alignment. To further guide improvement efforts, stakeholders collaborated to review historical assessment data, establish performance targets, and identify strategies to improve proficiency outcomes. The baseline for Indicator 3 was set using FFY 2017 data, reflecting student performance prior to the 2020 pandemic. Stakeholder participants included LEA special education leadership, members of the MTSS Advisory Council, the Access to General Education Curriculum (AGEC) Committee, educators, administrators, parents, school psychologists, and DDOE staff. Suggested strategies included expanded enrichment opportunities outside of the school day, increased access to instructional resources, enhanced family communication, and targeted supports for multilingual learners (MLLs).

DDOE regularly convenes statewide meetings with special education leaders and directors to examine Indicator 3 data, track progress toward targets, and identify areas for improvement. These data are also reviewed by the MTSS Advisory Council, which supports the implementation of a statewide multi-tiered framework focused on academic and behavioral success. Council discussions emphasize strengthening Tier 1 instruction, addressing the needs of multilingual learners, aligning math instruction to standards, and integrating MTSS practices to support academic achievement and social-emotional development. Delaware's MTSS regulations, enacted in 2021, reinforce the use of high-quality instructional materials, evidence-based interventions, early identification practices, and data-informed decision-making. DDOE further enhances its efforts through collaboration with national technical assistance partners, including the Office of Special Education Programs (OSEP), participating in webinars, peer learning networks, and resource development through organizations such as IDC, Signetwork, the IDEA Data Center, CCSSO, and NCSI.

Beginning in the 2023–2024 school year, DDOE launched a four-year collaboration with the SWIFT National Center on Inclusion Toward Rightful Presence. This initiative strengthens the State's commitment to building inclusive and equitable systems that ensure meaningful participation for all learners. Two LEAs and eight schools were selected as demonstration sites to model inclusive practices that support dynamic learners with intensive cognitive needs. These sites will serve as exemplars of effective inclusive practices, with a focus on improving academic and social outcomes and supporting successful transitions to postsecondary education, employment, and adult life. Lessons learned from this work will be expanded statewide to support broader system improvement.

3C - Prior FFY Required Actions

None

3C - OSEP Response

3C - Required Actions

Indicator 3D: Gap in Proficiency Rates For Children with IEPs and All Students Against 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 2024-2025 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2024-2025 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 2024-2025 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2024-2025 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	2017	33.23
Reading	B	Grade 8	2017	43.24
Reading	C	Grade HS	2017	39.97
Math	A	Grade 4	2017	34.96
Math	B	Grade 8	2017	34.94
Math	C	Grade HS	2017	25.28

Targets

Subject	Group	Group Name	2024	2025
Reading	A <=	Grade 4	25.68	24.17
Reading	B <=	Grade 8	33.39	31.42
Reading	C <=	Grade HS	30.87	29.05
Math	A <=	Grade 4	27.01	25.42
Math	B <=	Grade 8	26.99	25.40
Math	C <=	Grade HS	19.53	18.38

Targets: Description of Stakeholder Input

To support the development and reporting of targets for Indicator 3 in the FFY 2020 SPP/APR, staff from the Exceptional Children Resources (ECR) workgroup facilitated a series of stakeholder engagement activities. Ten meetings were held with a range of advisory and community groups, including the Multi-Tiered System of Support (MTSS) Advisory Council, the Access to General Education Curriculum (AGEC) Committee, and parent-focused Lunch and Learn sessions conducted in partnership with the Parent Information Center of Delaware. Additional input was gathered from members of the Governor's Advisory Council for Exceptional Citizens (IDEA State Advisory Panel) and LEA Special Education Directors.

ECR intentionally sought participation from a diverse group of stakeholders representing varied racial and ethnic backgrounds, geographic regions, disability classifications, advocacy organizations, and family perspectives. These collaborative sessions centered on reviewing longitudinal and current performance data, establishing meaningful targets, and identifying strategies to support improved outcomes.

Stakeholder engagement remains an ongoing component of ECR's work. Throughout the year, stakeholders continue to participate in discussions focused on monitoring progress, examining data trends, and refining improvement efforts. For example, stakeholders examined assessment results for students with disabilities in comparison to statewide outcomes and contributed to the development of targeted strategies to address identified needs. In addition, the DDOE facilitated data retreats that provided LEAs with structured opportunities to analyze assessment data, identify underlying factors contributing to participation and performance gaps, created actionable steps for addressing these gaps, and established benchmarks to monitor progress.

FFY 2024 Data Disaggregation from ED*Facts*

Data Source:

SY 2024-25 Academic Achievement in Reading/Language Arts (EDFacts file spec FS178; Data Group: 876, 877)

Date:

01/07/2026

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	9,971	10,449	9,736
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	2,002	1,814	1,347
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	3,686	4,103	4,283
d. All students in regular assessment with accommodations scored at or above proficient against grade level	453	185	333
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	139	96	31
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	133	97	103

Data Source:

SY 2024-25 Academic Achievement in Mathematics (EDFacts file spec FS175; Data Group: 874, 875)

Date:

01/07/2026

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	10,043	10,466	9,752
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	2,002	1,789	1,347
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	3,614	2,673	1,694
d. All students in regular assessment with accommodations scored at or above proficient against grade level	511	107	101
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	158	42	8
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	141	47	14

(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 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	13.59%	41.51%	26.04	25.68	27.92	Did not meet target	Slippage
B	Grade 8	10.64%	41.04%	32.71	33.39	30.40	Met target	No Slippage
C	Grade HS	9.95%	47.41%	35.90	30.87	37.46	Did not meet target	Slippage

Provide reasons for slippage for Group A, if applicable

When compared to FFY 2023, FFY 2024 data indicate an increased proficiency gap between all students and students with IEPs on the Grade 4 Reading assessment. In FFY 2023, the proficiency rate for all students was 39.05%, while students with IEPs demonstrated a proficiency rate of 13.01%, resulting in a proficiency gap of 26.04 percentage points.

In FFY 2024, proficiency for all students increased to 41.51%, while proficiency for students with IEPs increased modestly to 13.59%. Although both student groups showed improvement, the rate of growth for students with IEPs did not keep pace with the growth demonstrated by all students. As a result, the proficiency gap widened to 27.92 percentage points, reflecting an increase of 1.88 percentage points from FFY 2023.

This slippage may be attributed to several interrelated factors. As Delaware continues to prioritize the implementation of high-quality Tier 1 instructional reading materials statewide, increased instructional rigor has supported overall improvements in Grade 4 reading achievement. However, these systemwide gains did not result in proportional increases in proficiency for students with IEPs. Students with disabilities often require sustained, intensive, and individualized literacy instruction, and progress toward grade-level proficiency may occur at a slower rate when compared to nondisabled peers.

Additionally, staffing considerations may have influenced outcomes. Local education agencies continue to focus on recruiting, retaining, and supporting appropriately certified reading and special education educators while strengthening the consistent implementation of instructional supports, accommodations, and progress-monitoring practices.

Taken together, these factors may have contributed to the observed change in the proficiency gap between all students and students with IEPs on the Grade 4 Reading assessment. The State will continue to monitor subgroup performance data and provide targeted technical assistance to support instructional practices that promote improved literacy outcomes for students with disabilities and reduce achievement gaps under Indicator 3D. Improvement efforts will emphasize strengthening inclusive instructional practices, aligning IEP goals with grade-level literacy standards, and enhancing the use of data-driven interventions to accelerate progress and reduce the achievement gap in Grade 4 reading.

Provide reasons for slippage for Group C, if applicable

When compared to FFY 2023, FFY 2024 data indicate an increased proficiency gap between all students and students with IEPs on the High School Reading assessment. In FFY 2023, the proficiency rate for all students was 44.75%, while students with IEPs demonstrated a proficiency rate of 8.85%, resulting in a proficiency gap of 35.90 percentage points.

In FFY 2024, the proficiency rate for all students increased to 47.41%, and the proficiency rate for students with IEPs also increased to 9.95%. Although both student groups showed improvement, the gains for students with IEPs did not keep pace with the gains demonstrated by all students. As a result, the proficiency gap widened to 37.46 percentage points, reflecting an increase of 1.56 percentage points from FFY 2023.

This slippage suggests that statewide improvements in high school reading achievement were not realized proportionally by students with IEPs. As Delaware continues to focus on the implementation of high-quality Tier 1 instructional reading materials, increased instructional rigor has supported improved outcomes for the general student population. However, students with disabilities may require additional instructional scaffolding, targeted interventions, and sustained support to fully access more rigorous content, and progress toward proficiency may occur at a slower rate.

In addition, staffing considerations may have influenced performance outcomes. Local education agencies continue to focus on recruiting, retaining, and supporting appropriately certified reading and special education educators. Variability in staffing capacity and instructional continuity may have affected the consistent delivery of specialized instruction, accommodations, and progress monitoring necessary to accelerate reading achievement for students with IEPs.

The DDOE will continue to analyze subgroup performance data, monitor gap trends, and provide targeted technical assistance to LEAs. Improvement efforts will emphasize strengthening inclusive Tier 1 instruction, expanding access to evidence-based interventions, and supporting instructional practices that improve outcomes for students with disabilities and reduce proficiency gaps under Indicator 3D.

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	14.94%	41.07%	24.91	27.01	26.14	Met target	No Slippage

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
B	Grade 8	4.97%	26.56%	21.39	26.99	21.59	Met target	No Slippage
C	Grade HS	1.63%	18.41%	16.58	19.53	16.77	Met target	No Slippage

Provide additional information about this indicator (optional)

The Delaware Department of Education (DDOE) ensures that data for Indicator 3D is complete, accurate, reliable, and valid. In alignment with the Every Student Succeeds Act (ESSA), DDOE has placed particular emphasis on adhering to the federal requirement that no more than 1% of students statewide participate in assessment of alternate achievement standards. This requirement is intended to safeguard against disproportionality and ensure that students are appropriately assessed. As a result of sustained monitoring and technical assistance, Delaware has observed a continued decline in the number of students participating in alternate assessment, reflecting progress toward compliance with this requirement.

Students with the most significant cognitive disabilities continue to be appropriately assessed using assessment of alternate achievement standards, while students with less intensive needs are increasingly participating in the assessment of grade-level standards. As expected, this shift has influenced performance results across both assessment types, as students transitioning to the grade-level standards assessment may initially experience difficulty meeting grade-level expectations. To support improved outcomes, DDOE provides ongoing professional learning and technical assistance informed by stakeholder input to promote effective assessment practices and instructional alignment. To further guide improvement efforts, stakeholders collaborated to review historical assessment data, establish performance targets, and identify strategies to improve proficiency outcomes. The baseline for Indicator 3 was set using FFY 2017 data, reflecting student performance prior to the 2020 pandemic. Stakeholder participants included LEA special education leadership, members of the MTSS Advisory Council, the Access to General Education Curriculum (AGEC) Committee, educators, administrators, parents, school psychologists, and DDOE staff. Suggested strategies included expanded enrichment opportunities outside of the school day, increased access to instructional resources, enhanced family communication, and targeted supports for multilingual learners (MLLs).

DDOE regularly convenes statewide meetings with special education leaders and directors to examine Indicator 3 data, track progress toward targets, and identify areas for improvement. These data are also reviewed by the MTSS Advisory Council, which supports the implementation of a statewide multi-tiered framework focused on academic and behavioral success. Council discussions emphasize strengthening Tier 1 instruction, addressing the needs of multilingual learners, aligning math instruction to standards, and integrating MTSS practices to support academic achievement and social-emotional development. Delaware's MTSS regulations, enacted in 2021, reinforce the use of high-quality instructional materials, evidence-based interventions, early identification practices, and data-informed decision-making. DDOE further enhances its efforts through collaboration with national technical assistance partners, including the Office of Special Education Programs (OSEP), participating in webinars, peer learning networks, and resource development through organizations such as IDC, Signetwork, the IDEA Data Center, CCSSO, and NCSI.

Beginning in the 2023–2024 school year, DDOE launched a four-year collaboration with the SWIFT National Center on Inclusion Toward Rightful Presence. This initiative strengthens the State's commitment to building inclusive and equitable systems that ensure meaningful participation for all learners. Two LEAs and eight schools were selected as demonstration sites to model inclusive practices that support dynamic learners with intensive cognitive needs. These sites will serve as exemplars of effective inclusive practices, with a focus on improving academic and social outcomes and supporting successful transitions to postsecondary education, employment, and adult life. Lessons learned from this work will be expanded statewide to support broader system improvement.

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 must provide a definition of its minimum n and/or cell size itself and a description thereof (e.g., a State's n size of 15 represents the number of children with disabilities enrolled in an LEA, and a State's cell size of 5 represents the number of children with disabilities who have received out-of-school suspensions and expulsions of more than 10 days within the LEA).

The State must also provide rationales for its minimum n and/or cell size, including why the definitions chosen are reasonable and based on stakeholder input, and how the definitions ensure that the State is appropriately analyzing and identifying LEAs with significant discrepancy. The State must also indicate whether the minimum n and/or cell size represents a change from the prior SPP/APR reporting period. If so, the State must provide an explanation why the minimum n and/or cell size was changed.

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 2024 SPP/APR, use data from 2023-2024), 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:

-- Option 1: The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

-- Option 2: 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.

If, under Option 1, the State uses a State-level long-term suspension and expulsion rate for children with disabilities to compare to LEA-level long-term suspension and expulsion rates for the purpose of determining whether an LEA has a significant discrepancy, the State must provide the State-level long-term suspension and expulsion rate used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose long-term suspension/expulsion rate exceeds 2 percentage points above the State-level rate of 0.7%, the State must provide OSEP with the State-level rate of 0.7%).

If, under Option 2, the State uses a rate difference to compare the rates of long-term suspensions and expulsions for children with IEPs to the rates of long-term suspensions and expulsions for nondisabled children within the LEA, the State must provide the State-selected rate difference used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose rate of long-term suspensions and expulsions for children with IEPs is 4 percentage points above the long-term suspension/expulsion rate for nondisabled children, the State must provide OSEP with the rate difference of 4 percentage points). Similarly, if, under Option 2, the State uses a rate ratio to compare the rates of long-term suspensions and expulsions for children with IEPs to the rates of long-term suspensions and expulsions for nondisabled children within the LEA, the State must provide the State-selected rate ratio used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose ratio of its long-term suspensions and expulsions rate for children with IEPs to long-term suspensions and expulsions rate for nondisabled children is greater than 3.0, the State must provide OSEP with the rate ratio of 3.0).

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 2023-2024 school year, those 100 LEAs would have reported section 618 data in 2023-2024 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2024-2025, suspension/expulsion data from those 15 new LEAs would not be in the 2023-2024 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 2024 SPP/APR submission, States must use the number of LEAs reported in 2023-2024 (which can be found in the FFY 2023 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 noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2023	9.52%

FFY	2019	2020	2021	2022	2023
Target <=	40.00%	40.00%	32.00%	32.00%	9.52%
Data	0.00%	0.00%	0.00%	11.11%	9.52%

Targets

FFY	2024	2025
Target <=	8.52%	7.52%

Targets: Description of Stakeholder Input

Significant Discrepancy has multiple stakeholder groups from leadership across Delaware. GACEC, our SEA advisory group, Special Education Leadership which includes Special Education Directors and their supervisors, County Meetings from across the state that incorporate Special Education Directors, supervisors and principals, as well as Equity in IDEA and Equity PLC which includes general education teachers, parents, instructional coaches and MTSS leads. We focus on prevention as well as data literacy to improve outcomes for students across the state.

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
6	42	9.52%	8.52%	14.29%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The Delaware Department of Education (DDOE) recently removed the minimum cell size requirement to better ensure that LEAs are not suspending students at disproportionately high rates. Under this approach, if an LEA exceeds the rate ratio and has even one student with a suspension, DDOE reviews the LEA's policies, procedures, and practices. While this change has strengthened our ability to conduct meaningful reviews, it also means that an LEA with only a single student receiving more than 10 days of suspension may still be identified, as was the case in FFY24. Two of the six LEAs had only one student and one LEA had two students.

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

The rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for nondisabled children in the same LEA

State's definition of "significant discrepancy" and methodology

The DDOE used a new methodology for Significant Discrepancy for FFY23 based on stakeholder engagement. The state rate ratio threshold is a 3.0 and LEAs must exceed this threshold for one year and there is no minimum n and/or cell size that must be met to meet criteria for significant discrepancy. The DDOE calculates the LEAs' rate ratio by dividing the percentage of students with disabilities suspended or expelled greater than 10 days by the percentage of general education students suspended or expelled greater than 10 days within each LEA. If the LEA is over 3.0 they are identified with Significant Discrepancy. This methodology was done in conjunction with OSEP funded TA Center as well as OSEP to ensure we met the requirements. DDOE held stakeholder meetings to have them provide input on this new methodology

Provide additional information about this indicator (optional)

DDOE ensures that this data is complete, accurate, reliable, and valid for Indicator 4A. The baseline for the indicator changed for FFY23 as a new methodology for identifying Significant Discrepancy. The DDOE continues to actively engage with stakeholders to review data and inform improvement activities. Stakeholders include, but are not limited to, the Governor's Advisory Council for Exceptional Citizens, MTSS Leadership, Special Education Leadership, Special Education Director County meetings, Equity Professional Learning Community, and the Equity in IDEA stakeholder committee.

Review of Policies, Procedures, and Practices (completed in FFY 2024 using 2023-2024 data)

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

The state reviews all LEA data. After that review, six LEAs were over the state rate ratio threshold of 3.0 for one year. The state conducted robust review of those six LEAs policies, procedures and practices relating to the development of IEPs, the use of positive behavior interventions and supports, and procedural safeguards. The DDOE found 1 out of the 6 to be out of compliance with their policies, procedures and practices. The DDOE ensured these LEAs revised their policies, procedures and practices to comply with regulations and best practices for positive behavior, interventions and supports.

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

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.

The state ensured that all LEA identified with non-compliant policies, procedures and practices were revised to comply with requirements consistent with OSEP 23-01. The SEA reviewed the corrected policies, procedures and practices, developed corrective action plans including professional learning for the LEA so that systemic practices were changed.

Correction of Findings of Noncompliance Identified in FFY 2023

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
1	1	0	0

FFY 2023 Findings of Noncompliance Verified as Corrected

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

DDOE provided technical assistance to all LEAs regarding Significant Discrepancy. In addition, targeted technical assistance was provided directly to the one LEA identified with noncompliance. DDOE reviewed the Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within the one LEA identified with noncompliance and verified that the identified LEAs were correctly implementing regulatory requirements under IDEA, regarding Significant Discrepancy, within the one-year period

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

To identify noncompliance, DDOE reviewed data collected from the state data system for all 42 LEAs. Upon review of the data, only one LEA was identified with non-compliance.

The LEA required corrective action and timelines including correction of each instance of individual student noncompliance. A letter of findings was issued to the LEA within 90 days of identification of noncompliance. DDOE provided technical assistance to all LEAs regarding Significant Discrepency. Targeted technical assistance was provided directly to the LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the state data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

DDOE does not permit pre-finding correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4A - Prior FFY Required Actions

The State must report, in the FFY 2024 SPP/APR, on the correction of noncompliance that the State identified in FFY 2023 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Response to actions required in FFY 2023 SPP/APR

DDOE provided technical assistance to all LEAs regarding Signficant Discrepency. In addition, targeted technical assistance was provided directly to the one LEA identified with noncompliance. DDOE reviewed the Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within the one LEA identified with noncompliance and verified that the identified LEAs were correctly implementing regulatory requirements under IDEA, regarding Significant Discrepency, within the one-year period.

To identify noncompliance, DDOE reviewed data collected from the state data system for all 42 LEAs. Upon review of the data, only one LEA was identified with non-compliance.

The LEA required corrective action and timelines including correction of each instance of individual student noncompliance. A letter of findings was issued to the LEA within 90 days of identification of noncompliance. DDOE provided technical assistance to all LEAs regarding Significant Discrepency. Targeted technical assistance was provided directly to the LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the state data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct

4A - OSEP Response

4A - Required Actions

The State must report, in the FFY 2025 SPP/APR, on the correction of noncompliance that the State identified in FFY 2024 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2025 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

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 must provide a definition of its minimum n and/or cell size itself and a description thereof (e.g., a State's n size of 15 represents the number of children with disabilities enrolled in an LEA, by race and ethnicity, and a State's cell size of 5 represents the number of children with disabilities who have received out-of-school suspensions and expulsions of more than 10 days within the LEA, by race and ethnicity).

The State must also provide rationales for its minimum n and/or cell size, including why the definitions chosen are reasonable and based on stakeholder input, and how the definitions ensure that the State is appropriately analyzing and identifying LEAs with significant discrepancy, by race and ethnicity. The State must also indicate whether the minimum n and/or cell size represents a change from the prior SPP/APR reporting period. If so, the State must provide an explanation why the minimum n and/or cell size was changed.

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 2024 SPP/APR, use data from 2023-2024), 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:

-- Option 1: The rates of suspensions and expulsions for children with IEPs among LEAs within the State; or

-- Option 2: 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.

If, under Option 1, the State uses a State-level long-term suspension and expulsion rate for children with disabilities to compare to LEA-level long-term suspension and expulsion rates for the purpose of determining whether an LEA has a significant discrepancy, by race and ethnicity, the State must provide the State-level long-term suspension and expulsion rate used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose long-term suspension/expulsion rate exceeds 2 percentage points above the State-level rate of 0.7%, the State must provide OSEP with the State-level rate of 0.7%).

If, under Option 2, the State uses a rate difference to compare the rates of long-term suspensions and expulsions for children with IEPs, by race and ethnicity, to the rates of long-term suspensions and expulsions for nondisabled children within the LEA, the State must provide the State-selected rate difference used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose rate of long-term suspensions and expulsions for children with IEPs, by race and ethnicity, is 4 percentage points above the long-term suspension/expulsion rate for nondisabled children, the State must provide OSEP with the rate difference of 4 percentage points). Similarly, if, under Option 2, the State uses a rate ratio to compare the rates of long-term suspensions and expulsions for children with IEPs, by race and ethnicity, to the rates of long-term suspensions and expulsions for nondisabled children within the LEA, the State must provide the State-selected rate ratio used in its methodology (e.g., if a State has defined significant discrepancy to exist for an LEA whose ratio of its long-term suspensions and expulsions rate for children with IEPs, by race and ethnicity, to long-term suspensions and expulsions rate for nondisabled children is greater than 3.0, the State must provide OSEP with the rate ratio of 3.0).

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 2023-2024 school year, those 100 LEAs would have reported section 618 data in 2023-2024 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2024-2025, suspension/expulsion data from those 15 new LEAs would not be in the 2023-2024 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 2023 SPP/APR submission, States must use the number of LEAs reported in 2023-2024 (which can be found in the FFY 2023 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 noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

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
2023	33.30%

FFY	2019	2020	2021	2022	2023
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	14.29%	33.33%

Targets

FFY	2024	2025
Target	0%	0%

FFY 2024 SPP/APR Data

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

YES

If yes, the State must provide a definition of its minimum n and/or cell size itself and a description thereof (e.g., a State's n size of 15 represents the number of children with disabilities enrolled in an LEA, and a State's cell size of 5 represents the number of children with disabilities, by race and ethnicity, who have received out-of-school suspensions and expulsions of more than 10 days within the LEA).

Cell size of 3 represents the number of children with and without disabilities, by race and ethnicity, who have received out-of-school suspensions and expulsions of more than 10 days within the LEA

If yes, the State must also provide rationales for its minimum n and/or cell size, including why the definitions chosen are reasonable and based on stakeholder input, and how the definitions ensure that the State is appropriately analyzing and identifying LEAs with significant discrepancy.

This new methodology was done in conjunction with OSEP-funded centers as well as OSEP to ensure we are meeting the requirements. The state held stakeholder meetings to have them provide input on this new methodology. This included The Governors Advisory Council for Exceptional Citizens (DDOE's IDEA advisory group), Special Education Directors, DE-MTSS Cadre, DDOE's Equity PLC, DDOE's Equity in IDEA which includes educators and parents in various roles throughout the state. We wanted to capture LEAs that were significantly discrepant in their suspension and expulsion rates by racial or ethnic groups. The state along with stakeholders thought the cell size of 3 and the rate ratio of 3.0 would allow us identify LEAs that were discrepant and would allow us to ensure we were reviewing enough policy, practices and procedures to ensure they were in compliance with federal and state compliance. DDOE and stakeholders felt that decreasing the cell size would give DDOE a more representative sample to determine Significant Discrepancy.

If yes, the State must also indicate whether the minimum n and/or cell size represents a change from the prior SPP/APR reporting period.

The State did not make any changes from the prior SPP/APR reporting period.

If yes, the State must provide an explanation why the minimum n and/or cell size was changed.

N/A

If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/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.

Number of LEAs that have a significant discrepancy, by race or ethnicity	Number of those LEAs that have policies, procedure or practices that contribute to the significant discrepancy and do not comply with requirements	Number of LEAs that met the State's minimum n/cell-size	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
5	1	13	33.33%	0%	Not Valid and Reliable	N/A	N/A

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

The rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for nondisabled children in the same LEA

Were all races and ethnicities included in the review?

YES

State's definition of "significant discrepancy" and methodology

The state rate ratio threshold is a 3.0 and LEAs must exceed this threshold for one year and meet the minimum cell size requirement of 3 or more students with disabilities in a particular racial/ethnic group to meet criteria for significant discrepancy. The DDOE calculates the LEAs' rate ratio by dividing the percentage of students by race or ethnicity with disabilities suspended or expelled greater than 10 days by the percentage of general education students suspended or expelled greater than 10 days within each LEA. If the LEA's rate ratio is over 3.0 they will be identified with Significant Discrepancy.

Provide additional information about this indicator (optional)

This methodology was done in conjunction with OSEP funded centers as well as OSEP to ensure we are meeting the requirements for FFY23. Due to the change in methodology for Significant Discrepancy the baseline was changed for FFY23. DDOE held stakeholder meetings to have them provide input on this new methodology. This included The Governors Advisory Council for Exceptional Citizens (DDOE's IDEA advisory group), Special Education Directors, DE-MTSS Cadre, Equity in IDEA and DDOE's Equity PLC which includes parents and educators in various roles throughout the state.

Review of Policies, Procedures, and Practices (completed in FFY 2024 using 2023-2024 data)

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

The DDOE does a robust review of policies, procedures and practices for every LEA identified with Significant Discrepancy. Some of the areas included in the review is how IEP teams consider the use of positive behavioral interventions or other strategies to address behavioral needs and document such considerations in the IEP, how the LEA documents and provides services to students with disabilities after the 10th school day of removal and what measures taken by the LEA to ensure that the behavior does not recur when a student with a disability is suspended or expelled for greater than 10 days. The LEA must have all areas outlined in the SEA monitoring protocol in their policies, procedures and practices. 1 LEA had non-compliant policies, procedures and practices and were identified with Significant Discrepancy.

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

If YES, select one of the following:

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP QA 23-01, dated July 24, 2023.

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.

DDOE identified one LEA with non-compliance for FFY24. This LEA was directed to revise their policies, procedures and practices. DDOE still has not received the corrected policies, procedures and practices that are consistent with OSEP QA 23-01 so the LEA was put on an intensive corrective action plan. The superintendent of the LEA as well as the Special Education Director of the LEA have been notified and the DDOE will continue to pursue the revision.

Correction of Findings of Noncompliance Identified in FFY 2023

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

FFY 2023 Findings of Noncompliance Verified as Corrected

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

DDOE provided technical assistance to all LEAs regarding Significant Discrepancy. In addition, targeted technical assistance was provided directly to the 4 LEAs identified with noncompliance. DDOE reviewed the Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within the 4 LEAs identified

with noncompliance and verified that the identified LEAs were correctly implementing regulatory requirements under IDEA, regarding Significant Discrepancy, within the one-year period

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

To identify noncompliance, DDOE reviewed data collected from the state data system for all 42 LEAs. Out of the 42, four were identified with Significant Discrepency.

4 LEAs required corrective action and timelines including correction of each instance of individual student noncompliance. A letter of findings was issued to the LEAs within 90 days of identification of noncompliance. DDOE provided technical assistance to all LEAs regarding Significant Discrepency. Targeted technical assistance was provided directly to the LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the state data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

DDOE does not permit pre-finding corrections.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

4B - Prior FFY Required Actions

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. The State must demonstrate, in the FFY 2024 SPP/APR, that the districts identified with noncompliance in FFY 2023 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case or child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

DDOE provided technical assistance to all LEAs regarding Significant Discrepency. In addition, targeted technical assistance was provided directly to the 4 LEAs identified with noncompliance. DDOE reviewed the Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within the 4 LEAs identified with noncompliance and verified that the identified LEAs were correctly implementing regulatory requirements under IDEA, regarding Significant Discrepency, within the one-year period.

To identify noncompliance, DDOE reviewed data collected from the state data system for all 42 LEAs. 4 LEAs required corrective action and timelines including correction of each instance of individual student noncompliance. A letter of findings was issued to the LEAs within 90 days of identification of noncompliance. DDOE provided technical assistance to all LEAs regarding Significant Discrepency. Targeted technical assistance was provided directly to the LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the state data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

4B - OSEP Response

The State did not report the number of districts that did not meet the State-established minimum "n" size requirement and were excluded from the calculation.

4B- Required Actions

The State did not provide valid and reliable data for FFY 2024. The State must provide valid and reliable data for FFY 2025 in the FFY 2025 SPP/APR.

In reporting its FFY 2025 data in the FFY 2025 SPP/APR, the State must report the number of districts that were excluded from the calculation because they did not meet the State-established minimum "n" size requirement.

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	2019	2020	2021	2022	2023
A	2020	Target >=	72.00%	64.54%	65.54%	66.54%	67.54%
A	64.54%	Data	64.25%	64.54%	64.95%	64.93%	65.11%
B	2020	Target <=	14.70%	15.09%	14.59%	14.09%	13.59%
B	15.09%	Data	14.80%	15.09%	15.11%	15.21%	15.07%
C	2020	Target <=	3.50%	4.93%	4.73%	4.43%	4.03%
C	4.93%	Data	4.83%	4.93%	4.77%	4.72%	4.53%

Targets

FFY	2024	2025
Target A >=	68.54%	69.54%
Target B <=	13.09%	12.59%
Target C <=	3.53%	3.03%

Targets: Description of Stakeholder Input

In preparation for setting targets for Indicator 5 and reporting targets in the FFY 2020 SPP/APR, Exceptional children Resources (ECR) staff conducted 10 meetings with various stakeholder groups. These included the Multi-Tiered System of Support Advisory (MTSS Advisory), the Access to General Education Curriculum (AGEC) Committee, and Lunch and Learn sessions with parents in collaboration with the Parent Information Center of Delaware. Additional stakeholders included the Governor's Advisory Council for Exceptional Citizens (IDEA State Advisory Panel) and local education agency (LEA) Special Education Directors. ECR ensured broad demographic representation—covering race, ethnicity, geographic locations, disability categories, advocacy groups, advisory groups, parents, and families—when inviting stakeholders. These meetings focused on sharing and analyzing historical and current data, setting targets, and identifying strategies for improvement.

ECR maintains ongoing engagement with stakeholders throughout the year to review data, monitor progress, and implement improvement activities. Statewide Least Restrictive Environment (LRE) placement data was shared during County and Charter Special Education Director meetings. During these sessions, special education directors, the AGEC Committee, and PIC analyzed the data to identify root causes and develop targeted improvement strategies.

Additionally, Delaware has partnered with the SWIFT Education Center to advance inclusive practices through the concept of "Rightful Presence." As part of this initiative, Delaware received a grant to support two Local Education Agencies (LEAs), with efforts focused on four schools within each LEA.

This support has included strengthening Multi-Tiered Systems of Support (MTSS), promoting high-quality instruction for all students, and ensuring the rightful presence and inclusion of students with the most significant cognitive disabilities.

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	Total number of children with IEPs aged 5 (kindergarten) through 21	26,341
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	17,029
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	3,940
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	1,011
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	36
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	160

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 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	17,029	26,341	65.11%	68.54%	64.65%	Did not meet target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	3,940	26,341	15.07%	13.09%	14.96%	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]*	1,207	26,341	4.53%	3.53%	4.58%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

The Delaware Department of Education (DDOE) collaborated with stakeholders from the Access to General Education Curriculum Committee and Special Education leadership from LEAs across the state to review historical and baseline data, establish targets, and identify improvement activities. FFY 2020 was set as a new baseline to account for the inclusion of 5-year-old children with disabilities enrolled in kindergarten. DDOE ensures that data for Indicator 5 is complete, accurate, reliable, and valid. The data is thoroughly triangulated and verified through collaboration with the Data Management workgroup within the DDOE. The department continues to provide ongoing guidance and technical assistance to LEAs regarding Least Restrictive Environments (LRE). This support includes the development of guidance documents, professional development opportunities, and training sessions conducted during Access to General Education Committee meetings, LEA Special Education Director Leadership meetings, and Hearing Officer meetings. Additionally, DDOE conducts individualized meetings with LEAs to analyze data, address challenges, and support the implementation of best practices related to LRE. In the 2023-2024 school year, DDOE began a four-year partnership with SWIFT National Center on Inclusion Toward Rightful

Presence. This initiative enhances DDOE's efforts to build equitable systems that create rightful presence for students, families, and communities. Two LEAs and eight of their schools, were chosen as model demonstration sites to journey from inclusion toward rightful presence for dynamic learners with intensive cognitive needs, including those identified with Autism, Intellectual Disability, Deaf Blind and Traumatic Brain Injury. Model Demonstration Sites will become exemplars of how Dynamic Learners can be more equitably and meaningfully engaged in school, experience improved academic and social outcomes, and successfully transition to college, career, and other adult life circumstances. This important work will be scaled up to include more LEAs and their students with projected positive student outcomes.

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 (Individual) – 6A, 6B, 6C

Part	FFY	2019	2020	2021	2022	2023
A1	Target >=		26.86%	36.70%	36.80%	36.90%
A1	Data		26.86%	32.42%	35.07%	35.41%
A2	Target >=		28.52%	41.10%	41.90%	42.70%
A2	Data		28.52%	36.36%	38.61%	42.89%
A3	Target >=		35.54%	44.30%	46.00%	47.90%
A3	Data		35.54%	36.33%	41.11%	46.15%
B1	Target <=		55.32%	40.40%	40.00%	39.50%
B1	Data		55.32%	50.78%	48.61%	47.12%
B2	Target <=		50.72%	40.40%	40.00%	39.50%
B2	Data		50.72%	47.97%	45.09%	42.26%
B3	Target <=		41.81%	38.90%	38.00%	37.10%
B3	Data		41.81%	48.55%	45.48%	40.13%
C1	Target <=		0.00%-1.80%	0.00%-1.80%	0.00%-1.80%	0.00%-1.80%

C1	Data		1.06%	0.91%	0.43%	0.66%
C2	Target <=		0.00%-0.80%	0.00%-0.80%	0.00%-0.80%	0.00%-0.80%
C2	Data		0.29%	0.47%	0.00%	0.16%
C3	Target <=		0.00%-0.60%	0.00%-0.60%	0.00%-0.60%	0.00%-0.60%
C3	Data		0.35%	0.96%	0.58%	0.33%

Targets: Description of Stakeholder Input

The State Early Childhood Special Education (ECSE) Coordinator participates in Equity- and Inclusion-Focused Leadership coaching through the Early Childhood Technical Assistance Center. This coaching emphasizes intentional co-partnering with individuals, organizations, and systems and deliberate inclusion of diverse stakeholders representing varied demographics (e.g., race/ethnicity, geographic location, disability categories, advocacy and advisory groups, and families). In collaboration with other SEA staff, the State ECSE Coordinator ensures diverse stakeholder representation in the planning and implementation of stakeholder engagement activities. As a result of this work, the State ECSE Coordinator facilitates statewide meetings that include a broad range of stakeholders and focuses on sharing information related to preschool environments, the importance of inclusive early childhood settings, and data demonstrating improved outcomes for children who remain in regular early childhood environments.

The Office of Early Childhood Intervention (OECI) engages the Governor's Advisory Council for Exceptional Citizens (GACEC) and the GACEC Early Learning Subcommittee in ongoing data analysis and discussions of improvement activities related to Indicators 6, 7, and 12 during monthly meetings.

Stakeholder input is also gathered through quarterly County Special Education Leadership Meetings and monthly Early Childhood Special Education (ECSE) meetings. These forums include presentations, data analysis, target-setting discussions, and improvement planning, and provide opportunities for LEA Special Education Directors and ECSE staff to offer feedback on data, identify barriers to meeting Indicator 6 targets, and recommend strategies for improvement.

In addition, a cross-county team of Early Childhood Special Education professionals continues to work on the integration of the Early Childhood Outcomes (ECO) and Individualized Education Program (IEP) processes. This team represents all three counties in Delaware and seeks to improve the quality of ECO data and IEPs, increase family engagement and understanding of the ECO process, strengthen staff understanding of the connection between outcomes measurement and IEP development, and promote the development of more functional IEP goals. The team has developed ECO-aligned tools, including a Parent Input Form, Observation Form, and Evaluation Summary Report (ESR), which have been shared statewide. Stakeholders are invited to provide input and feedback on these tools through Microsoft Forms questionnaires.

Targets

Please select if the State wants to set baselines 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.

Individual Targets

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

Target Range is used

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

Part	Baseline Year	Baseline Data
A1, age 3	2020	26.86%
A2, age 4	2020	28.52%
A3, age 5	2020	35.54%
B1, age 3	2020	55.32%
B2, age 4	2020	50.72%
B3, age 5	2020	41.81%
C1, age 3	2020	1.06%
C2, age 4	2020	0.29%
C3, age 5	2020	0.35%

Individual Targets – 6A, 6B

FFY	2024	2025
Target A1, age 3 >=	37.00%	37.50%
Target B1, age 3 <=	39.00%	38.50%

Target A2, age 4 >=	43.50%	44.40%
Target B2, age 4 <=	39.00%	38.50%
Target A3, age 5 >=	49.80%	51.80%
Target B3, age 5 <=	36.20%	35.40%

Individual Targets (with Target Ranges) – 6C

FFY	2024 (low)	2024 (high)	2025 (low)	2025 (high)
Target C1, age 3 <=	0.00%	1.80%	0.00%	1.80%
Target C2, age 4 <=	0.00%	0.80%	0.00%	0.80%
Target C3, age 5 <=	0.00%	0.60%	0.00%	0.60%

Prepopulated Data

Data Source:

SY 2024-25 Children with Disabilities (IDEA) Early Childhood (EDFacts file spec FS089; Data group 613)

Date:

07/30/2025

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	1,078	1,429	395	2,902
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	396	627	187	1,210
b1. Number of children attending separate special education class	475	574	152	1,201
b2. Number of children attending separate school	38	30	10	78
b3. Number of children attending residential facility	0	0	0	0
c1. Number of children receiving special education and related services in the home	4	4	0	8

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 2024 SPP/APR Data for Age 3

Preschool Environments	Number of children with IEPs aged 3 served	Total number of children with IEPs aged 3	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A1. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	396	1,078	35.41%	37.00%	36.73%	Did not meet target	No Slippage
B1. Separate special education class, separate school, or residential facility	513	1,078	47.12%	39.00%	47.59%	Did not meet target	No Slippage

FFY 2024 SPP/APR Data for Age 3

Preschool Environments	Number of children with IEPs aged 3 served	Total number of children with IEPs aged 3	FFY 2023 Data	FFY 2024 Target (low)	FFY 2024 Target (high)	FFY 2024 Data	Status	Slippage
C1. Home	4	1,078	0.66%	0.00%	1.80%	0.37%	Met target	No Slippage

FFY 2024 SPP/APR Data for Age 4

Preschool Environments	Number of children with IEPs aged 4 served	Total number of children with IEPs aged 4	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A2. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	627	1,429	42.89%	43.50%	43.88%	Met target	No Slippage
B2. Separate special education class, separate school, or residential facility	604	1,429	42.26%	39.00%	42.27%	Did not meet target	No Slippage

FFY 2024 SPP/APR Data for Age 4

Preschool Environments	Number of children with IEPs aged 4 served	Total number of children with IEPs aged 4	FFY 2023 Data	FFY 2024 Target(low)	FFY 2024 Target(high)	FFY 2024 Data	Status	Slippage
C2. Home	4	1,429	0.16%	0.00%	0.80%	0.28%	Met target	No Slippage

FFY 2024 SPP/APR Data for Age 5

Preschool Environments	Number of children with IEPs aged 5 served	Total number of children with IEPs aged 5	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A3. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	187	395	46.15%	49.80%	47.34%	Did not meet target	No Slippage
B3. Separate special education class, separate school, or residential facility	162	395	40.13%	36.20%	41.01%	Did not meet target	No Slippage

FFY 2024 SPP/APR Data for Age 5

Preschool Environments	Number of children with IEPs aged 5 served	Total number of children with IEPs aged 5	FFY 2023 Data	FFY 2024 Target(low)	FFY 2024 Target(high)	FFY 2024 Data	Status	Slippage
C3. Home	0	395	0.33%	0.00%	0.60%	0.00%	Met target	No Slippage

Provide additional information about this indicator (optional)

The State ECSE Coordinator holds state-wide early childhood special education (ECSE) meetings with a broad representation of all LEAs, where Indicator 6 data is routinely reviewed to determine root causes of noncompliance and strategies to address the root causes. The information discussed at the ECSE meetings is shared at the quarterly county meetings for special education directors and quarterly special education leadership meetings hosted by ECR. DDOE/Office of Early Childhood Intervention (OECI) staff engages with Head Start, DECC (Delaware Early Childhood Council), Early Hearing Detection and Intervention (EHDI) to receive stakeholder input to assist in planning for improvement and with the Office of Childcare Licensing to discuss inclusion in early childhood programs. DDOE/OECI staff educates stakeholders regarding the importance of inclusion in early childhood programs through presentations at statewide conferences including LEND, Nemours Audiology Conference, Making a Difference Conference and Family Childcare Conference as well as at quarterly early childhood Transition Collaborative meetings.

DDOE ensures that this data is complete, accurate, reliable, and valid for indicator 6. DDOE provides on-going technical assistance through professional learning and training in the monthly early childhood special education meetings, quarterly special education director county level meetings and quarterly special education leadership meetings. In addition, DDOE meets individually with LEAs to provide technical assistance around problem solving, reviewing, and analyzing their data and supporting the LEA's implementation of evidence-based practices. DDOE has also developed guidance documents and resources focused on preschool environments and provides professional learning and training through the DDOE supported online learning platform known as Schoology.

Three LEAs have included Indicator 6 on their improvement plans for FFY23, and 6 districts are currently participating in targeted TA to Improve Inclusive Practices in ECSE/Support Children with IEPs in the Regular Early Childhood Program. The data and information gathered from the targeted TA will be used to begin creating a Framework for Early Childhood Inclusion in Delaware.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See 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	2019	2020	2021	2022	2023
A1	2020	Target >=	91.00%	86.00%	86.50%	87.20%	88.31%
A1	86.00%	Data	85.99%	84.61%	85.59%	80.19%	80.41%

A2	2020	Target >=	60.70%	47.53%	48.42%	49.32%	50.21%
A2	47.53%	Data	46.63%	47.03%	53.86%	46.51%	44.78%
B1	2020	Target >=	93.40%	87.04%	87.27%	87.49%	87.72%
B1	87.04%	Data	86.84%	85.24%	85.73%	88.34%	83.65%
B2	2020	Target >=	54.80%	46.12%	46.62%	47.12%	47.62%
B2	46.12%	Data	44.97%	43.86%	49.83%	50.06%	47.29%
C1	2020	Target >=	92.30%	88.31%	88.65%	88.99%	89.32%
C1	88.31%	Data	87.73%	85.54%	85.59%	85.33%	83.37%
C2	2020	Target >=	65.50%	59.35%	59.65%	59.95%	60.25%
C2	59.35%	Data	59.14%	56.57%	61.94%	58.14%	54.42%

Targets

FFY	2024	2025
Target A1 >=	89.00%	89.51%
Target A2 >=	51.11%	52.00%
Target B1 >=	87.94%	88.71%
Target B2 >=	48.12%	48.62%
Target C1 >=	89.66%	90.00%
Target C2 >=	60.55%	60.85%

Targets: Description of Stakeholder Input

The State Early Childhood Special Education (ECSE) Coordinator continues to participate in Equity and Inclusion–Focused Leadership coaching through the Early Childhood Technical Assistance Center. This work emphasizes intentional co-partnering with individuals, organizations, and systems to ensure meaningful stakeholder engagement that reflects diverse demographics, including race/ethnicity, geographic location, disability categories, advocacy organizations, advisory groups, and families. The ECSE Coordinator collaborates with other SEA staff to intentionally invite diverse stakeholders when planning and conducting stakeholder engagement activities.

The Office of Early Childhood Intervention (OECI) engages stakeholders through ongoing collaboration with the Governor's Advisory Council for Exceptional Citizens (GACEC) and the GACEC Early Learning Subcommittee. During monthly meetings, OECI facilitates data review, analysis, and discussion of improvement activities related to Indicators 6, 7, and 12.

Stakeholder input is also gathered through quarterly County Special Education Leadership Meetings and monthly ECSE meetings. These meetings include presentations, data analysis, target-setting discussions, and identification of barriers and strategies to improve Indicator 7 outcomes, with opportunities for feedback from LEA Special Education Directors and ECSE staff.

A team of ECSE professionals continues to engage stakeholders in the development of a framework to integrate the Early Childhood Outcomes (ECO) and Individualized Education Program (IEP) processes. This work is intended to improve the quality of ECO data and IEPs, strengthen family involvement and understanding of the ECO process, enhance staff understanding of the connection between outcomes measurement and IEP development, and support the development of more functional IEP goals. The team developed ECO-aligned tools, including a Parent Input Form, Observation Form, and Evaluation Summary Report (ESR), which were shared statewide. Stakeholder input was solicited through Microsoft Forms questionnaires.

OECI staff further engage stakeholders by discussing data and regulatory requirements during quarterly Transition Collaborative Meetings, presenting at statewide conferences (e.g., Nemours Annual Audiology Conference and First State Family Childcare Conference), participating in Early Childhood Mental Health meetings, and presenting at individual school district meetings.

FFY 2024 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

959

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	33	3.44%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	126	13.14%

Outcome A Progress Category	Number of children	Percentage of Children
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	372	38.79%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	268	27.95%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	160	16.68%

Outcome A	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)*	640	799	80.41%	89.00%	80.10%	Did not meet target	No Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	428	959	44.78%	51.11%	44.63%	Did not meet target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	25	2.61%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	118	12.30%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	366	38.16%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	352	36.70%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	98	10.22%

Outcome B	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)*	718	861	83.65%	87.94%	83.39%	Did not meet target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	450	959	47.29%	48.12%	46.92%	Did not meet target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	30	3.13%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	103	10.74%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	306	31.91%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	353	36.81%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	167	17.41%

Outcome C	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)*	659	792	83.37%	89.66%	83.21%	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. *Calculation: (d+e)/(a+b+c+d+e)*	520	959	54.42%	60.55%	54.22%	Did not meet target	No Slippage

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.

The SEA has continued to permit using information reported from parents, observations, and records review if use of the other approved instruments, listed below are not practical: Adaptive Behavior Assessment System (ABAS) • Assessment of Basic Language and Learning Skills Revised (ABLLS-R) • Callier Azusa Scale • Carolina Curriculum Assessment for Infants and Toddlers with Special Needs • Carolina Curriculum Assessment for Preschoolers with Special Needs • Creative Curriculum • Developmental Assessment for Individuals with Severe Disabilities – 3rd Edition (DASH-3) • Early Learning Survey • Early Start Denver Model (ESDM) checklist (in conjunction with TSG) • Evaluation Summary Report (to be used for entry COS only) • Goldman Fristoe Test of Articulation (GFTA-3) For children identified with a Speech and/or Language Impairment, if GFTA-3 is selected as the primary assessment, a secondary assessment must also be used so all 3 Outcomes are addressed. • Record Review for Transfers Only • The Ounce Scale • The Photo Articulation Test – 3rd Edition (PAT-3) – use for outcome #2 ONLY • Teaching Strategies GOLD • Verbal Behavior Milestones Assessment and Placement Program (VB-MAPP) • Vineland Adaptive Behavior Scale- 3rd Edition • Work Sampling

In past years, the Ages and Stages Questionnaire-3 AND Ages and Stages SE-2 (referred to as ASQ on the COS Form) could be used only for children identified with Speech and/or Language Impairment and are not attending a childcare facility or preschool program that is using an approved assessment OR receiving itinerant services (if the program is not already using another approved assessment). Since the state uses the ASQ for their Developmental Screening tool as per the regulations that every child who attends a childcare must be screened annually, the ASQ is can no longer be used by Itinerant staff and SLPs. The state purchased the Battelle Developmental Inventory (BDI) screener for all districts to use for these students.

Provide additional information about this indicator (optional)

The State ECSE Coordinator holds state-wide Early Childhood Special Education (ECSE) meetings with a broad representation of all LEAs, where data is routinely reviewed at the state and LEA levels around Indicator 7 to determine root causes of slippage at the local level and strategies to address the root causes. The information discussed at the ECSE meetings is shared at the quarterly County Meetings for Special Education Directors and quarterly Special Education Leadership meetings hosted by Exceptional Children's Resources (ECR).

Delaware continues to prepare a framework to integrate the Early Childhood Outcomes and Individualized Education Program Processes. Our goal is to improve the efficiency and quality of child outcomes measurement; for the SEA and LEA to increase confidence in child outcomes data for use with programmatic decision making and federal reporting; and to improve IEP development practices by advancing parent input, increasing emphasis on children's strengths, and maximizing development of functional IEP goals to assist in improving child outcomes. Through questionnaires completed by ECSE staff in LEAs throughout DE, we have learned that staff requires additional training on the Early Childhood Outcomes Process, completing the Child Outcomes Summary Form, use of age anchoring tools, how and when to collect data and who the team members are. To address these findings, and ensure that parents are included in the ECO process and staff are able to obtain the data required to complete the Child Outcome Summary Form and use the data collected to inform functional IEP goals, we have created a course in our Professional Development System using the ECTA COS Process Professional Development in order to give credential credits for ECSE staff, created Early Childhood Outcome Aligned documents (Parent Input Form, Observation Form), and aligned Delaware's current Evaluation Summary Report to the Early Childhood Outcomes. In addition, Delaware's Office of Early Learning has worked to replace the Delaware Early Learning Foundations with the Head Start Early Learning Outcomes Framework, which became our new age anchoring tool as of 7/1/25.

For FFY24, the DDOE purchased Battelle Developmental Inventory Screening tools, and provided training on the use of this tool, to replace the ASQ as the tool used for children with a classification of Speech and/or Language Impairment who are not attending a childcare facility or preschool program who uses an approved curriculum.

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 2024 SPP/APR, compare the FFY 2024 response rate to the FFY 2023 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

In preparation for establishing Indicator 8 targets and submitting the FFY 2020 SPP/APR, Exceptional Children Resources (ECR) staff facilitated ten stakeholder meetings. These sessions included Lunch and Learn events for parents, coordinated with the Parent Information Center of Delaware (PIC). Other stakeholder groups involved the Governor's Advisory Council for Exceptional Citizens (which serves as the IDEA State Advisory Panel) and Special Education Directors from local education agencies (LEAs). ECR prioritized inclusive stakeholder participation by ensuring representation across diverse demographics such as race, ethnicity, region, disability categories, family perspectives, advocacy organizations, and advisory bodies. Throughout these meetings, participants examined historical and current data, discussed target-setting considerations, and contributed ideas for improvement efforts.

ECR maintains ongoing collaboration with GACEC, LEA Special Education Directors, and parent groups throughout the year to continually analyze data, track progress, and support implementation of improvement initiatives. This includes reviewing survey findings and designing targeted actions based on the results. Additionally, the DDOE engaged in the PIC Leadership Conference and Parent Mentor Training, where staff emphasized the significance and intended purpose of the parent survey in informing statewide improvement.

Historical Data

Baseline Year	Baseline Data
2017	89.54%

FFY	2019	2020	2021	2022	2023
Target >=	90.00%	90.00%	90.50%	91.00%	91.50%

Data	92.33%	94.07%	91.33%	92.30%	81.60%

Targets

FFY	2024	2025
Target >=	92.00%	92.50%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
667	761	81.60%	92.00%	87.65%	Did not meet 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 DDOE distributes a parent survey to the families of all students with IEPs, including both preschool and school-aged children. LEAs are required to enter and maintain accurate data within Delaware's electronic statewide pupil accounting system. This data includes key information such as eligibility determination dates, disability codes, and IEP meetings, initiation, and end dates. By mandating that all LEAs input this information into the statewide system, the DDOE can effectively identify preschool and school-aged children receiving special education and related services, ensuring that all families with an email address receive the parent survey. To ensure all parents have access to the survey, LEAs are required to provide the survey's QR code and/or website URL during every Individualized Education Program (IEP) meeting. This practice promotes accessibility and encourages parent participation in the survey process. The DDOE, in collaboration with LEAs, ensures that data is complete, accurate, reliable, and valid for Indicator 8 through established procedures and practices for data collection, including the annual December 1st child count.

The number of parents to whom the surveys were distributed.

24,672

Percentage of respondent parents

3.08%

Response Rate

FFY	2023	2024
Response Rate	0.65%	3.08%

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

The DDOE analyzed statewide demographic data for students receiving special education services and compared it to the demographics of survey respondents. A discrepancy analysis with a ±3 percentage point threshold was conducted to assess the representativeness of the survey respondents. Demographic groups with response data exceeding the statewide average by more than three percentage points were deemed overrepresented, while those falling by more than three percentage points below were considered underrepresented.

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.

The DDOE analyzed the demographics of students whose parents responded to the Indicator 8 Parent Involvement Survey to determine the extent to which respondents were representative of the statewide population of students receiving special education and related services. As required, the analysis examined race and ethnicity and included an additional demographic category—disability category—based on stakeholder recommendations from the Parent Information Center of Delaware (PIC), Statewide Special Education Leadership, and LEA Special Education Directors.

The DDOE analyzed survey response data for parents of children receiving special education and related services, comparing the data to statewide demographics across race and ethnicity categories.

American Indian/Alaskan Native: Statewide representation of student with IEPs = 0.40%, Representation of survey respondents = 0.67%

Asian American: Statewide representation of student with IEPs = 2.10%, Representation of survey respondents = 3.01%

Native Hawaiian/Other Pacific Islander: Statewide representation of student with IEPs = 0.10%, Representation of survey respondents = 0.11%

Hispanic/Latino: Statewide representation of student with IEPs = 18.20%, Representation of survey respondents = 12.25%

Black/African American: Statewide representation of student with IEPs = 36.60%, Representation of survey respondents = 21.16%

White/Caucasian: Statewide representation of student with IEPs = 37.20%, Representation of survey respondents = 51.00%

Multi-Racial: Statewide representation of student with IEPs = 5.50%, Representation of survey respondents = 9.69%

Based on the +/- 3 metric, race and ethnicity categories of American Indian/Alaskan Native, Asian American, and Native Hawaiian/Other Pacific Islander aligned with state demographic data, while African America/Black, Hispanic/Latino, Caucasian/White and Multiracial were underrepresented.

In addition to the race and ethnicity analysis, the DDOE reviewed survey participation by disability category, which stakeholders identified as a meaningful additional demographic group for analysis.

Disability Category

Autism: Statewide representation of students with IEPs = 16.50%, Representation of survey respondents = 23.39%

Deaf/Blind: Statewide representation of students with IEPs = 0.20%, Representation of survey respondents = 0.45%

Developmental Delay: Statewide representation of student with IEPs = 11.40%, Representation of survey respondents = 10.36%

Emotional Disability: Statewide representation of student with IEPs = 3.60%, Representation of survey respondents = 5.90%

Hearing Impairment: Statewide representation of student with IEPs = 1.00%, Representation of survey respondents = 1.11%

Learning Disability: Statewide representation of student with IEPs = 37.50%, Representation of survey respondents = 27.17%

Mild Intellectual Disability: Statewide representation of student with IEPs = 3.50%, Representation of survey respondents = 1.36%

Moderate Intellectual Disability: Statewide representation of student with IEPs = 1.40%, Representation of survey respondents = 0.67%

Severe Intellectual Disability: Statewide representation of student with IEPs = 0.20%, Representation of survey respondents = 0.22%

Orthopedic Impairment: Statewide representation of student with IEPs = 0.60%, Representation of survey respondents = 0.56%

Other Health Impairment: Statewide representation of student with IEPs = 13.60%, Representation of survey respondents = 7.57%

Speech/Language Impairment: Statewide representation of student with IEPs = 10.10%, Representation of survey respondents = 13.92%

Traumatic Brain Injury: Statewide representation of student with IEPs = 0.30%, Representation of survey respondents = 0.670%

Blind/Visual Impairment: Statewide representation of student with IEPs = 0.20%, Representation of survey respondents = 0.33%

Based on the +/-3 metric, the disability categories of Deaf/Blind, Developmental Delay, Emotional Disability, Hearing Impairment, Mild Intellectual Disability, Moderate Intellectual Disability, Severe Intellectual Disability, Orthopedic Impairment, Traumatic Brain Injury and Blind/Visual Impairment aligned with state demographic data while disability categories of Autism and Speech/Language Impairment were overrepresented and Learning Disability and Other Health Impairment were underrepresented.

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

NO

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

The DDOE will continue to partner with the Parent Information Center of Delaware (PIC) and a broad group of stakeholders to examine the parent survey data, review trends in participation and build greater parent awareness of the survey's purpose and to ensure that all families, particularly those from diverse backgrounds, could access and complete it easily.

The DDOE will continue to implement the series of improvement strategies from the 2024-2025 school year as these contributed to the increase in response rate from FFY 2023 to FFY 2024.

In addition, the DDOE will continue to work with stakeholders to identify strategies to engage parents to complete the parent survey. These strategies will include the following:

-Providing resources to LEA Special Education Parent Councils as they engage directly with parents.

-Supporting LEAs with increasing efforts through social media, LEA websites, school events, and direct email communication to parents.

-Expanding outreach by sending additional communication to parents one month after their child's IEP meeting to encourage them to complete the survey if they haven't already.

-Prioritizing targeted strategies to boost participation among parents of students in underrepresented race and ethnicity categories as well as disability categories, including facilitating parent focus groups, issuing recurring reminders on the DDOE website and social media, and coordinating additional engagement opportunities.

-Enhancing multilingual messaging through multiple modalities.

-Continuing to include the parent survey as a standing agenda item for Statewide Special Education Leadership meetings and LEA/Charter County Special Education Director meetings which will provide opportunities for LEA to share successful parent engagement strategies.

- Continue collaboration with PIC, GACEC and other stakeholder groups to identify barriers relating to underrepresented race and ethnicity categories and disability categories and develop targeted outreach strategies to increase participation among those populations.

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

To increase the overall response rate, the DDOE will implement the following strategies:

-Continue to leverage LEA Special Education Parent Councils leadership to problem solve and identify barriers to parent engagement and completion of the parent survey.

-Prioritized gathering direct family feedback by facilitating sessions during Parent Mentor Training.

-Plan additional feedback opportunities at the PIC Family Leadership Conference.

-Actively seek input from GACEC, LEA leadership, and parents to improve data collection efforts.

-Continue to provide survey completion data at LEA Special Director quarterly meetings to review participation trends, examine LEA-specific barriers, and guide local improvement activities.

-Increase use of “Lunch and Learn” sessions hosted by the DDOE and PIC to continue gathering parent feedback.

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 DDOE examined survey response data for nonresponse bias to determine whether parents who did not respond to the survey item differed meaningfully from those who did respond. Of the surveys collected, 15.3% of respondents did not answer this item. Among respondents who provided a valid response, 89.1% agreed or strongly agreed with the statement, while 10.9% disagreed or strongly disagreed. Nonresponse rates were relatively consistent across racial and ethnic groups or disability categories and no evidence was found to suggest that nonrespondents were disproportionately likely to hold negative perceptions.

DDOE will continue to work with GACEC, PIC and other stakeholders on develop and implement strategies to improve response rate and reduce any identified bias in nonrespondents.

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)

DDOE ensures that this data is complete, accurate, reliable, and valid for Indicator 8. This is ensured by the DDOE, in collaboration with LEAs, through procedures and practices instituted for data collection processes such as the December 1st child count.

8 - Prior FFY Required Actions

In the FFY 2024 SPP/APR, the State must report whether the FFY 2024 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of children receiving special education services.

Response to actions required in FFY 2023 SPP/APR

The DDOE analyzed the demographics of students whose parents responded to the Indicator 8 Parent Involvement Survey to determine the extent to which respondents were representative of the statewide population of students receiving special education and related services. As required, the analysis examined race and ethnicity and included an additional demographic category—disability category—based on stakeholder recommendations from the Parent Information Center of Delaware (PIC), Statewide Special Education Leadership, and LEA Special Education Directors.

The DDOE analyzed survey response data for parents of children receiving special education and related services, comparing the data to statewide demographics across race and ethnicity categories.

American Indian/Alaskan Native: Statewide representation of student with IEPs = 0.40%, Representation of survey respondents = 0.67%

Asian American: Statewide representation of student with IEPs = 2.10%, Representation of survey respondents = 3.01%

Native Hawaiian/Other Pacific Islander: Statewide representation of student with IEPs = 0.10%, Representation of survey respondents = 0.11%

Underrepresented race and ethnicity categories include African American/Black, Hispanic/Latino, Caucasian/White, and Multiracial as follows:

Hispanic/Latino: Statewide representation of student with IEPs = 18.20%, Representation of survey respondents = 12.25%

Black/African American: Statewide representation of student with IEPs = 36.60%, Representation of survey respondents = 21.16%

White/Caucasian: Statewide representation of student with IEPs = 37.20%, Representation of survey respondents = 51.00%

Multi-Racial: Statewide representation of student with IEPs = 5.50%, Representation of survey respondents = 9.69%

Based on the +/- 3 metric, race and ethnicity categories of American Indian/Alaskan Native, Asian American, and Native Hawaiian/Other Pacific Islander aligned with state demographic data, while African America/Black, Hispanic/Latino, Caucasian/White and Multiracial were underrepresented.

In addition to the race and ethnicity analysis, the DDOE reviewed survey participation by disability category, which stakeholders identified as a meaningful additional demographic group for analysis.

Disability Category

Autism: Statewide representation of students with IEPs = 16.50%, Representation of survey respondents = 23.39%

Deaf/Blind: Statewide representation of students with IEPs = 0.20%, Representation of survey respondents = 0.45%

Developmental Delay: Statewide representation of student with IEPs = 11.40%, Representation of survey respondents = 10.36%

Emotional Disability: Statewide representation of student with IEPs = 3.60%, Representation of survey respondents = 5.90%

Hearing Impairment: Statewide representation of student with IEPs = 1.00%, Representation of survey respondents = 1.11%

Learning Disability: Statewide representation of student with IEPs = 37.50%, Representation of survey respondents = 27.17%

Mild Intellectual Disability: Statewide representation of student with IEPs = 3.50%, Representation of survey respondents = 1.36%

Moderate Intellectual Disability: Statewide representation of student with IEPs = 1.40%, Representation of survey respondents = 0.67%

Severe Intellectual Disability: Statewide representation of student with IEPs = 0.20%, Representation of survey respondents = 0.22%

Orthopedic Impairment: Statewide representation of student with IEPs = 0.60%, Representation of survey respondents = 0.56%

Other Health Impairment: Statewide representation of student with IEPs = 13.60%, Representation of survey respondents = 7.57%

Speech/Language Impairment: Statewide representation of student with IEPs = 10.10%, Representation of survey respondents = 13.92%

Traumatic Brain Injury: Statewide representation of student with IEPs = 0.30%, Representation of survey respondents = 0.670%

Blind/Visual Impairment: Statewide representation of student with IEPs = 0.20%, Representation of survey respondents = 0.33%

Based on the +/-3 metric, the disability categories of Deaf/Blind, Developmental Delay, Emotional Disability, Hearing Impairment, Mild Intellectual Disability, Moderate Intellectual Disability, Severe Intellectual Disability, Ortopedic Impairment, Traumatic Brain Injury and Blind/Visual Impairment aligned with state demographic data while disability categories of Autism and Speech/Language Impairment were overrepresented and Learning Disability and Other Health Impairment were underrepresented.

The DDOE will continue to partner with the Parent Information Center of Delaware (PIC) and a broad group of stakeholders to examine the parent survey data, review trends in participation and build greater parent awareness of the survey's purpose and to ensure that all families, particularly those from diverse backgrounds, could access and complete it easily.

The DDOE will continue to implement the series of improvement strategies from the 2024-2025 school year as these contributed to the increase in response rate from FFY 2023 to FFY 2024.

In addition, the DDOE will continue to work with stakeholders to identify strategies to engage parents to complete the parent survey. These strategies will include the following:

-Providing resources to LEA Special Education Parent Councils as they engage directly with parents.

-Supporting LEAs with increasing efforts through social media, LEA websites, school events, and direct email communication to parents.

-Expanding outreach by sending additional communication to parents one month after their child's IEP meeting to encourage them to complete the survey if they haven't already.

-Prioritizing targeted strategies to boost participation among parents of students in underrepresented race and ethnicity categories as well as disability categories, including facilitating parent focus groups, issuing recurring reminders on the DDOE website and social media, and coordinating additional engagement opportunities.

-Enhancing multilingual messaging through multiple modalities.

-Continuing to include the parent survey as a standing agenda item for Statewide Special Education Leadership meetings and LEA/Charter County Special Education Director meetings which will provide opportunities for LEA to share successful parent engagement strategies.

- Continue collaboration with PIC, GACEC and other stakeholder groups to identify barriers relating to underrepresented race and ethnicity categories and disability categories and develop targeted outreach strategies to increase participation among those populations.

8 - OSEP Response

8 - Required Actions

In the FFY 2025 SPP/APR, the State must report whether the FFY 2025 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of children receiving special education services.

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures. 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 2024 reporting period (i.e., after June 30, 2025).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and aged 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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2023	0.00%

FFY	2019	2020	2021	2022	2023
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2024	2025

Target	0%	0%

FFY 2024 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.

1

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
1	0	42	0.00%	0%	0.00%	Met target	No Slippage

Were all races and ethnicities included in the review?

YES

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

The DDOE used December 1, 2024 data, submitted to OSEP in July 2025, for the FFY 2024 SPP/APR submission for this indicator. The relative risk ratio methodology is what Delaware uses to determine whether there is with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification. In the relative risk ratio method, the total enrollment of all students is compared to the number of special education students. The DDOE uses a minimum cell size of 15 students in this calculation. The data being reviewed is within a one-year period. Relative Risk Ratio - Calculated by comparing one racial/ethnic group's risk of being identified for a disability with that of a comparison group (all other students)

Please see below:

Numerator: # of SWD in X ethnic/racial group

Total # X ethnic/racial group in the LEA population

_____

Denominator: # all other Non-X SWD

Total # of Non-X in the LEA population

After the relative risk ratio is calculated, the ratio is compared to the state "bar", and if the LEA's risk ratio is greater than or equal to the state "bar", the LEA is identified as having disproportionate representation. For FFY 2024, the State 'bar" is set at a relative risk ratio of 2.0.

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.

FFY 2024, 1 LEA exceeded the state bar and was required to complete a state developed self-assessment of their policies, procedures, and practices relating to the identification of students with disabilities specifically around child find and evaluation and eligibility determination. Once they conducted a self-assessment in those areas and submitted it to the DDOE, the DDOE assessed for compliance and also reviewed a random sample of individual student records for compliance with federal and DDOE regulations. The DDOE also reviewed the LEAs policies, procedures, and practices to determine compliance with state and federal regulations as well.

Provide additional information about this indicator (optional)

DDOE ensures that this data is complete, accurate, reliable, and valid for Indicator 9. DDOE provided the LEA with the data from the state system which the LEA utilized to conduct a self- assessment. DDOE reviewed the self-assessment, individual student records, and verified the data. Professional learning, training and coaching is provided for all LEAs in Multi-Tiered Systems of Behavioral and Academic Supports (MTSS), Universal Design for Learning along with the opportunity to participate in the Delaware Early Literacy Initiative. DDOE also provided professional learning at special education director leadership meetings and meets individually with LEAs to engage in problem solving, review/analyze data and support the LEA's implementation of MTSS.

Correction of Findings of Noncompliance Identified in FFY 2023

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

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

DDOE does not permit pre-finding correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 2024 reporting period (i.e., after June 30, 2025).

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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2023	17.07%

FFY	2019	2020	2021	2022	2023
Target	0%	0%	0%	0%	0%
Data	2.63%	2.56%	2.44%	10.00%	17.07%

Targets

FFY	2024	2025
Target	0%	0%

FFY 2024 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.

1

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
20	1	42	17.07%	0%	2.38%	Did not meet target	No Slippage

Were all races and ethnicities included in the review?

YES

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

The DDOE used December 1, 2024 data reported to OSEP on July 2025 for the FFY 2024 SPP/APR submission for this indicator. Delaware uses the relative risk ratio method to determine whether there is disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification in special education. The DDOE uses a minimum cell size of 10 for the calculation of students with disabilities in racial/ethnic groups and disability categories. After the LEA data is populated and the relative risk ratio is calculated, the LEA data is then compared to the state bar of 2.0. The data being reviewed is within a one-year period.

The calculation for determining the relative risk ratio is as follows:

Numerator:

# of students in X ethnic/racial group in Y disability category

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Total # of students in X ethnic/racial group in the LEA

Denominator:

# of Other students in Y disability category

Total # of Other students in the LEA population

After the relative risk ratio is calculated, the ratio is compared to the State "bar," and if the LEA's risk ratio is greater than or equal to the State "bar," the LEA is identified as having disproportionate representation. For FFY 2024, the State "bar" is set at a relative risk ratio of 2.0

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.

For FFY 2024, the DDOE reviewed data for all LEAs and identified 20 LEAs that exceeded the state bar. Each LEA was required to complete a state-developed self-assessment of their policies, procedures, and practices relating to the identification of students with disabilities specifically around child find and evaluation and eligibility determination. Once they conducted the self-assessment in those areas, the DDOE reviewed each LEA's self-assessment along with a random sampling an individual student records to verify compliance with federal and state regulations. The LEAs policies procedures and practices were also reviewed to ensure they meet regulation and if these were found non-compliant they were directed to correct these as well.

1 LEA was found non-compliant. As a non-compliant LEA, the LEA is required to develop a corrective action plan; provide written policies, procedures, and practices for DDOE review. As part of the LEA corrective action, the LEA is required to provide professional development on the areas of non-compliance and conduct individual file reviews and corrections.

Provide additional information about this indicator (optional)

DDOE ensures that this data is complete, accurate, reliable, and valid for Indicator 10. DDOE provided the LEA with the data from the state system which the LEA utilized to conduct a self- assessment. DDOE reviewed the self-assessment, a random selection of individual student records, and verified the data. DDOE also does a review of the LEAs policies, procedures and practices related the identification of students with disabilities. Professional learning, training, and coaching is provided for all LEAs in Multi-Tiered Systems of Behavioral and Academic Supports (MTSS), Universal Design for Learning along with the opportunity to participate in the Delaware Early Literacy Initiative. DDOE also provided professional learning at special education director leadership meetings and meets individually with LEAs to engage in problem solving, review/analyze data and support the LEA's implementation of MTSS.

Correction of Findings of Noncompliance Identified in FFY 2023

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
7	7	0	0

FFY 2023 Findings of Noncompliance Verified as Corrected

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

DDOE provided technical assistance to all LEAs regarding Disproportionate Representation. In addition, targeted technical assistance was provided directly to the 7 LEAs identified with noncompliance. DDOE reviewed the Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within the 7 LEAs identified with noncompliance and verified that the identified LEAs were correctly implementing regulatory requirements under IDEA, regarding Disproportionate Representation, within the one-year period.

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

To identify noncompliance, DDOE reviewed data collected from the state data system for all 42 LEAs. 7 of the 42 LEAs were non-compliant.

7 LEAs required corrective action and timelines including correction of each instance of individual student noncompliance. A letter of findings was issued to the LEAs within 90 days of identification of noncompliance. DDOE provided technical assistance to all LEAs regarding Disproportionate Representation. Targeted technical assistance was provided directly to the LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the state data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

DDOE does not permit pre-finding correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

10 - Prior FFY Required Actions

Because the State reported less than 100% compliance for FFY 2024 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. The State must demonstrate, in the FFY 2024 SPP/APR, that the seven districts identified in FFY 2023 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification are in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

DDOE provided technical assistance to all LEAs regarding Disproportionate Representation. In addition, targeted technical assistance was provided directly to the 7 LEAs identified with noncompliance. DDOE reviewed the Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within the 7 LEAs identified with noncompliance and verified that the identified LEAs were correctly implementing regulatory requirements under IDEA, regarding Disproportionate Representation, within the one-year period.

To identify noncompliance, DDOE reviewed data collected from the state data system for all 42 LEAs.

7 LEAs required corrective action and timelines including correction of each instance of individual student noncompliance. A letter of findings was issued to the LEAs within 90 days of identification of noncompliance. DDOE provided technical assistance to all LEAs regarding Disproportionate Representation. Targeted technical assistance was provided directly to the LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the state data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

10 - OSEP Response

10 - Required Actions

Because the State reported less than 100% compliance for FFY 2025 (greater than 0% actual target data for this indicator), the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. The State must demonstrate, in the FFY 2025 SPP/APR, that the district identified in FFY 2024 with disproportionate representation of racial and ethnic groups in specific disability categories that was the result of inappropriate identification is in compliance with the requirements in 34 C.F.R. §§ 300.111, 300.201, and 300.301 through 300.311, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2024, although its FFY 2024 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2024. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	98.26%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	98.47%	98.26%	98.31%	97.39%	98.36%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
3,678	3,646	98.36%	100%	99.13%	Did not meet target	No Slippage

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

32

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.

The Delaware Department of Education (DDOE) reviewed data regarding timeline of initial evaluations and found 32 students across 13 LEAs that were noncompliant. Delaware's timeline for initial evaluations is forty-five (45) school days or ninety (90) calendar days, whichever is less, of receiving written parental consent for initial evaluation. The time frame described does not apply to a public agency if: a) the parent of a child repeatedly fails or refuses to produce the child for the evaluation or b) a child enrolls in a school of another public agency after the relevant time frame 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. The latter exemption applies only if the subsequent public agency is making sufficient progress to ensure a prompt completion of the evaluation, and the parent and subsequent public agency agree to a specific time when the evaluation will be completed. See 14 DE Admin Code § 925.2.3-2.5. The number of days that exceeded the state timeline of 45 school days or 90 calendar days, whichever is less, of receiving written parental consent for initial evaluations ranged from 1 to 22 days over the state timeline (24 students fell within 1-10 days and 8 students fell within 11-22 days). Root causes that contributed to the noncompliance were identified as staff miscounting, not taking into account calendar days sometimes come before school days, needing more time to test, and extenuating circumstances (e.g. student out of the country, needing additional time to test, school psychologist resigned, needing a bilingual evaluator, snow days, student absences, allowing additional time so advocate could attend eligibility meeting, student absences, not being able to keep up with evaluations) for which there was not proper documentation that extension of the timeline was mutually agreed upon, not providing proper notice of meeting, winter break, and spring break.

Indicate the evaluation timeline used:

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

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

Delaware's timeline for initial evaluations is detailed in 14 DE Admin Code § 925.2.3-2.5: Within forty-five (45) school days or ninety (90) calendar days, whichever is less, of receiving written parental consent, the initial evaluation shall be conducted; and the child's eligibility for special education and related services must be determined at a meeting convened for that purpose. The time frame described does not apply to a public agency if: a) the parent of a child repeatedly fails or refuses to produce the child for the evaluation or b) a child enrolls in a school of another public agency after the relevant time frame 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. The latter exemption applies only if the subsequent public agency is making sufficient progress to ensure a prompt

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

State database that includes data for the entire reporting year

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

LEAs are required to enter and maintain data within Delaware's electronic statewide pupil accounting system. LEAs enter the date on which the parent's informed written consent for initial evaluation is received and the date on which eligibility is determined. The eligibility date is the end date used in the calculation to determine whether initial evaluations are conducted within the State established timeline. By requiring all LEAs to enter information into the electronic state-wide pupil accounting system, DDOE monitors the timeliness of initial evaluations. However, during the time period of the current data collection, the DDOE and LEAs transitioned from using PowerSchool to Infinite Campus. The DDOE and LEAs lost access to the databases from where Indicator 11 reports are generated as part of a transition to the new IEP platform. The Technology Operations and Data Management Workgroups of DDOE instituted a policy that reporting be done from the warehouse. It was discovered that the logic was incorrectly written and thus students who had a consent for evaluation and who were evaluated, but did not qualify for services, were not generated in the report. In addition, calendar days and school days were often times miscalculated because LEAs did not enter the correct calendar information into the system. In order to correct for the data inaccuracies and ensure validity, reliability and accuracy of the data, the Education Associate in Exceptional Children Resources (ECR) asked each LEA to report the students that were evaluated but did not qualify. The Education Associate (ECR) also worked closely with the Education Associate in Data Management to correct the data when data inaccuracies were identified. The DDOE has received technical assistance from the IDEA Data Center for the development of the data protocol for Indicator 11. In turn, DDOE has developed a guidance document for entering the data in the new IEP platform and provides technical assistance to LEAs on the accuracy of data entry procedures. Technical assistance includes professional learning and training at statewide Special Education Leadership meetings, making a webinar available to LEAs that they can access at their convenience, meeting individually with LEAs to problem solve, review/analyze data and support with implementation of timelines and best practices relating to Child Find and initial evaluations, and sending monthly reminders to the LEAs to review and check their data. In addition, this is the second year the DDOE provided a guidance document for LEAs to use in order to code their reasons as to why an evaluation was out of timeline. The Exceptional Children Resources Workgroup works collaboratively with DDOE's Technology Operations Workgroup and Data Management Workgroup.

Provide additional information about this indicator (optional)

The DDOE and LEAs continue to utilize a state data system which is available electronically from any location. DDOE provided the LEAs with the data from the state system which the LEAs utilized to conduct a self-assessment. DDOE reviewed the self-assessments from the LEAs and verified the date the LEA received informed parent consent for initial evaluation and the date eligibility was determined were within the State timeline (45 school days or 90 calendar days, whichever is less). Additional evidence is gathered through staff interviews, contact logs, meeting invitations, prior written notice, and emails. The DDOE engaged in a review and analysis of initial evaluation data from FFY 2023 and FFY 2024. Data indicated a decrease in the number of initial evaluations conducted in FFY 2024 (3678) in comparison to FFY 2023 (3953). It is likely that the decrease is due to the data challenges described previously. The DDOE engages in stakeholder engagement activities for this indicator. Presentations have been provided at Leadership and County meetings. The DDOE also presented information about evaluation summary reports at the annual conference for the Delaware Association of School

Psychologists. The DDOE offers a half hour presentation on an aspect of psychoeducational evaluations followed by a half hour open office hours on a monthly basis to School Psychologists, Special Education Directors, as well as any other LEA staff who have questions regarding evaluations.

Correction of Findings of Noncompliance Identified in FFY 2023

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
12	12	0	0

FFY 2023 Findings of Noncompliance Verified as Corrected

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

DDOE provided technical assistance to all LEAs regarding processes for timely evaluations. Targeted technical assistance regarding the timeline for initial evaluations was provided directly to the 12 LEAs identified with noncompliance totaling 65 students across the 12 LEAs. DDOE convened an internal committee to review each of the 12 LEAs' professional development, as well as each LEAs' policies, practices and procedures regarding initial evaluations. The DDOE also reviewed the corrective action plans, which included a root cause analysis and improvement activities, for those LEAs which had less than 90% timely evaluations (which was 4 of the 12 LEAs). Utilizing updated data subsequently collected through the state's data system, DDOE reviewed new additional randomly selected student records , within each of the 12 LEAs found noncompliant, and verified that each of the 12 LEAs identified with noncompliance were correctly implementing the specific regulatory requirements under IDEA, regarding timely evaluations, within the one-year period and achieved 100% compliance with the relevant IDEA requirements based on the review of the updated data or they had no new evaluation data to review. The number of new additional randomly selected student records that were reviewed for each LEA was based on the following business rules. If an LEA had 1-10 evaluations out of timeline, 2 records were reviewed; 11-20 evaluations out of timeline, 3 evaluations were reviewed, and greater than 20 evaluations out of timeline, 4 evaluations were reviewed.

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

To identify noncompliance, DDOE reviewed data collected through the State data system for all 42 LEAs during which 12 LEAs were identified with noncompliance for a total of 65 students across the 12 LEAs. A letter of findings was issued to each of the 12 LEAs within 90 days of identification of noncompliance, with required actions and timelines including correction of each of the 65 instances of individual student noncompliance. DDOE provided technical assistance to all LEAs regarding processes for timely evaluations. Targeted technical assistance regarding the timeline for initial evaluations was provided directly to the 12 LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the State data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct. Evidence of correction included verification of Evaluation Summary Report documents, as well as staff interviews, review of communication to parents, contact logs, meeting invitations, prior written notice, and emails. DDOE instructed the identified LEAs to conduct a root cause analysis and develop a corrective action plan if they had less than 90% of their initial evaluations within timeline. The DDOE provides the LEAs with a Corrective Action Plan template to complete and submit to the DDOE. The template includes a section where the LEA is to detail their root cause analysis, action steps, baseline data, method of progress monitoring, and report to DDOE on their progress with implementation.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

DDOE does not permit pre-finding correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2023 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 and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

DDOE provided technical assistance to all LEAs regarding processes for timely evaluations. Targeted technical assistance regarding the timeline for initial evaluations was provided directly to the 12 LEAs identified with noncompliance totaling 65 students across the 12 LEAs. Each LEA which had less than 90% compliance had to complete a corrective action plan. DDOE convened an internal committee to review each of the 4 LEAs' corrective action plan which included a root cause analysis, professional development, and improvement activities to address root causes. In addition, the DDOE reviewed each of the 12 LEAs' policies, practices and procedures regarding initial evaluations. Utilizing updated data subsequently collected through the

state's data system, DDOE reviewed new additional randomly selected student records, within each of the 12 LEAs found noncompliant, and verified that each of the 12 LEAs identified with noncompliance were correctly implementing the specific regulatory requirements under IDEA, regarding timely evaluations, within the one-year period and achieved 100% compliance with the relevant IDEA requirements based on the review of the updated data. To identify noncompliance, DDOE reviewed data collected through the State data system for all 42 LEAs during which 12 LEAs were identified with noncompliance for a total of 65 students across the 12 LEAs. A letter of findings was issued to each of the 12 LEAs within 90 days of identification of noncompliance, with required actions and timelines including correction of each of the 65 instances of individual student noncompliance. DDOE provided technical assistance to all LEAs regarding processes for timely evaluations. Targeted technical assistance regarding the timeline for initial evaluations was provided directly to the 12 LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the State data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct. Evidence of correction included verification of Evaluation Summary Report documents, as well as staff interviews, review of communication to parents, contact logs, meeting invitations, prior written notice, and emails. DDOE instructed the identified LEAs which had less than 90% compliance (4 LEAs) to conduct a root cause analysis and develop a corrective action plan. The DDOE provides the LEAs with a Corrective Action Plan template to complete and submit to the DDOE. The template includes a section where the LEA is to detail their root cause analysis, action steps, baseline data, method of progress monitoring, and report to DDOE on their progress with implementation.

11 - OSEP Response

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2024 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 and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2025 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 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	81.60%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	91.56%	95.75%	97.43%	97.03%	98.39%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	1,489
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	154
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	928
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.	367
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	29
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 2023 Data	FFY 2024 Target	FFY 2024 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.	928	939	98.39%	100%	98.83%	Did not meet target	No Slippage

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

11

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.

The number of children referred by Part C to Part B for FFY 24 increased by 57 from FFY 23. The range of days beyond the third birthday went from 2 to 39 days. Reasons provided by the LEAs for eligibility determined and IEP developed past the third birthday included a lack of sufficient numbers of school psychologists or bilingual school psychologists to conduct initial evaluations, meetings being scheduled 30 days or less from the third birthday, attempts to contact parent not documented, staff unavailability or parent cancelling or not coming to the meeting. The 11 found to be out of compliance were scattered amongst 3 districts.

Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

Data are collected in a state-created data collection report and include data for the entire reporting year. LEAs enter child level data throughout the year in the state data system which includes referral date to Part B, parent consent to evaluate, initial evaluation date, IEP eligibility meeting date and IEP implementation date. At the end of the school year, LEAs generate an Indicator 12 report and import that data into the DDOE developed B12 data collection worksheet. This worksheet also includes data from the state-generated transition notification report (TNR) sent from Part C, which is sent via encrypted email to LEAs monthly. LEAs submit their completed data worksheets to the SEA for review. The SEA completes an in-depth analysis of the LEA submitted data. The SEA assures that Indicator 12 data submitted in this SPP/APR is valid for completeness, timeliness, accuracy, and compliance status.

Provide additional information about this indicator (optional)

DDOE ensures that this data is complete, accurate, reliable, and valid for Indicator 12. DDOE provides on-going technical assistance through professional learning and training in the monthly Early Childhood Special Education meetings, quarterly Statewide Early Childhood Transition Collaborative meetings (whose participants include not only LEA personnel, but also Part C Service Coordinators and Early Intervention Practitioners), quarterly Special Education Director County level meetings and quarterly Special Education Leadership meetings. In addition, DDOE has developed guidance documents and resources focused on early childhood transition and engages collaboratively with our Part C colleagues on creation and dissemination of the information. The Early Childhood Transition Coordinators also work closely with the LEA 619 Coordinators, including meeting individually with them as well as via a new cohort model designed for new coordinators to engage in problem solving, reviewing, and analyzing of their data and supporting the timely and smooth transition for children to Part B.

The SEA has provided information from the ECTA Center related to completion of initial evaluations and has recommended various strategies to LEAs such as forming partnerships to share evaluators or using video conferencing platforms to increase capacity of evaluation slots. The SEA has and will continue to provide general and targeted technical assistance to the LEAs to assure smooth, timely and compliant transitions from Part C to Part B. Two SEA Early Childhood Transition Coordinators continue focused training and technical assistance as Delaware strives to reach 100% on this indicator.

The state has transitioned to a new student information system for student-level data that now includes an Indicator 12 plan. LEAs will use this system to enter all required Indicator 12 information. Once the state verifies that the plan's reports are functioning correctly, the SEA will update Indicator 12 guidance to ensure every child is entered into the system, strengthening overall data quality.

Correction of Findings of Noncompliance Identified in FFY 2023

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 2023 Findings of Noncompliance Verified as Corrected

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

DDOE provided technical assistance to all LEAs regarding Indicator 12. In addition, targeted technical assistance was provided targeted technical assistance regarding timelines for early childhood transitions directly to the 3 LEAs identified with noncompliance. DDOE reviewed each Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within each of the 3 LEAs identified with noncompliance and verified that 100% of the 3 LEAs identified were correctly implementing regulatory requirements under IDEA, regarding Indicator 12, within the one-year.

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

To identify noncompliance, DDOE reviewed data collected through the State data system for all 43 LEAs. Of the 16 LEAs who provide Early Childhood Special Education services, 3 LEAs were identified with noncompliance for a total of 15 students across the 3 LEAs. A letter of findings was issued to each of the 3 LEAs, within 90 days of identification of noncompliance, with required corrective actions and timelines including correction of each of the 15 instances of individual student noncompliance. DDOE provided technical assistance to all LEAs regarding Indicator 12/Timely Transitions. Targeted technical assistance was provided directly to the 3 LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the State data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

DDOE does not permit pre-finding correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2023 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 and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

DDOE provided technical assistance to all LEAs regarding Indicator 12. In addition, targeted technical assistance regarding timelines for early childhood transitions was provided directly to the 3 LEAs identified with noncompliance totaling 15 students across the 3 LEAs. DDOE reviewed each Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data subsequently collected through the state's data system, DDOE reviewed new randomly selected student records within each of the 3 LEAs identified with noncompliance and verified that each of the 3 LEAs identified were correctly implementing the specific regulatory requirements under IDEA, regarding early childhood transition, within the one-year period; and achieved 100% compliance with the relevant IDEA requirements based on the review of the updated data.

To identify noncompliance, DDOE reviewed data collected through the State data system for all 43 LEAs. Of the 16 LEAs who provide Early Childhood Special Education services, 3 LEAs were identified with noncompliance for a total of 15 students across the 3 LEAs. A letter of findings was issued to each of the 3 LEAs, within 90 days of identification of noncompliance, with required corrective actions and timelines including correction of each of the 15 instances of individual student noncompliance. DDOE provided technical assistance to all LEAs regarding Indicator 12/Timely Transitions. Targeted technical assistance was provided directly to the 3 LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the State data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

12 - OSEP Response

12 - Required Actions

Because the State reported less than 100% compliance for FFY 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2024 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 and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2025 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 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

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 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	98.85%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	99.89%	98.85%	93.68%	97.64%	99.59%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
10,703	10,726	99.59%	100%	99.79%	Did not meet target	No Slippage

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.

Beginning with the 2014-2015 SY, based on stakeholder input, the DDOE moved from a cyclical monitoring process to monitoring all districts and charters having transition age (age 14 or in the 8th grade) annually for Indicator 13 to ensure state-wide representation.

Monitoring occurred in a two-phase process:

Phase 1 - LEA Self-Assessment

LEAs were required to conduct a self-assessment of all student records for students age 14 or in the 8th grade and above. DDOE utilizes the data from the December 1 count and provides LEAs with an electronic spreadsheet to capture all data requirements for Indicator 13. Through the self-assessment process, the LEA verifies that each student's IEP is compliant with IDEA and that transition services enable the student to meet post-school goals. The self-assessment is then submitted to the DDOE.

Phase 2 - DDOE validation of LEA submitted data

DDOE reviewed a randomly selected sample of students to verify that each student's IEP was compliant. The data reviewed represented all schools within the LEA, all disability categories, all race/ethnicities and ages/grade levels. If noncompliance was identified, findings letters were issued with required corrective action including correction of all individual student noncompliance, Root Cause Analysis, provision of professional development in the areas of noncompliance and development of a Corrective Action Plan.

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

Provide additional information about this indicator (optional)

Youth who are 14 or 8th grade and older are included in the data for this indicator.

DDOE Indicator 13 ensures that this data is complete, accurate, reliable, and valid for Indicator 13. DDOE continues to consider, and provides technical assistance, guidance and resources for LEAs.

Stakeholder meetings continue to be organized throughout the year to include reviewing targets, engaging in the data, and providing input on impact. Some of the activities to network, collaborate, and inform included:

Career Pathways: Exceptional Childrens Resources continues to work with groups across the DDOE around Delaware Career Pathways System to support LEAs with engaging students in transition planning activities which in turn increase graduation rate, decrease dropout rate and increase post-school outcomes. Ongoing professional development and technical assistance are provided to LEAs focusing on the following: Rigorous career pathways for all students, across key industry sectors, to ensure students earn early college credit and industry recognized credentials · Experience: Meaningful work experiences and opportunities for career coaching, provided by a network of engaged employers, to ensure students' skills have value in the marketplace · Support: Connected services across partnering state agencies and community organizations, to ensure all youth are able to realize their postsecondary identifies. Collaboration with the Delaware Career and Technical (CTE) Work Group occurs monthly.

PIPELine Initiative: ECR continues to engage in collaborative efforts with DDOE's CTE work group, Division of Vocational Rehabilitation, Division on Developmental Disabilities Services, and Division for Visually Impairments to provide and expand PIPEline to Career Success for Students with Disabilities. This multigenerational team initiative works in the context of students with disabilities to increase the enrollment, matriculation, graduation, and transition to postsecondary education and competitive employment of students with disabilities through CTE career pathways. The Student-Led PIPEline leadership program is a combination of Work-Based Learning and leadership development, offering a way for students to support their schools by recommending equity-building tools for their districts. This PIPEline program is based on best practices to get student insights, gathered in groups of students working together and empowered to research, observe, and present their understanding of ways to increase equity for students with disabilities in CTE.

Transition Cadre: ECR continues to facilitate monthly statewide Transition Cadre meetings to provide professional learning and targeted technical assistance for LEAs, state agencies and community members. Including "hot topics" around transition, post-secondary outcomes, and strengthening collaboration and communication.

Transition Cadre Email Blast: For informative, consistent, and clear communication with stakeholders there is a sent out at least twice a month with opportunities from around the state. After the Cadre meeting, an email goes out with Highlights from the meeting including PowerPoints and video recordings.

Project Search: ECR continues to partner with Project Search, a business-led, school-to-work program to support students preparing for and transitioning to post high school life. Students develop competitive, marketable, and transferable skills in areas such as communication, teamwork, and problem solving to prepare them for employment in an integrated setting. Currently, there are four sites in Delaware: BayHealth, DelDOT, Christiana Hospital and Tidal Health.

Employment for Individuals with Moderate/Significant Disabilities: ECR continues to support training through the Customized Employment Boot Camp. This course has been designed as a "hit the ground running" experience for employment professionals and school personnel interested in a non-traditional approach to job development, known as Customized Employment (CE). Enhances opportunities of employment for individuals with moderate/significant disabilities.

DEDelHub Website: ECR continues to collaborate with the GACEC to create resources in multi-media formats focused on transition throughout a student's educational career. This year we partnered to do a Success Story on a young woman. This was shown throughout the state and featured Jillian, who is now employed, and her journey to live a fulfilling and enjoyable life .

Transition Advisory Group: ECR and GACEC have established a Transition Advisory Group, a team focused on building capacity of LEA staff.

NTACT:C Capacity Building Institute Lead Team: In May, 2025, under the leadership of ECR, Delaware sent a team to NTACT:C's Post Secondary Transition Capacity Building Institute including parents, representatives from the Indian River School District, Division of Vocational Rehabilitation, Division of Visual Impairments, Division of Developmental Services, Parent Information Center and the DDOE. The team worked collaboratively to develop a plan to guide Post Secondary Transition in Delaware focused on the following goals: · Increase Student Engagement in IEP and the Post Secondary Transition Process · Increase and sustain youth Involvement and voice long-term · Reach students and families in all areas and racial/minority identities · Deliver concise and effective messaging to students and families about post-secondary transition · Promote effective collaboration across agencies/schools/educators. We are currently developing a guide for students, families, and new staff that explains all roles and can be shared at IEPs.

Informing stakeholders is also done by sharing information in multiple ways. The DDOE social media pages highlight initiatives and opportunities within the state.

The Life Conference is held yearly in Dover, Delaware. The mission of the LIFE Conference is to be at the forefront of providing information, educational resources, and opportunities for persons with disabilities, their families, caregivers, educators, and providers. The primary goal of the LIFE Conference is to promote and support full community integration by focusing on the four areas of Legislation, Independence, Families, and Education. The LIFE Conference offers its attendees the opportunity to learn, network, and participate in sessions designed to share information with all participants, including policy makers and the public.

Delaware Connections Newsletter: Future Ready: Planning Today, Empowering Every Tomorrow has been implemented. The audience is Students, families and Transition Staff. It goes out on the first Tuesday of the month and has anywhere from 294-662 views monthly. Topics range from Self Determination, Student Success Stories, Disability awareness, Transition Assessments, Family Transition Resources, Delaware Transition Partner Spotlight, upcoming Transition events, and a Resource Roundup.

Correction of Findings of Noncompliance Identified in FFY 2023

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 2023 Findings of Noncompliance Verified as Corrected

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

DDOE provided technical assistance to all LEAs regarding Indicator 13. In addition, targeted technical assistance was provided directly to the 8 LEAs identified with noncompliance. DDOE reviewed each Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within each of the 8 LEAs identified with noncompliance and verified that 100% of the 8 LEAs identified were correctly implementing regulatory requirements under IDEA, regarding Indicator 13, within the one-year period.

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

To identify noncompliance, DDOE reviewed data collected through the State data system for all 42 LEAs. Eight LEAs were identified with noncompliance. A letter of findings was issued to each of the 8 LEAs with required corrective actions and timelines including correction of each instance of individual student noncompliance. DDOE provided technical assistance to all LEAs regarding Indicator 13. Targeted technical assistance was provided directly to the 8 LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the State data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

If procedures have been adopted that permit LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), describe how, for instances of noncompliance discovered in FFY 2023, the State verified: (1) that the source of noncompliance is correctly implementing the regulatory requirements; and, (2) each individual case of noncompliance was corrected.

DDOE does not permit pre-finding correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 2023 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 2023, the State must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2024 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2023 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 and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 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 2023, although its FFY 2023 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

DDOE provided technical assistance to all LEAs regarding Indicator 13. In addition, targeted technical assistance was provided directly to the 8 LEAs identified with noncompliance. DDOE reviewed each Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within each of the 8 LEAs identified with noncompliance and verified that 100% of the 8 LEAs identified were correctly implementing regulatory requirements under IDEA, regarding Indicator 13, within the one-year period. to identify noncompliance, DDOE reviewed data collected through the State data system for all 43 LEAs. Eight LEAs were identified with noncompliance. A letter of findings was issued to each of the 8 LEAs, within 90 days of identification of noncompliance. DDOE provided technical assistance to all 8 LEAs regarding Indicator 13. Targeted technical assistance was provided directly to the 8 LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the State data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

13 - OSEP Response

13 - Required Actions

Because the State reported less than 100% compliance for FFY 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2024 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 and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2025 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 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

A. Enrolled in higher education within one year of leaving high school.

B. Enrolled in higher education or competitively employed within one year of leaving high school.

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

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

Data Source

State selected data source.

Measurement

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

Instructions

*Sampling **of youth who had IEPs and are no longer in secondary school** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See General Instructions on page 3 for additional instructions on sampling.)*

Collect data by September 2025 on students who left school during 2023-2024, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2023-2024 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 2024 SPP/APR, compare the FFY 2024 response rate to the FFY 2023 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	2019	2020	2021	2022	2023
A	2020	Target >=	45.00%	44.14%	46.14%	48.14%	50.14%
A	44.14%	Data	53.41%	44.14%	51.09%	38.93%	48.44%
B	2020	Target >=	76.00%	64.82%	66.82%	68.82%	70.82%
B	64.82%	Data	73.44%	64.82%	63.99%	76.96%	57.82%
C	2020	Target >=	100.00%	87.69%	100.00%	100.00%	100.00%
C	87.69%	Data	87.69%	80.37%	71.78%	81.23%	60.30%

Targets

FFY	2024	2025
Target A >=	52.14%	54.14%
Target B >=	72.82%	74.82%
Target C >=	100.00%	100.00%

Targets: Description of Stakeholder Input

Delaware embraces authentic stakeholder engagement and continues to work with stakeholders in analyzing data related to secondary transition, developing strategies to support improvement activities and evaluating progress toward targets including the following. Delaware Department of Education’s (DDOE) Exceptional Children Resources Work Group (ECR) has established strong partnerships across the Department as well as with families, state agencies, community members and Local Education Agencies (LEAs).

ECR continues to meet with stakeholders throughout the year to review targets/progress toward targets, analyze data, obtain input on improvement activities. Activities to network, collaborate, and inform included:

Governor's Advisory Council (GACEC), Delaware's state IDEA advisory panel: ECR's lead for Indicators 1, 2, 13, and 14 attends monthly meetings and partners with GACEC's Adult and Transition Committee subcommittee. Meetings focus on Family Support and Transition Coordination including strategies to assist parent in understanding the world of transition and available support and resources. Strategies include the GAGEC DelDHub, and the DOE Transition Newsletter and development of a parent friendly transition timeline.

Statewide Transition Cadre:

-Meets monthly

-Includes parents, students, LEA staff, Division of Vocational Rehabilitation (DVR), Division of the Visually Impaired (DVI), Division of Developmental Disability Services (DDDS), Prison Education, Governor's Advisory Council for Exceptional Citizens (GACEC), Parent Information Center of Delaware (PIC), Autism Delaware, Delaware Workforce Development Board, and cross-DDOE staff from Higher Education, Career/Technical Education (CTE), and Autism Resources.

-Meetings focus on graduation rate, dropout rate, transition planning and post-school outcomes.

-ECR continues to facilitate monthly statewide Transition Cadre meetings to provide professional learning and targeted technical assistance for LEAs, state agencies and community members. Including "hot topics" around transition, post-secondary outcomes, and strengthening collaboration and communication. Transition Cadre highlights, presentations and video recordings are sent to stakeholders following meetings.

Transition Cadre Email Blast: ECR has initiated a bi-monthly email blast to provide informative, consistent, and clear communication with stakeholders about opportunities across the state related to transition.

Transition Advisory Group: ECR and GACEC have established a Transition Advisory Group, a team focused on building capacity of LEA staff.

NTACT:C Capacity Building Institute Lead Team: In May, 2025, under the leadership of ECR, Delaware sent a team to NTACT:C's Post Secondary Transition Capacity Building Institute including parents, representatives from the Indian River School District, Division of Vocational Rehabilitation, Division of Visual Impairments, Division of Developmental Services, Parent Information Center and the DDOE. The team worked collaboratively to develop a plan to guide Post Secondary Transition in Delaware focused on the following goals: · Increase Student Engagement in IEP and the Post Secondary Transition Process · Increase and sustain youth Involvement and voice long-term · Reach students and families in all areas and racial/minority identities · Deliver concise and effective messaging to students and families about post-secondary transition · Promote effective collaboration across agencies/schools/educators. We are currently developing a guide for students, families, and new staff that explains all roles and can be shared at IEPs.

Informing stakeholders is also done by sharing information in multiple ways. The DDOE social media pages highlight initiatives and opportunities within the state.

Delaware Connections Newsletter: Future Ready: Planning Today, Empowering Every Tomorrow has been implemented. The audience is Students, families and Transition Staff. It goes out the first Tuesday of the month and has anywhere from 294-662 views monthly. Topics range from Self Determination, Student Success Stories, Disability awareness, Transition Assessments, Family Transition Resources, Delaware Transition Partner Spotlight, upcoming Transition events, and a Resource Roundup.

FFY 2024 SPP/APR Data

Total number of targeted youth in the sample or census	1,471
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	1,186
Response Rate	80.63%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	483
2. Number of respondent youth who competitively employed within one year of leaving high school	500
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)	29
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).	

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A. Enrolled in higher education (1)	483	1,186	48.44%	52.14%	40.73%	Did not meet target	Slippage
B. Enrolled in higher	983	1,186	57.82%	72.82%	82.88%	Met target	No Slippage

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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
education or competitively employed within one year of leaving high school (1 +2)							
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)	1,012	1,186	60.30%	100.00%	85.33%	Did not meet target	No Slippage

Part	Reasons for slippage, if applicable
A	THROUGH AN ANALYSIS OF THE DATA DELAWARE RAW NUMBERS INDICATE AN INCREASE IN THE NUMBER OF STUDENTS ENROLLING IN HIGHER EDUCATION OPPORTUNITIES. THE RESPONSE RATE INCREASED MORE THAN 20% FROM FFY23 AND THE NUMBERS OF STUDENTS ENROLLED IN HIGHER EDUCATION OR COMPETITIVELY EMPLOYED INCREASED BY OVER 25%. THE INCREASE IN RESPONDENTS AND INCREASE IN STUDENTS BEING COMPETIVELY EMPLOYED CONTRIBUTED TO THE SLIPPAGE (BY PERCENTAGE) OF STUDENTS ENROLLED IN HIGHER EDUCATION EVEN THOUGH RAW NUMBERS INCREASED.

Please select the reporting option your State is using:

Option 2: Report in alignment with the term “competitive integrated employment” and its definition, in section 7(5) of the Rehabilitation Act, as amended by Workforce Innovation and Opportunity Act (WIOA), and 34 CFR §361.5(c)(9). 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.

Response Rate

FFY	2023	2024
Response Rate	60.00%	80.63%

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

The SEA uses a +/- 3% discrepancy in the proportion of responders compared to target groups.

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

Disability Category

Learning Disability: Representation of SY 23-24 Exiters/ 56.24%, Representation of SY 23-24 Respondents/53.29%

Mild Intellectual Disability: Representation of SY 23-24 Exiters/6.66%, Representation of SY 23-24 Respondents/7.76%

Moderate Intellectual Disability: Representation of SY 23-24 Exiters/1.01%, Representation of SY 23-24 Respondents/1.18%

Severe Intellectual Disability: Representation of SY 23-24 Exiters/<1%, Representation of SY 23-24 Respondents/<1%

Emotional Disability: Representation of SY 23-24 Exiters/8.77%, Representation of SY 23-24 Respondents/6.83%

Other Health Impairment: Representation of SY 23-24 Exiters/19.17%, Representation of SY 23-24 Respondents/18.04%

Orthopedic Impairment: Representation of SY 23-24 Exiters<1%/, Representation of SY 23-24 Respondents/<1%

Hearing Impairment: Representation of 23-24 Exiters/<1%, Representation of SY 23-24 Respondents/<1%

Autism: Representation of SY 23-24 Exiters/7.82%, Representation of SY 22-23 Respondents/9.19%

Blind-Visual Impairment: Representation of SY 23-24 Exiters/<1%, Representation of SY 23-24 Respondents/<1%
Speech/Language Impairment: Representation of SY 23-24 Exiters/1.02%, Representation of SY 23-24 Respondents/1.52%
Traumatic Brain Injury: Representation of SY 23-24 Exiters/<1%, Representation of SY 23-24 Respondents/<1%
Deaf/Blind: Representation of SY 23-24 Exiters/<1%, Representation of SY 23-24 Respondents/<1%

For disability category, the response data were consistent/within consistent range(+/- 3%) of statewide exiter representation of disability categories.

Race/Ethnicity
Hispanic/Latino: Representation of SY 23-24 Exiters/17%, Representation of SY 23-24 Respondents/16.19%
American Indian/Alaskan Native: Representation of SY 23-24 Exiters/<1%, Representation of SY 23-24 Respondents/<1%
Black/African American: Representation of SY 23-24 Exiters/41.11%, Representation of SY 23-24 Respondents/41.65%
White/Caucasian: Representation of SY 23-24 Exiters/37.32%/, Representation of SY 23-24 Respondents/36.68%
Asian American: Representation of SY 23-24 Exiters/1.42%, Representation of SY 23-24 Respondents/1.52%
Native Hawaiin Hawaiian/Other Pacific Islander: Representation of SY 23-24 Exiters/< 1%, Representation of SY 23-24 Respondents/< 1%
Multi-Racial: Representation of SY 23-24 Exiters/5.03%, Representation of SY 23-24 Respondents/3.46%

For race/ethnicity, the response data were consistent/within consistent range (+/- 3%) of statewide exiter representation of race/ethnicity.

Gender
Male: Representation of SY 23-24 Exiters/63.90%, Representation of SY 23-24 Respondents/62.14%
Female: Representation of SY 23-24 Exiters/38.68%, Representation of SY 23-24 Respondents/37.86%

For gender, the response data were consistent/within consistent range(+/- 3%) of statewide exiter representation of gender.

Exit Type
Regular High School Diploma: Representation of SY 23-24 Exiters/87.22%, Representation of SY 23-24 Respondents/87.10%
Certificate/Alternate Diploma: Representation of SY 23-24 Exiters/6.32%, Representation of SY 23-24 Respondents/6.41%
Age Out: Representation of SY 23-24 Exiters/<1%, Representation of SY 23-24 Respondents/<1%
Drop Out: Representation of SY 23-24 Exiters/8.63%, Representation of SY 23-24 Respondents/5.65%

For exit type, the response data were consistent/within consistent range (+/- 3%) of statewide exiter representation of exit type.

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

YES

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

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

The SEA will continue to engage stakeholders and agencies in discussions and analysis of data collection methods to ensure opportunities to reach all exiters and/or families.

Focused attention will continue to be placed on ensuring the response data were consistent/within consistent range(+/- 3%) of statewide exiter representation of disability categories . The SEA will continue discussion with sister agencies (Division of Vocational Rehabilitation, Division on Developmental Disabilities Services, Division for Visual Impairments) to examine respective data systems in an effort to better align systems and track individuals for post school outcomes data collection. Monthly meetings among directors have been set to continue the discussion to improve post school outcomes and ensure students are appropriately referred to adult agencies for continued support. DDOE will continue to partner with the Parent Information Center of Delaware to identify strategies to ensure respondent representation. In addition, the SEA continutes to investigate the potential of using social media, email, and text messaging as additional methods to raise response rates and to ensure representativeness of exiters.

The SEA will also continue to work with LEAs to ensure student contact information is correct/updated in Delaware's state-wide pupil accounting system before students exit the LEA.

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

The SEA continues to use multiple data collection processes in an effort to enhance the response rate of youth who are no longer in secondary school and had IEPs in effect at the time they left school. These efforts include DDOE's statewide pupil accounting system and data systems utilized by sister agencies. Through the analysis of responses and nonresponses, the data show nonrespondents who were attempted to be contacted had contact

information where numbers were disconnected, there was no answer/returned called, or wrong number. In efforts to reduce any bias in the reporting data the SEA continues working with sister agencies (Division of Vocation Rehabilitation, Division on Developmental Disabilities Services, Division for Visual Impairments) through data sharing agreements to collect post school outcomes data. The data sharing agreements allow DDOE to gather additional post-school outcomes data on exiters not reached through phone calls and/or surveys. The efforts in analyzing the data alongside sister agencies allows the SEA to continue to improve our referral processes to ensure adult agency support is available and provided to those students needing continued supports upon exiting K-12 education.

DDOE will continue to work with Parent Information on strategies (i.e. posting survey on website) to improve response rate and bias in respondents. DDOE continues to investigate a mechanism to allow for email and text messaging to students and families.

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)

DDOE Indicator 14 ensures that this data is complete, accurate, reliable, and valid for Indicator 14. DDOE continues to consider, and provides technical assistance, guidance and resources for LEAs.

In addition to engaging with stakeholder groups, ECR continues to engage in collaborative efforts across the DDOE including the Career and Technical Work Group,along with DVR, DDDS, and DVI to provide expanded opportunities for students with disabilities. The following are examples of those efforts:

Career Pathways: ECR continues to work with groups across the DDOE around Delaware Career Pathways System to support LEAs with engaging students in transition planning activities which in turn increase graduation rate, decrease dropout rate and increase post-school outcomes. Ongoing professional development and technical assistance are provided to LEAs focusing on the following: Rigorous career pathways for all students, across key industry sectors, to ensure students earn early college credit and industry recognized credentials · Experience: Meaningful work experiences and opportunities for career coaching, provided by a network of engaged employers, to ensure students' skills have value in the marketplace · Support: Connected services across partnering state agencies and community organizations, to ensure all youth are able to realize their postsecondary identifies. Collaboration with the Delaware Career and Technical (CTE) Work Group occurs monthly.

PIPELine Initiative: ECR continues to engage in collaborative efforts with DDOE's CTE work group, Division of Vocational Rehabilitation, Division on Developmental Disabilities Services, and Division for Visually Impairments to provide and expand PIPEline to Career Success for Students with Disabilities. This multigenerational team initiative works in the context of students with disabilities to increase the enrollment, matriculation, graduation, and transition to postsecondary education and competitive employment of students with disabilities through CTE career pathways. The Student-Led PIPEline leadership program is a combination of Work-Based Learning and leadership development, offering a way for students to support their schools by recommending equity-building tools for their districts. This PIPEline program is based on best practices to get student insights, gathered in groups of students working together and empowered to research, observe, and present their understanding of ways to increase equity for students with disabilities in CTE.

Project Search: ECR continues to partner with Project Search, a business-led, school-to-work program to support students preparing for and transitioning to post high school life. Students develop competitive, marketable, and transferable skills in areas such as communication, teamwork, and problem solving to prepare them for employment in an integrated setting. Currently, there are four sites in Delaware: BayHealth, DelDOT, Christiana Hospital and Tidal Health.

Employment for Individuals with Moderate/Significant Disabilities: ECR continues to support training through the Customized Employment Boot Camp. This course has been designed as a "hit the ground running" experience for employment professionals and school personnel interested in a non-traditional approach to job development, known as Customized Employment (CE). Enhances opportunities of employment for individuals with moderate/significant disabilities.

DEDelHub Website: ECR continues to collaborate with the GACEC to create resources in multi-media formats focused on transition throughout a student's educational career. This year we partnered to do a Success Story on a young woman. This was shown throughout the state and featured Jillian, who is now employed, and her journey to live a fulfilling and enjoyable life.

The Life Conference is held yearly in Dover Delaware. The mission of the LIFE Conference is to be at the forefront of providing information, educational resources, and opportunities for persons with disabilities, their families, caregivers, educators, and providers. The primary goal of the LIFE Conference is to promote and support full community integration by focusing on the four areas of Legislation, Independence, Families, and Education. The LIFE Conference offers its attendees the opportunity to learn, network, and participate in sessions designed to share information with all participants, including policy makers and the public.

14 - Prior FFY Required Actions

In the FFY 2024 SPP/APR, the State must report whether the FFY 2024 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Response to actions required in FFY 2023 SPP/APR

The SEA continues to engage stakeholders and agencies in discussions and analysis of data collection methods to ensure opportunities to reach all exiters.

Attention focused on the under-represented categories. The SEA continued discussions with sister agencies (Division of Vocation Rehabilitation, Division on Developmental Disabilities Services, Division for Visual Impairments) to examine respective data systems in an effort to better align systems and track individuals for post school outcomes data collection. DDOE continued to partner with the Parent Information Center of Delaware to identify strategies to reach underrepresented groups. The SEA also continues to investigate the potential of using social media, email, and text messaging as an additional methods to raise response rates and to ensure representativeness of exiters.

The SEA has also worked with LEAs to ensure student contact information is correct/updated in Delaware's state-wide pupil accounting system before students exit the LEA.

In addition, the SEA will be meeting with legislative, agency and university representatives to begin discussions around aligning data systems to better track student transition planning and outcomes.

These efforts have led to a consistent representation of respondents to exiters for this reporting year. The SEA will continue these efforts to ensure representativeness is achieved.

14 - OSEP Response

14 - Required Actions

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED*Facts* file specifications FS229.

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 baselines or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

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

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

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

15 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 IDEA Part B Dispute Resolution - Due Process Complaints (EDFacts file spec FS229; Data group 896)	11/19/2025	3.1 Number of resolution sessions	25
SY 2024-25 IDEA Part B Dispute Resolution - Due Process Complaints (EDFacts file spec FS229; Data group 896)	11/19/2025	3.1(a) Number resolution sessions resolved through settlement agreements	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

Targets: Description of Stakeholder Input

In preparation for setting targets for Indicator 15 and reporting targets in the FFY 2020 SPP/APR, ECR staff held 10 meetings with stakeholder groups including the Indicator 15/16 Stakeholder Group, Lunch and Learn sessions with parents in collaboration with the Parent Information Center of Delaware, Governor's Advisory Council for Exceptional Citizens (IDEA State Advisory Panel) and local education agency (LEA) Special Education Directors. ECR ensured that all demographics (e.g.: race/ethnicity/geographic locations/disability categories/advocacy groups/advisory groups/parents/families/etc.) were represented when inviting stakeholders. Stakeholder meetings focused on sharing and analyzing historical and current data, setting targets, and identifying improvement strategies.

ECR continues to engage stakeholders throughout the year to review data and discuss and implement improvement activities. ECR holds monthly meetings with hearing officers to provide professional development. Some of the trainings have focused on resolution meeting requirements and mediation.State dispute resolution data from 2013-2015 was graphed and presented and discussed with special education directors across the state, hearing officers, state complaint investigators, and mediators. The Governor's Advisory Council for Exceptional Citizen, as well as the hearing officers were afforded opportunities to provide feedback and input on revisions to the Hearing Officer Manual and Due Process Information Guide, which is made publicly available on the DDOE website. ECR has partnered with the Parent Information Center of Delaware, Inc. to develop a webinar to increase families' knowledge of the dispute resolution system.

Historical Data

Baseline Year	Baseline Data
2015	50.00%

FFY	2019	2020	2021	2022	2023
Target >=	50.00%-60.00%	55.00%	55.00%	55.00%	55.00%
Data	66.67%	16.67%	33.33%	10.00%	35.71%

Targets

FFY	2024	2025
Target >=	55.00%	55.00%

FFY 2024 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
6	25	35.71%	55.00%	24.00%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The slippage that occurred can be attributed to the fact that during FFY 2023, there were 14 resolution sessions and 5 resulted in settlement agreements. In FFY 2024, there were 25 resolution sessions and 6 resulted in settlement agreements. There was an overall increase in the total number of due process complaints filed from FFY 2023 (23 complaints) compared to FFY 2024 (37 complaints). The Delaware Department of Education also instituted a new process where the hearing officers have to complete and turn in a “data sheet” with the final record. The data that they have to report on for each case includes whether the parties engaged in a resolution meeting, mediation, or signed a waiver of the resolution meeting. Therefore, we believe this has made our hearing officers hold the parties more accountable to do one of these things and thus perhaps explaining why more resolution meetings were held in FFY 2024 along with the increased number of complaints filed.

Provide additional information about this indicator (optional)

The Delaware Department of Education (DDOE) ensures that this data is complete, accurate, valid, and reliable for Indicator 15. Delaware remains engaged with CADRE through their SEA DR Learning Community, DMS calls and webinars that they provide. The DDOE has partnered with Delaware’s Parent Information Center, Inc. (PIC), and contracted IEP facilitation and mediation program, SPARC, and applied to and engaged in Cadre’s Collaborative State TA Workgroup for Local-level Capacity-building. In addition, the DDOE partnered and contracted with the Conflict Resolution Program at the University of Delaware to develop 30 minute or less webinars that Local Education Agencies (LEAs) can access to learn skills for engaging parents, families, and school staff in the IEP team meeting process. The courses are entitled: Effective Conflict Management Strategies, Communication Skills for Managing Conflict, Planning and Leading Effective IEP Team Meetings, The Role of an IEP Team Meeting Facilitator, Cultural Competency and Diversity, and Building Consensus in IEP Team Meetings. Data analysis indicated that 175-186 people completed each of the aforementioned courses. The post-test scores were higher than the pre-test scores for all courses indicating increases in participant knowledge. The DDOE has also worked with SPARC to create posters to provide to the LEAs so that parents and families are even more aware of the free mediation services that are available to them.

15 - Prior FFY Required Actions

None

15 - OSEP Response

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED*Facts* file specification FS228.

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 baselines 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 not used

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 IDEA Part B Dispute Resolution - Mediation Requests (EDFacts file spec FS228; Data group 895)	11/19/2025	2.1 Mediations held	12
SY 2024-25 IDEA Part B Dispute Resolution - Mediation Requests (EDFacts file spec FS228; Data group 895)	11/19/2025	2.1.a.i Mediations agreements related to due process complaints	3
SY 2024-25 IDEA Part B Dispute Resolution - Mediation Requests (EDFacts file spec FS228; Data group 895)	11/19/2025	2.1.b.i Mediations agreements not related to due process complaints	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

Targets: Description of Stakeholder Input

In preparation for setting targets for Indicator 16 and reporting targets in the FFY 2020 SPP/APR, ECR staff held 10 meetings with stakeholder groups including the Indicator 15/16 Stakeholder Group, Lunch and Learn sessions with parents in collaboration with the Parent Information Center of Delaware, Inc., Governor's Advisory Council for Exceptional Citizens (IDEA State Advisory Panel) and local education agency (LEA) Special Education Directors. ECR ensured that all demographics (e.g.: race/ethnicity/geographic locations/disability categories/advocacy groups/advisory groups/parents/families/etc.) were represented when inviting stakeholders. Stakeholder meetings focused on sharing and analyzing historical and current data, setting targets, and identifying improvement strategies.

ECR continues to engage stakeholders throughout the year to review data and discuss and implement improvement activities. ECR holds monthly meetings with hearing officers to provide professional development. Some of the trainings have focused on resolution meeting requirements and mediation. State dispute resolution data from 2013-2015 was graphed and presented and discussed with special education directors across the state, hearing officers, state complaint investigators, and mediators. The Governor's Advisory Council for Exceptional Citizen, as well as the hearing officers were afforded opportunities to provide feedback and input on revisions to the Hearing Officer Manual and Due Process Information Guide, which is made publicly available on the DDOE website. ECR has partnered with the Parent Information Center of Delaware, Inc. to develop a webinar to increase families' knowledge of the dispute resolution system.

Historical Data

Baseline Year	Baseline Data
2015	76.92%

FFY	2019	2020	2021	2022	2023

Target >=	70.00%-80.00%	80.00%	80.00%	80.00%	80.00%
Data	80.00%	50.00%	60.00%	22.22%	75.00%

Targets

FFY	2024	2025
Target >=	80.00%	80.00%

FFY 2024 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 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
3	6	12	75.00%	80.00%	75.00%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

The Delaware Department of Education (DDOE) ensures that this data is complete, accurate, valid, and reliable for Indicator 16. Delaware remains engaged with CADRE through their SEA DR Learning Community, DMS calls and webinars that they provide. The DDOE has partnered with Delaware's Parent Information Center, Inc. (PIC), and contracted IEP facilitation and mediation program, SPARC, and applied to engaged in Cadre's Collaborative State TA Workgroup for Local-level Capacity-building. In addition, the DDOE partnered and contracted with the Conflict Resolution Program at the University of Delaware to develop 30 minute or less webinars that Local Education Agencies (LEAs) can access to learn skills for engaging parents, families, and school staff in the IEP team meeting process. The courses are entitled: Effective Conflict Management Strategies, Communication Skills for Managing Conflict, Planning and Leading Effective IEP Team Meetings, The Role of an IEP Team Meeting Facilitator, Cultural Competency and Diversity, and Building Consensus in IEP Team Meetings. Data analysis indicated that 175-186 people completed each of the aforementioned courses. The post-test scores were higher than the pre-test scores for all courses indicating increases in participant knowledge. The DDOE has also worked with SPARC to create posters to provide to the LEAs so that parents and families are even more aware of the free mediation services that are available to them.

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

Results indicator: 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, is in addition to the Phase I content (including any updates) outlined above):

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 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, 2025). 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 2024 APR, report on anticipated outcomes to be obtained during FFY 2025, i.e., July 1, 2025-June 30, 2026).

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 2024 APR, report on activities it intends to implement in FFY 2025, i.e., July 1, 2025-June 30, 2026) 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 literacy proficiency of Students with Disabilities (SWD) in K-3rd grade, as measured by a decrease in the percentage of third grade SWD scoring below proficiency on Delaware's reading statewide assessments (Smarter Balanced Assessment Consortium (SBAC) and the Delaware System of Student Assessment-Alternate (DeSSA-ALT).

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

NO

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

NO

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

NO

Please provide a link to the current theory of action.

https://education.delaware.gov/legacy/wp-content/uploads/sites/4/2024/05/ssip_phase_i_toa_12422.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
2017	87.72%

Targets

FFY	Current Relationship	2024	2025
Target	Data must be greater than or equal to the target	77.72%	75.72%

FFY 2024 SPP/APR Data

Number of 3rd Grade Students with Disabilities Not Proficient on SBAC or DeSSA-ALT	Number of 3rd Grade Students with Disabilities Tested on SBAC or DeSSA-ALT	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
1,800	2,086	84.15%	77.72%	86.29%	Met target	No Slippage

Provide the data source for the FFY 2024 data.

Smarter Balanced Assessment Consortium (SBAC) reading assessment and the reading component of the Delaware System of Student Assessment Alternative (DeSSA - Alt) for third grade SWD.

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

The Delaware Department of Education (DDOE) Office of Assessment is responsible for collecting, analyzing, and reporting on the SBAC and DeSSA - Alt results. This analysis includes but is not limited to gender, race, multilingual leaners (MLL), and low-income groups. These comparisons are completed at a state and LEA level and involve stakeholders including LEAs, parents, and partners. The data are then reviewed by the Delaware (DE) SSIP Core Team to interpret the results for SSIP reporting.

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

YES

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

In 2024-25, the Student Success Block Grant (SSBG) Reading Interventionist (RI) Program provided funding to 45 Delaware schools to fund a Reading Interventionist (RIs) to work with students requiring tiered interventions. After the fall and spring administration of each school's universal screening assessment, the RIs provide data on the percentage of students they served who scored well below screening benchmarks, below the benchmark, and at, or above the screening benchmark, for students in kindergarten through fifth grade. They provided disaggregated data for SWD and MLL students.

Based on data from the spring 2025 end-of-year (EOY) Summary of Service survey, the Dynamic Indicators of Basic Early Literacy Skills (DIBELS) 8 assessment was the most used universal screening instrument at each grade level in spring 2025, followed by iReady and Acadience. Other assessments used by individual schools for grades 1 – 5 included PSI 95%, Star, Benchmark Phonics Screener, Independent Reading Level Assessment (IRLA), and Words Their Way. As schools used different universal screening assessments, at an RI Community of Practice prior to the data being submitted, norms were established for each benchmark level (Well Below Benchmark, Below Benchmark, or Meeting or Exceeding Benchmark).

For all students, between fall 2024 and spring 2025, students in grades K-5 demonstrated growth in the percentage of students meeting or exceeding the screening benchmarks. There was a decrease of 27% in the percentage of students served by RIs who scored well below the screening benchmark and a 17% increase in the percentage of students who met or exceeded the screening benchmarks. All but fifth grade students demonstrated growth in the percentage of students meeting or exceeding the screening benchmarks. The largest impact was for kindergarten (+40%) and first grade (+22%) students who showed growth in the degree to which they met or exceeded the screening benchmark between the end of year (EOY) for Kindergarten and the EOY for First Grade. Almost half of kindergarten students met or exceeded the screening benchmarks (mean(m)=47%) on their EOY screening assessment.

For SWD, there was a small increase in the percentage of SWD who met or exceeded the screening benchmark (+7%), with 12% of SWD meeting or exceeding the screening benchmark at the EOY. There was a decrease of 10% in the percentage of SWD who scored well below the screening benchmark. There was a decrease in the percentage of SWD in all grades who scored well below the screening benchmark, between the beginning of year (BOY) and EOY. The percentage of SWD who met or exceeded their screening benchmarks was unchanged for third grade, but the degree of increase ranged from 3% for (second grade students to 21% for kindergarten students. Kindergarten (m=21%) and fourth grade (m=14%) SWD were most likely to meet or exceed their screening benchmarks.

For all multilingual learners, there was a decrease of 14% in the percentage of MLLs served who scored well below the screening benchmark and a 13% increase in the percentage of MLLS who met or exceeded the screening benchmarks. In each grade, there was a decrease in the percentage of students scoring well below their screening benchmarks, ranging from a decrease of 45% for kindergarten students to a decrease of 1% for fourth grade students. For all but fifth grade students, there was an increase in the percentage of MLLs who met or exceeded their screening benchmarks. The largest impact was for MLLs in kindergarten (+38%) and first grade (+23%).

SSBG RI Program – Progress Monitoring Data

On the mid-year (MOY) 2024-25 Summary of Service Survey, RIs reported on the number of the students served who achieved differing levels of performance during the most recent progress monitoring cycle. Like the discussion above about universal screening data, LEAs used different progress monitoring assessments. RIs were asked to use the scoring guides from the progress monitoring tool they used, and their professional judgment to determine which category best fit students' performance.

The RIs were asked how long the progress monitoring cycles lasted at their schools. The use of six (m=43%), seven (m=28%), and eight (m=23%) week progress monitoring cycles were the most frequently used. A smaller percentage of schools used a nine-week cycle (3%). RIs were also asked what progress monitoring tools they used. DIBELS 8 was used by almost half of the participating schools (m=41%), with Acadience being used by 15% of participating schools. Progress monitoring instruments associated with the 95% Percent Group (m=16%) and Benchmark interventions (m=11%) were used the next most often.

Last, RIs were asked to report on the percentage of the students they served who achieved differing levels of performance during the progress monitoring cycle they were reporting on. The results were disaggregated by all students, SWD, and MLLs. For each group of students, a comparable percentage (m=39% - 49%) made adequate progress across the progress monitoring cycle but did not achieve their established benchmarks. The next largest groups of students in each group made inadequate progress (m=19% - 30%) or inconsistent progress (m=13% - 15%). The percentage of students in each group who made adequate progress and met their specified benchmarks ranged from an average of 25% for all students to 15% for MLLs to 13% for SWD.

State Assessment Data

SBAC and DeSSA - Alt data were used to inform our SiMR. Between the two assessments, 86.29% of Delaware's third grade SWD did not score in the proficient range. The target was for 77.72% of Delaware's third grade SWD to score below the proficient range, so our target was missed by 8.57%. DDOE continues to address the 1% Cap to ensure only the students with the most significant cognitive disabilities take the DeSSA. This is evident in the statewide decrease of students taking this assessment from the previous year. It is understandable these efforts would negatively impact proficiency scores while improving our 1% Cap data. Delaware has also experienced a shortage of teachers, impacting the consistency of core instruction. In 2022, Delaware had 8,737 public school teachers. That is 500 fewer teachers than the state needs, 165 of which are in special education. The DDOE continues to support Local Education Agency (LEAs) in recruiting and retaining teachers through pathways to certification and alternative route programs. Delaware is focused on literacy and through legislation, funding, and initiatives is striving to determine root causes of struggling literacy scores and solutions to address them. Lack of consistent instruction due to teacher vacancies and virtual instruction during foundational years characterized by unfinished learning contributed to the overall decrease in proficiency rates.

Did the State identify any general data quality concerns, unrelated to COVID-19, which 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://education.delaware.gov/legacy/wp-content/uploads/sites/4/2024/05/de_ssip_project_level_evaluation_plan_12422.pdf

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

NO

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

Two strategies (teaming and evidence-based professional learning (PL)) were used. Six teams supported the implementation of the DE SSIP Multi-Tiered System of Support (MTSS) and early literacy infrastructure improvement strategies, with a focus on governance, standards, accountability, and monitoring through collaborative teaming; and PL.

TEAMING

MTSS Core Team: The DE MTSS Core Team has 14 cross-DDOE members and was responsible for oversight and support of MTSS and early literacy PL. They met 9 times in 2024-25.

MTSS Implementation Team: The MTSS Implementation Team (IT), supported by the DE-MTSS TA Center, included the MTSS Core Team and representatives from the DE Parent Information Center (PIC), and staff from the University of DE (UD) who focus on Positive Behavior Supports, Social Emotional Learning, and Universal Design for Learning (UDL). The IT provided coordination and leadership to build the capacity of State Education Agency (SEA), LEA, and school personnel to implement an integrated MTSS framework. This included (1) a focus on multidirectional communication with stakeholders and families to increase MTSS implementation capacity and (2) support to align initiatives to improve whole child outcomes and for continuous data use to improve supports for LEAs, schools, and families. The IT met 11 times in 2024-25.

MTSS Advisory Council: The MTSS Advisory Council (approx. 65 stakeholders from the DDOE, LEAs, agencies and families) has historically provided advice on SSIP work related to governance, standards, accountability, and monitoring. DDOE staff worked with individual Council members, such as the DE PIC, to develop resources and tools to support MTSS and literacy efforts. No meetings were held in 2024-25 as the DDOE worked internally to re-launch the MTSS work.

DE Literacy Plan Leadership Team: The DE Literacy Plan Leadership Team consisted of staff from the Exceptional Children Resources (ECR) and Academic Excellence workgroups; and the DE SSIP external evaluator. The Team provided oversight on the implementation of DE Literacy Plan PL, focusing on the training and support related to SWD. The Team met formally each quarter, and informally as needed.

DE Early Literacy Advisory Group: The DDOE's Early Literacy Advisory Group was established to guide and support implementation of early literacy legislation and includes the DDOE Academic Support Team and ECR, LEAs, and other partners. They met 3 times in 2024-25 to gain insight/feedback regarding selection of high-quality instructional materials, aligned PL to support evidence-based reading instruction, the selection and implementation of universal screeners, diagnostic tools, and reading interventions.

Developmental Disabilities (DD) Planning Council: In 2024-25, the DDOE met twice to begin collaborative efforts with the DD Council. The first meeting was with the DD Council Advocacy and Outreach Committee. At this meeting, staff from the DDOE ECR and Academic Excellence workgroups shared the DDOE early literacy plans. The DD Council provided feedback. The DDOE Secretary was invited to the main DD Council meeting in October 2024 and provided DDOE priorities for early literacy and sought feedback from the group.

PROFESSIONAL LEARNING STRATEGIES

Seven sets of related PL offerings were provided in 2024-25, including: (1) the DE MTSS TA Center, (2) SWIFT Education Center, (3) the Systematic Processes for Enhancing and Assessing Communication Supports (SPEACS), (4) 5 MTSS and 5 Delaware Early Literacy Initiative (DELI) training modules, (5) the DE Literacy Plan Training Series, (6) the SSBG RI Program, and (7) the DE Literacy Coalition (DLC).

DE-MTSS TA Center: The TA Center supports LEAs implementation of MTSS through statewide initiatives including UDL, SPEACS, the MTSS Cadre, and various PL opportunities for leaders and staff addressing the essential components of DE-MTSS. In 2024-25, 16 virtual PL opportunities were offered to DE educators. They focused on MTSS, SPEACS, inclusive skill-building.

SWIFT : The DDOE is a SWIFT Education Center Intensive Model Demonstration Site, collaborating over the next 4 years to demonstrate how to move from inclusion toward rightful presence for students not fully included at their school. While continuing to address rightful presence at the SEA level, this initiative supported implementation of SWIFT activities in 7 schools in 2 LEAs in 2024-25. In 1 LEA, the District Leadership Team (DLT) (6 members) met 11 times to plan and coordinate LEA-level implementation and the District Implementation Team (DIT) (19 members) met 10 times to focus on school-level implementation. In the second LEA, the DLT (15 members) met 8 times.

SPEACS : SPEACS's seeks to improve communication, literacy, and educational services to students with complex communication needs and supports educators to help students move from pre-symbolic and emergent communication to symbolic communication and to access quality literacy instruction. Each LEA developed a leadership team to oversee implementation and support capacity development. Teachers were identified to receive training and coaching. PL resources were provided statewide to enhance literacy instruction for students with communication support needs. SPEACS worked intensively with 3 schools in 2 LEAs, 1 with 5 middle school teachers and 1 elementary school teacher and the second with 5 Pre-K teachers.

MTSS and DELI Modules: In 2021, 5 MTSS and 5 DELI training modules were created for Delaware educators including (1) DE MTSS Overview, (2) Building an Effective Tier 1 System, (3) Universal Screening Process, (4) Tiers 2 and 3, and (5) Effective Progress Monitoring. The DELI modules are (1) Overview of Explicit Instruction, (2) Foundational Reading Skills, (3) Vocabulary and Comprehension, (4) Intensive Intervention in Reading, and (5) Effective Writing Instruction.

DE Literacy Plan Professional Learning Opportunities: In 2024-25, 930 educators (a duplicated count) completed 13 sessions of 10 courses aligned with the DE Literacy Plan. The courses addressed early literacy for educators and administrators. 3 courses were offered more than once. The courses addressed reading, writing, assessment, and leadership. Below is a summary of the 3 sets of courses and micro-credentials offered.

Language Essentials for Teachers of Reading and Spelling (LETRS) (Lexia): LETRS Volume 1 and Volume 2, LETRS for Administrators, Early Childhood LETRS

AIM Pathways: Pathways to Proficient Reading, Pathways to Proficient Writing, Pathways to Structured Literacy, Pathways to Literacy Leadership

UD School Success Center (SSC) Courses: Science of Writing and Literacy Foundations for English Learners

Micro-credentials: 29 micro-credentials are on DE's Digital DE Early Literacy website as part of a full complement of early literacy, Tier 1 instruction, and UDL information.

SSBG RI Program: To support the DE Literacy Plan, the DDOE launched the SSBG RI program to fund one RI per elementary school with enrollments that are either at least 60% students experiencing poverty or 20% Multi-Lingual Learners (MLLs). 44 schools participated in 2024–25. 7 SSBG RIs Community of Practice CoPs were held. The CoPs trained RIs on MTSS, MLL reading strategies, the use of tiered interventions, and data collection and analysis strategies.

DLC: The DLC includes LEA administrators, DDOE staff, IHEs, businesses, and community organizations. The DLC met monthly to learn and collaborate to improve and support K-12 ELA instructional practices. DLC efforts were enhanced through the Communication and Collaboration Network (CCN) monthly meetings of statewide LEA curriculum directors, supervisors, and leaders along with DDOE staff. CCN focuses on shared decision making on Every Student Succeeds Act (EESA) implementation, legislation, and additional initiatives. Both groups provided valuable stakeholder input and collaboration for the SSIP and related endeavors.

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.

Each of the outcomes described below were connected to DE SSIP activities addressing PL, quality standards, governance, and the use of data. Results were shared with pertinent teams and stakeholders. The results were analyzed by DE SSIP leadership to inform the degree to which the activity impacted the achievement of the SiMR, as well as scale up and sustainability efforts.

TEAMING

DE Early Literacy Advisory Group

Evaluation data were collected after 3 DE Early Literacy Advisory Group meetings. 95% of the respondents agreed or strongly agreed the information presented at the meetings was supportive of their work. 98% of the respondents agreed or strongly agreed they were more knowledgeable of the content addressed at the Advisory Group meetings. Qualitative data were also collected and reviewed to inform future Advisory Group meetings.

PROFESSIONAL LEARNING STRATEGIES

SWIFT

SWIFT staff supported the completion of the District Capacity Assessment (DCA) that was administered in 2 LEAs. The DCA is an action assessment designed to help educational district leaders and staff better align resources with intended outcomes and develop action plans to support the use of effective innovations. It is composed of 27 items across three subscales: Leadership, Capacity, and Organization. The DCA was completed by the leadership teams at the participating LEAs. One LEA administered their pre-test in spring 2024, with a second administration in fall 2025. The average DCA score for this LEA increased from 15% at baseline, to 57% in fall '25. Sub-scales for this LEA in fall 2025 were 75% for Leadership, 64% for Organization, and 31% for Competency. The largest increase was for Organization (+55%). The second LEA administered their baseline DCA in winter 2024-25. Their average DCA score was 33%. Baseline sub- scales were 50% for Leadership, 31% for Competency and 23% for Organization.

A State Capacity Assessment (SCA) was administered in 2024 and 2025. The SCA is an action assessment designed to help state educational leaders better align resources with intended outcomes and develop action plans to support LEAs implementation of SWIFT activities. It is composed of 3 subscales: Leadership, Infrastructure and Resources, and Communication and Engagement. The average score increased from 27% of the SCA practices in place in 2024 to 42% of the practices in place in 2025. Leadership was the highest rated subscale in 2025 (m=44%).

SPEACS

During 2024-25, the SPEACS team supported classrooms in 1 middle school and 1 elementary school in 1 LEA and 1 preschool setting in a second LEA to (1) utilize augmentative and alternative communication to create a language supportive environment for all students (2) to develop emergent and conventional literacy strategies within varied classroom environments. Within the elementary schools, the SPEACS team coached 11 classroom teams, including inclusion and self-contained classrooms at pre-K, elementary, and middle school levels. The SPEACS coaching team met monthly with classroom teachers and their teams to develop lesson plans that included implementation of introduced communication and comprehensive literacy strategies. The SPEACS team then went into the classroom for monthly observations of implementation of the planned lessons. 14 educators responded to a May 2025 survey about the impact of SPEACS PL. They felt the classroom visits were most impactful (n=8), followed by the coaching and lesson planning sessions (both, n=5). Respondents reported less impact for systems-level activities. 7 educators found the monthly building level meetings somewhat impactful, with 5 respondents stating the monthly district meetings were somewhat impactful. The most impactful Comprehensive Literacy for All Strategies (CLFA) were shared reading and predictable chart writing (both, n=7). Data from both LEAs showed an increase in use of Augmentative and Alternative Communication (AAC) devices and an increase in using strategies to support students who use AAC for literacy instruction. More information regarding the classroom observations is provided in the fidelity of implementation section of this report.

MTSS and DELI Modules

In 2024-25, 242 educators completed the MTSS modules. The number of educators who completed at least 1 of the 5 MTSS modules evaluation surveys ranged from 235 for the first module to 180 for the fifth module. Across all modules, 95% of respondents reported the modules increased their knowledge of the MTSS content addressed and the information was useful for supporting MTSS implementation. 93% felt the modules were of high quality. On average, general education teachers (m=36%), special education teachers (m=17%), and paraprofessionals (m=16%) were most likely to have completed the MTSS course evaluation survey.

In 2024-25, 152 participants completing. The number of completed evaluation surveys for at least one of the 5 DELI modules ranged from 146 for the first module to 69 for the fifth module. Due to the low-incidence specific-content, the degree of participation with the DELI modules was lower than with the MTSS modules. On average, across all DELI modules, 95% of respondents reported the modules increased their knowledge of the DELI content addressed and the information was useful for supporting the literacy development of students. Slightly fewer (m=93%) respondents felt the modules were of high quality. Using data from the first module, general education teachers (37%), paraprofessionals (19%), and special education teachers (12%) were the most frequent respondents to the DELI course evaluation survey.

Information on the MTSS and DELI module outcomes was shared with the MTSS Core and Leadership Teams. The outcomes addressed above relate to DE's PL and TA framework. As the number of educators implementing MTSS practices increases, this directly impacts Delaware's effort to scale up and sustain the use of MTSS.

SSBG RI Program

43 RIs responded to the May 2025 RI Post-Survey, providing feedback on the impact of the PL provided in 2024-25. The most frequent RI activities included the provision of small group or individual intervention instruction to students (m=87%), data management and analysis (m=84%), and administering assessments (m=82%). The least amount of time was spent on parent support and engagement activities (m=36%) and leading professional learning communities (m=38%).

The RIs were asked to rate their knowledge of Delaware's MTSS components. RIs perceived growth in their knowledge of each of the MTSS components, from the pre-survey in September 2024 to the post-survey in May 2025. The most growth was found for comprehensive assessment system (+0.23). On the post-survey, respondents felt most knowledgeable about data-based decision making (m=3.72) and tiered systems of support (m=3.63). They felt less knowledgeable about team-based leadership (m=3.28).

The RIs were next asked how confident they were use research-based literacy practices. The most growth from pre- to post-survey was in decoding and word recognition (+0.14) and writing (+0.11). On the post-survey, respondents were most confident decoding and word recognition (m=3.81) and phonological awareness (m=3.70). They were less confident in their knowledge of writing instruction (m=3.02).

DE Literacy Plan Professional Learning Opportunities

Course ratings were very high across the 13 courses with completed pre/post-tests. On average, 68% of respondents felt knowledgeable of the training content prior to the training. 88% of respondents stated they were knowledgeable about the training content after the training, a 19% increase. 18 courses gathered formative data regarding the quality, relevance, and usefulness of the courses. 93% of respondents agreed or strongly agreed that the courses were high quality, relevant, and useful for their work.

Did the State implement any <u>new</u> (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.

TEAMING

Starting in the 2024–25 school year, SWIFT and DDOE began to work collaboratively with district leadership, to collect data, set goals, design PL, and provide coaching. This new endeavor, along with the recently created DE-MTSS TA Center, will continue to be governed by the MTSS Core team to manage the center and partner with grant staff and the MTSS Leadership Team, which includes an integrated group of DDOE directors to guide the work of the MTSS Implementation Team to work alongside LEAs. With the repurposed existing MTSS teams, the MTSS Advisory Council will continue as a valuable stakeholder group as needed. As a result of the various teaming activities described earlier in this report, the DDOE and LEAs will be better prepared to support high quality literacy instruction, resulting in improved students' literacy performance.

DE Early Literacy Advisory Group

In 2025-26, three annual meetings will be held to share important legislative information and updates related to early literacy, ensuring that all stakeholders are informed about current developments. Additionally, there will be a celebration of the professional learning achievements that have occurred to date, recognizing the progress made in enhancing skills and knowledge. Ongoing support for legislative timelines and report requirements will be addressed along with professional learning opportunities being offered.

PROFESSIONAL LEARNING STRATEGIES

MTSS and DELI (Delaware Early Literacy Initiative) Modules

The modules will continue to be available to all Delaware educators through Schoology. The DDOE has added competency-based components to the modules, as part of our PLC Toolkit. The competencies are aligned to the Science of Reading and include a Facilitators Guide so they can be used as a professional learning option during LEA or schools PLCs. The importance of implementing evidence-based early literacy strategies for all students through an MTSS framework will continue to be emphasized. The primary outcomes of the modules will be increased capacity of Delaware educators to better implement MTSS practices across the state, impacting Delaware's effort to scale up and sustain the use of MTSS.

SWIFT

In 2023-24, DDOE began a four-year partnership with SWIFT National Center on Inclusion Toward Rightful Presence. This initiative enhances DDOE's efforts to build equitable systems that create rightful presence for students, families, and communities. Two LEAs were chosen as model demonstration sites to journey from inclusion toward rightful presence for dynamic learners with intensive cognitive needs, including those identified with Autism, Intellectual Disability, Deaf Blind and Traumatic Brain Injury. Model Demonstration Sites will become exemplars of how Dynamic Learners can be more equitably and meaningfully engaged in school, experience improved academic and social outcomes, and successfully transition to college, career, and other adult life circumstances. Going forward, this important work will be scaled up to include more LEAs and their students with projected positive student outcomes.

SSBG RI Program

In the 2025 spring report, Reading Interventionists were asked what MTSS components they would like to learn more about as it pertains to literacy development, four to five respondents mentioned assessment, literacy practices/science of reading, team-based leadership, and tiered systems of support. Three respondents mentioned the benefit of collaborating with other Reading Interventionists to learn how other schools approach MTSS and literacy development. These will continue to be DDOE's focus in the 2025-26 school year. As the Reading Interventionists increase their capacity to support students' access to Tier 1 instruction, team-based leadership, and MTSS; and support of SWD and MLL students, the educators they support will enhance their skills in these areas, ultimately impacting the academic outcomes of all students.

DE Literacy Plan Professional Development Opportunities

The following professional development opportunities will continue for the 2025-26 school year. These offerings are important factors in capacity building and sustainability. Participating educators and school leaders will become more skilled to teach and lead instruction in reading and writing and will develop the necessary leadership skills to support and sustain ongoing professional learning to support literacy. Science of Reading approved courses through the vendors below are advertised on the DDOE website, mailings, social media, and during meetings.

- LETRS (Lexia)
- AIM Pathways
- University of Delaware School Success Center (SSC)
- Micro-credentials

SPEACS

The DDOE will continue to align SPEACS professional learning with the DE Literacy Plan professional learning activities to support literacy efforts for all Delaware students. SPEACS will continue to work with the two existing LEAs, while also providing universal supports to all DE educators through their ongoing virtual professional learning opportunities. These professional learning activities will increase the capacity of low incidence teachers and other school staff to improve reading outcomes for students with the most significant cognitive disabilities.

Delaware Literacy Coalition

Literacy leaders will continue to meet and address literacy and curriculum topics under the guidance of the steering committee. The Steering Committee will continue to focus on literacy instruction in grades 4-8 to add these goals as an extension of the State Literacy Plan. As a result of these meetings, LEAs will have greater capacity to provide high quality literacy instruction designed to improve students' literacy performance.

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

1. MTSS Implementation

2. Evidence-Based Early Literacy Instruction

Provide a summary of each evidence-based practice.

MTSS Implementation

The DE-MTSS framework was designed to meet the needs of the whole child through an integrated, multilevel prevention system that optimizes team-based leadership and data-driven decision-making to meet the academic and non-academic needs of all students. Educators provide high-quality, core academic instruction and non-academic practices as universal supports to all children. School teams use a universal screening process to identify students who need additional help, and they deliver evidence-based interventions and supports that match student needs and are informed by ongoing progress monitoring and additional formative assessments. As in previous years, 2024-25 DE SSIP activities focused mainly on the implementation of professional learning offerings and resources to support MTSS implementation, to support the new MTSS regulations that went into effect in July 2021. More information on the implementation of the professional learning improvement strategies was addressed in the previous sections of this report.

Evidence-Based Early Literacy Instruction

Improved evidence-based literacy instruction will impact student outcomes by improving students' early literacy skills and knowledge. The early literacy professional learning that supports the DE Early Literacy Plan Training series, the SSBG RI Program, and SPEACS; as well as DLC dissemination activities support the DE SiMR. Data on the impact of improved early literacy instruction were gathered through the SSBG RI Program and from state assessment results.

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.

MTSS Implementation

Improved MTSS processes impacted the DE SiMR by changing LEA policies to identify students in need of extra reading support and providing targeted interventions. Through the MTSS and DELI modules, the SSBG RI Program, and DLC dissemination activities, we expect LEAs and schools to develop policies to support MTSS implementation, leading to better teacher practices that improve student outcomes. The DDOE partners with the SWIFT Education Center as an Intensive Model Demonstration Site Partner to move from inclusion toward rightful presence for students who are left out or kept at the margins of school. This endeavor, along with the DE-MTSS TA Center, are governed by the MTSS Core Team. The DE-MTSS TA Center has facilitated a statewide MTSS Cadre, PL opportunities for parents, teachers, and leaders, and intensive MTSS coaching in two LEAs. This Team manages the DE-MTSS TA Center and partners with the MTSS Leadership Team to guide the work of the MTSS Implementation Team. The MTSS Implementation Team works closely with the MTSS Advisory Council and the DE Early Literacy Advisory Group. These activities will improve teachers' instructional practices and ultimately improve student outcomes.

Evidence-Based Early Literacy Instruction

Improved evidence-based literacy instruction will impact student outcomes by improving students' early literacy skills and knowledge. The early literacy professional learning supports the DE Early Literacy Plan Training series, the SSBG RI Program, and SPEACS; as well as DLC dissemination activities support the DE SiMR. Data on the impact of improved early literacy instruction were gathered through the SSBG RI Program and from state assessment results.

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

Fidelity of implementation data were collected through the SPEACS and SWIFT initiatives.

SPEACS Fidelity of Implementation Data

As discussed previously, SPEACS supports students with communication-access needs by providing professional learning to educators to create a language supportive environment for all students, and in the development of emergent and conventional literacy strategies across classroom environments.

In 2024-25, two trained SPEACS staff observed 10 teachers participating in the SPEACS initiative. The observations were designed to collect data on the availability and use of AAC and/or communication supports and the use of these tools to promote literacy skills for students in participating SPEACS classrooms. The following rating scale was used: 0=Not Observed, 1=Emerging, 2=Establishing, and 3=Exemplary.

As in 2023-24, the five Pre-K teachers demonstrated a higher degree of evidence of their general use of communication supports (m=1.30) than middle school teachers (m=0.70), as well as having a higher change score (+1.20 vs +0.55). There was no evidence of the use of management of classroom communication supports in fall 2024, but that construct was observed the most frequently in the spring 2025 observations (m=2.30). The next most frequently used communication support by all teachers in spring 2025 was the use of communication strategies (m=1.30). The greatest degree of change was observed for the management of classroom communication supports (+1.50).

In disaggregating the Literacy Supports domain, the literacy practice observed most frequently in fall 2024 and spring 2025 was the use of AAC and/or communication supports to promote phonemic awareness and/or phonics (fall - m=0.90/spring - m=2.30). In spring 2025, the second most evidenced practice was the use of AAC and/or communication supports to promote vocabulary development (m=2.20), The greatest degree of change was observed for the use of AAC and/or communication supports to promote vocabulary development (+1.70).

SWIFT Fidelity of Implementation Data

The SWIFT Fidelity Implementation Tool is a systems-level assessment that measures the degree to which practices are structured, formalized, and in place throughout the school system. It is composed of 58 items that are each scored as 0-1-2-3, organized by four domains and 12 features. It is conducted by a trained, external assessor. During the first administration in fall 2024, only the Integrated Instructional System domain was assessed. This was done as the Integrated Instructional Systems domain was the most helpful for schools to plan and develop priorities. During the second administration in spring 2025, all four domains were assessed. In one LEA, the Integrated Instructional System rating increased from 45.0% to 49.3% from the first to second administration. In the second LEA, the Integrated Instructional System rating decreased from 46.9% to 44.8%.

At the second administration, the average rating for all domains for both LEAs was 49.8%, indicating half of the SWIFT FIT practices were in place. The highest rated features were Strong and Positive School Culture (m=73.8%), followed by Strong Educator Support System (m=71.4%). The lowest rated feature was Fully Integrated Structure (m=28.6%).

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.

Not applicable. All data collected has been discussed previously.

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

MTSS Implementation

The DDOE has implemented an integrated DE-MTSS TA Center in partnership with the University of Delaware to provide professional learning and coaching in support of the academic and non-academic development of all children. The DDOE is an Intensive Model Demonstration Site Partner supported by the SWIFT Education Center. This collaboration will continue for an additional three years to focus on demonstrating how to move from inclusion toward rightful presence for students who are left out or kept at the margins of school. One of the goals of this partnership is to support LEA and school implementation teams to lead whole-system transformation through professional learning and coaching around MTSS with a focus on our most challenging learners. These two projects will continue to be governed by an MTSS Core team to manage the center and partner with grant staff and MTSS Leadership, which includes the addition of integrated group of DDOE directors that will guide the work of the MTSS Implementation Team to work alongside LEAs. Through the collaboration with the DE-MTSS TA Center and partnering with SWIFT, DDOE will continue to focus on data driven planning around MTSS practices to improve outcomes for all students. This includes LEA support on UDL through the DE UDL Project, communication and literacy strategies for students with the most significant cognitive disabilities through SPEACS, MTSS and positive behavior support training and support through the DE Positive Behavior Support group, and assistance with alternate assessment supports.

Evidence-Based Early Literacy Instruction

SSIP activities are now more aligned with activities under the Delaware Early Literacy Plan, allowing for more opportunities to scale up and sustain the evidence-based early literacy practices. SPEACS will continue to recruit LEAs to receive targeted support while providing universal professional learning and resources to support communication and literacy. These efforts will increase staff knowledge and skills leading to improved communication and literacy outcomes for students with disabilities. The SSBG Reading Interventionist Program will continue to focus on MTSS and supporting students' access to Tier 1 instruction. Professional learning will continue to address data-based decision making through analysis of student data and evidence-based reading instruction. Additional topics will be covered based on participant needs indicated through surveys. These more targeted professional learning initiatives will provide the DDOE with the best data to assess the impact of the training and coaching on the use of evidence-based practices and student outcomes.

Evidence-Based, Reading Instruction Curricula

To address Senate Bill 4, DDOE created a state-approved adoption list of evidence-based, reading instruction curricula for grades K-3. LEAs must adopt a curriculum from the list by the start of the 2027-2028 school year. The state is also supporting LEAs as they provide job-embedded, competency-based professional learning on how to effectively and explicitly teach the components of reading to all personnel in grades K-3 who provide reading instruction or coaching (grounded in the science of reading).

Additionally, House Bill 304 requires there is a state list of universal reading screeners and literacy intervention approaches (K-3) that are aligned with the essential components of evidence-based reading instruction. This process requires the inclusion of curriculum and special education supervisors, as well as elementary school teachers and elementary special education teachers from LEAs and charters in the development of the lists of aligned screeners and interventions. The lists of aligned screeners and interventions are available from DDOE. The DE Early Literacy Advisory Group, referenced earlier, played a critical role in the development of these resources.

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.

In Delaware's FFY 2023 SPP/APR, the DDOE reported the following new strategy:

Delaware State (K-3) Early Literacy Coach program will support the state's achievement of its early literacy vision by building the capacity of district and school leaders and teachers to provide effective and equitable literacy instruction to all students. Early Literacy Coaches will provide strategic support to LEAs in alignment with legislation and best practice. The Early Literacy coaches are state funded but will be housed at Delaware State University. A high bar has been set for selecting the Early Literacy Coaches. They are required to be knowledgeable of the Science of Reading, HQIM, and curriculum-based PL. Additionally, the Early Literacy Coaches must have experience teaching HQIM, along with knowledge of MTSS processes and procedures, Learning Forward Professional Learning Standards, Adult Learning Theory, and TGSS. DDOE is continuing to develop the new program with DSU and hope to begin hiring early in 2025.

In September 2024, DDOE will recruit and hire up to twenty Early Literacy coaches. Coaches will provide intensive PL and be introduced to their partnering schools in January 2025. A second round of interviews will occur in January 2025 with the hopes of onboarding a second cohort of coaches in June 2025. In total, DDOE hopes to have 15 coaches.

Moving into FFY 2024, Delaware leveraged a high-quality instructional material (HQIM) dashboard to calibrate and monitor LEA implementation of HQIM and student trends. A statewide coaching model was also implemented using the previously mentioned Early Literacy coaches that set clear statewide expectations for student-centered coaching while providing training and guidance for LEA implementation. During the implementation LEAs were provided support for inclusive and scaffolded instruction for students with disabilities. DDOE has also developed a narrowed approved list of screeners and intervention lists to ensure clarity and coherence for LEAs.

As Delaware moved into the 2025-2026 school year, the Delaware Early Literacy Playbook was introduced. This Playbook includes digital and print updates to the Delaware Early Literacy Plan and focuses on student-centered coaching. During Fall 2025, the DDOE launched a state funded Early Literacy Coach learning series. Included in the Fall 25 work, the DDOE conducted surveys, focus groups, and classroom visits to inform the implementation progress and supports. As DDOE moves into FFY 25, it will publish a revised early literacy emergency plan and share resources with LEAs through state-led curriculum meetings and provide the resources on the DDOE webpage. The DDOE will also provide parents with a parent toolkit for early literacy success. In addition, DDOE will introduce an initiative to provide mentoring for early literacy teachers and leaders through coaching and technical assistance. As the Early Literacy coaches have just begun work with the LEAs student impact will be monitored throughout the implementation.

Section C: Stakeholder Engagement

Description of Stakeholder Input

In preparation for setting targets for Indicator 17 and reporting targets in the FFY 2020 SPP/APR, ECR staff conducted 10 meetings with various stakeholder groups. These included the Multi-Tiered System of Support Advisory (MTSS Advisory), the Access to General Education Curriculum (AGEC) Committee, and Lunch and Learn sessions with parents in collaboration with the Parent Information Center of Delaware. Additional stakeholders included the Governor's Advisory Council for Exceptional Citizens (IDEA State Advisory Panel) and local education agency (LEA) Special Education Directors. ECR ensured broad demographic representation—covering race, ethnicity, geographic locations, disability categories, advocacy groups,

advisory groups, parents, and families—when inviting stakeholders. These meetings focused on sharing and analyzing historical and current data, setting targets, and identifying strategies for improvement.

ECR continues to engage stakeholders year-round to review data, discuss progress, and implement improvement activities. One such activity involved analyzing assessment data for all students compared to students with disabilities and developing targeted improvement strategies. Additionally, the DDOE continues to host data retreats where LEAs reviewed assessment data, identified root causes for gaps in participation and performance, and created actionable steps for addressing these gaps. DDOE will continue to work collaboratively with LEAs in using data to make instructional decisions and implementing improvement strategies to meet those needs.

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

The DDOE continues to engage a variety of stakeholder groups which include: several MTSS teams, Access to the General Education Curriculum Committee (AGEC), collaborations with the Delaware PIC, Governor's Advisory Council for Exceptional Citizens (GACEC-IDEA State Advisory Panel), and LEA Special Education Directors.

The AGEC has a variety of purposes including: (1) assistance in activities about access to general education curriculum; (2) advise and give recommendations to the DDOE; (3) review best practices; (4) network and share strategies; and (5) coordinate with other initiatives and activities. The AGEC includes 40 diverse members with representation from LEAs, the DE PIC, Institutes of Higher Learning, and advocacy partners. The AGEC meets several times during the year to specifically review data and discuss improvement strategies related to the SSIP.

The DE PIC continues to be a valuable partner of DDOE. Not only do their staff participate in numerous state initiatives, but they also assist in the outreach to parents and community members. They have contributed by creating and sharing many academic and MTSS resources and co-facilitating trainings for parents on education topics. This includes support addressing advocacy strategies (helping parents write letters, translate, and help parents prepare for school meetings), accommodations, administrative complaints, bullying Information and reporting, communication, community information and services, and IDEA eligibility. DE PIC continues to partner with DDOE to provide professional learning sessions on MTSS and UDL.

The GACEC is the Delaware review board for policies, procedures, and practices related to the delivery of services for all Delaware residents with exceptionalities or disabilities. The GACEC also serves as the State Advisory Panel for agencies providing educational services and programs to children through the Individuals with Disabilities Education Act (IDEA). GACEC staff participate on over 60 councils, boards, or committees, such as the DOE AGEC, Developmental Disabilities Council (DDC), State Council for Persons with Disabilities (SCPD), and the Center for Disabilities Studies Community Advisory Council (CAC), etc. DDOE staff participate in the GACEC monthly public meetings. GACEC partners with the DDOE in the data review and provides valuable input on improvement activities and progress.

The ECR has provided GACEC with information pertaining to the Delaware Early Literacy Plan to seek input on state literacy activities strategies. The GACEC feedback showed there is a concern that students with complex communications needs are not being taught literacy. The DDOE will continue to work with SPEACS staff to address this need. Members of the GACEC also continues to participate in numerous other stakeholder groups, including the initial collaborative work the DD Council (discussed under the Teaming section earlier in this report). These various collaborative activities enabled stakeholders to have a variety of opportunities to actively engage on SSIP topics.

DDOE staff continued to meet quarterly with LEA Special Education Directors. 147 directors and their teams meet by the county they serve. The meetings focused on reviewing targets, analyzing data, input on improvement activities, and collaboration around special education related items. The DDOE also started a Continuous Improvement Partnership with directors to discuss various indicators such as SPP/APR Indicators 3 and 17 and to share improvement strategies that are successful within the LEAs. This has been a valuable method of gathering and sharing stakeholder feedback while building capacity and sustainability of special education leadership within the state.

The MTSS Advisory Council (approx. 65 stakeholders) will be relaunched in 2025-26 to provide guidance on SSIP professional learning related to governance, standards, accountability, and monitoring. The MTSS Advisory Council included personnel from the DDOE, LEAs and schools, community agencies, and family representatives. DDOE staff worked with individual Council members, such as the DE PIC, to develop resources and tools to support MTSS and literacy efforts. The Council typically meets several times during the school year. Meetings addressed the purpose of the Council, the SWIFT Education Center, and the DE MTSS TA Center. Stakeholders provided feedback on state assessment and LRE data and related improvement strategies.

DDOE has also engaged in a partnership with American Institutes for Research to assist with the relaunch of MTSS. D

Stakeholder engagement activities and their subsequent outcomes were directly communicated with the Delaware PIC, the GACEC, MTSS Advisory Council, and LEA Special Education Directors, as discussed above. The stakeholder engagement activities focused and will continue to focus on governance, accountability/monitoring, and quality standards. Collaborating with these groups, each with a statewide focus will facilitate the DDOE's effort to support and sustain SSIP activities.

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

NO

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.

Not applicable. All planned activities have already been discussed.

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

Not applicable.

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

Not applicable.

Provide additional information about this indicator (optional).

EMAPS did not provide the option for data to be less than or equal to the target. As a result, "Met Target" and "No Slippage" were indicated above for FFY '24 which is incorrect. FFY '24 data (86.29) was not equal to or less than the FFY '24 target (77.72). Therefore, the FFY '24 target was not met and slippage occurred.

From FFY 2023 to FFY 2024, the percentage of students with disabilities (SWD) not proficient on the third-grade reading assessment increased by 2.15 percentage points. Delaware continues to experience a shortage of teachers. As a result, many teaching positions were vacant or filled by substitute teachers. DDOE continues to address the 1% Cap by ensuring only the students with the most significant cognitive disabilities are taking the Alternate Achievement Standards Assessment. It is understandable that these efforts would negatively impact proficiency scores while improving our 1% Cap data.

17 - Prior FFY Required Actions

None

17 - OSEP Response

17 - Required Actions

Indicator 18: General Supervision

Instructions and Measurement

Monitoring Priority: General Supervision

Compliance indicator: This SPP/APR indicator focuses on the State's exercise of its general supervision responsibility to monitor its local educational agencies (LEAs) for requirements under Part B of the Individuals with Disabilities Education Act (IDEA) through the State's reporting on timely correction of noncompliance (20 U.S.C. 1412(a)(11) and 1416(a); and 34 C.F.R. §§ 300.149, 300.600). In reporting on findings under this indicator, the State must include findings from data collected through all components of the State's general supervision system that are used to identify noncompliance. This includes, but is not limited to, information collected through State monitoring, State database/data system, dispute resolution, and fiscal management systems as well as other mechanisms through which noncompliance is identified by the State.

Data Source

The State must include findings from data collected through all components of the State's general supervision system that are used to identify noncompliance. This includes, but is not limited to, information collected through State monitoring, State database/data system, dispute resolution, and fiscal management systems as well as other mechanisms through which noncompliance is identified by the State. Provide the actual numbers used in the calculation. Include all findings of noncompliance regardless of the specific type and extent of noncompliance.

Measurement

This SPP/APR indicator requires the reporting on the percent of findings of noncompliance corrected within one year of identification:

a. # of findings of noncompliance issued the prior Federal fiscal year (FFY) (e.g., for the FFY 2024 submission, use FFY 2023, July 1, 2023 – June 30, 2024)

b. # of findings of noncompliance the State verified were corrected no later than one year after the State's written notification of findings of noncompliance.

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

Instructions

Targets must be 100%.

States are required to complete the General Supervision Data Table within the online reporting tool.

Report in Column A, the number of findings of noncompliance made in FFY 2023 (July 1, 2023 – June 30, 2024), as reported in the compliance indicator, and report in Column C1, the number of those findings which were timely corrected, as soon as possible and in no case later than one year after the State's written notification of noncompliance. Report in Column B, the number of additional findings of noncompliance related to the compliance indicator made in FFY 2023 (July 1, 2023-June 30, 2024) and report in Column C2, the number of those additional findings related to the compliance indicator which were timely corrected, as soon as possible and in no case later than one year after the State's written notification of noncompliance.

States may also provide additional information related to other findings of noncompliance that are not specific to the compliance indicators. This row would include reporting on all other findings of noncompliance that were not reported by the State under the compliance indicators listed below (e.g., Results indicators (including related requirements), Fiscal, Dispute Resolution, etc.). In future years (e.g., with the FFY 2026 SPP/APR), States may be required to further disaggregate findings by results indicators (1, 2, 3, 4A, 5, 6, 7, 8, 14, 15, 16, and 17), fiscal and other areas.

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 findings of 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 and the actions that have been taken or will be taken, to ensure the subsequent correction of the outstanding noncompliance, to address areas in need of improvement, and any sanctions or enforcement actions used, as necessary and consistent with IDEA's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

18 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2023	96.97%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data					96.97%

Targets

FFY	2024	2025
Target	100%	100%

Indicator 4B. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
4	0	4	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

For FFY 2023, there were no additional findings of noncompliance for Indicator 4B.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

DDOE provided technical assistance to all LEAs regarding Significant Discrepancy. In addition, targeted technical assistance was provided directly to the 4 LEAs identified with noncompliance. DDOE reviewed the Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within the 4 LEAs identified with noncompliance and verified that the identified LEAs were correctly implementing regulatory requirements under IDEA, regarding Significant Discrepancy, within the one-year period.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

To identify noncompliance, DDOE reviewed data collected from the state data system for all 42 LEAs. Out of the 42, four were identified with Significant Discrepancy.

4 LEAs required corrective action and timelines including correction of each instance of individual student noncompliance. A letter of findings was issued to the LEAs within 90 days of identification of noncompliance. DDOE provided technical assistance to all LEAs regarding Significant Discrepancy. Targeted technical assistance was provided directly to the LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the state data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

Indicator 9. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
0	0	0	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

For FFY 2023, there were no additional findings of noncompliance for Indicator 9.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

Indicator 10. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
7	0	7	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

For FFY 2023, there were no additional findings of noncompliance for Indicator 10.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

DDOE provided technical assistance to all LEAs regarding Disproportionate Representation. In addition, targeted technical assistance was provided directly to the 7 LEAs identified with noncompliance. DDOE reviewed the Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within the 7 LEAs identified with noncompliance and verified that the identified LEAs were correctly implementing regulatory requirements under IDEA, regarding Disproportionate Representation, within the one-year period.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

To identify noncompliance, DDOE reviewed data collected from the state data system for all 42 LEAs. 7 of the 42 LEAs were non-compliant.

7 LEAs required corrective action and timelines including correction of each instance of individual student noncompliance. A letter of findings was issued to the LEAs within 90 days of identification of noncompliance. DDOE provided technical assistance to all LEAs regarding Disproportionate Representation. Targeted technical assistance was provided directly to the LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the state data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

Indicator 11. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
12	1	12	1	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

For FFY 2023, there was 1 additional finding of noncompliance for Indicator 11 as a result of a State Complaint investigation. The school district was found in violation of FAPE because they failed to meet state special education regulations regarding initial evaluation timeline, (45 school days or 90 calendar days, whichever comes first), exceeding the timeline by 30 school days to determine eligibility.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

DDOE provided technical assistance to all LEAs regarding processes for timely evaluations. Targeted technical assistance regarding the timeline for initial evaluations was provided directly to the 12 LEAs identified with noncompliance totaling 65 students across the 12 LEAs. DDOE convened an internal committee to review each of the 12 LEAs' professional development, as well as each LEAs' policies, practices and procedures regarding initial evaluations. The DDOE also reviewed the corrective action plans, which included a root cause analysis and improvement activities, for those LEAs which had less than 90% timely evaluations (which was 4 of the 12 LEAs). Utilizing updated data subsequently collected through the state's data system, DDOE reviewed new additional randomly selected student records, within each of the 12 LEAs found noncompliant, and verified that each of the 12 LEAs identified with noncompliance were correctly implementing the specific regulatory requirements under IDEA, regarding timely evaluations, within the one-year period and achieved 100% compliance with the relevant IDEA requirements based on the review of the updated data or they had no new evaluation data to review. The number of new additional randomly selected student records that were reviewed for each LEA was based on the following business rules. If an LEA had 1-10 evaluations out of timeline, 2 records were reviewed; 11-20 evaluations out of timeline, 3 evaluations were reviewed, and greater than 20 evaluations out of timeline, 4 evaluations were reviewed.

Regarding the 1 instance of noncompliance that was the result of a State Complaint finding, the school district was directed to provide professional development related to the completion of initial evaluations within 45 school days or 90 calendar days, whichever comes first, of receiving written parent

consent) for all Special Education Coordinators, School Psychologists and related service providers by October 1, 2024. The school district was also directed to submit training materials (power points, media, and handouts) and sign-in sheets to the Director of Exceptional Children Resources by October 15, 2024. Throughout the completion of corrective action, the DDOE provided technical assistance and support for the school district. After ensuring that the one instance of individual student noncompliance was 100% correct, utilizing updated data, the DDOE reviewed evidence submitted by October 5, 2024 and verified that professional development was provided by October 1, 2024, the school district's policies and procedures related to initial evaluation timeless are compliant with IDEA and State related regulatory requirements and that all Special Education Coordinators, School Psychologists and related service providers attended. In addition, utilizing updated data subsequently collected through the state's data system, DDOE reviewed new additional randomly selected student records and verified that the LEA is correctly implementing the specific regulatory requirements under IDEA, regarding timely evaluations, within the one-year period, and achieved 100% compliance with the relevant IDEA requirements based on the review of the updated data.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

To identify noncompliance, DDOE reviewed data collected through the State data system for all 42 LEAs during which 12 LEAs were identified with noncompliance for a total of 65 students across the 12 LEAs. A letter of findings was issued to each of the 12 LEAs within 90 days of identification of noncompliance, with required actions and timelines including correction of each of the 65 instances of individual student noncompliance. DDOE provided technical assistance to all LEAs regarding processes for timely evaluations. Targeted technical assistance regarding the timeline for initial evaluations was provided directly to the 12 LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the State data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct. Evidence of correction included verification of Evaluation Summary Report documents, as well as staff interviews, review of communication to parents, contact logs, meeting invitations, prior written notice, and emails. DDOE instructed the identified LEAs to conduct a root cause analysis and develop a corrective action plan if they had less than 90% of their initial evaluations within timeline. The DDOE provides the LEAs with a Corrective Action Plan template to complete and submit to the DDOE. The template includes a section where the LEA is to detail their root cause analysis, action steps, baseline data, method of progress monitoring, and report to DDOE on their progress with implementation.

Regarding the 1 instance of individual student noncompliance that was the result of a State Complaint finding, the initial evaluation, while late, was completed as soon as possible. Utilizing updated data, the DDOE verified that the 1 instance of individual student noncompliance was 100% correct.

Indicator 12. 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
3	0	3	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

For FFY 2023, there were no additional findings of noncompliance for Indicator 12.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

DDOE provided technical assistance to all LEAs regarding Indicator 12. In addition, targeted technical assistance was provided targeted technical assistance regarding timelines for early childhood transitions directly to the 3 LEAs identified with noncompliance. DDOE reviewed each Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within each of the 3 LEAs identified with noncompliance and verified that 100% of the 3 LEAs identified were correctly implementing regulatory requirements under IDEA, regarding Indicator 12, within the one-year.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

To identify noncompliance, DDOE reviewed data collected through the State data system for all 43 LEAs. Of the 16 LEAs who provide Early Childhood Special Education services, 3 LEAs were identified with noncompliance for a total of 15 students across the 3 LEAs. A letter of findings was issued to each of the 3 LEAs, within 90 days of identification of noncompliance, with required corrective actions and timelines including correction of each of the 15 instances of individual student noncompliance. DDOE provided technical assistance to all LEAs regarding Indicator 12/Timely Transitions. Targeted technical assistance was provided directly to the 3 LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the State data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

Indicator 13. 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 and 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 a representative of any participating agency 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))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
8	0	8	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

For FFY 2023, there were no additional findings of noncompliance for Indicator 13.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

DDOE provided technical assistance to all LEAs regarding Indicator 13. In addition, targeted technical assistance was provided directly to the 8 LEAs identified with noncompliance. DDOE reviewed each Corrective Action Plan which included a root cause analysis, professional development for staff in areas identified as noncompliant, and improvement activities to address root causes, and verified that all improvement activities were completed. Utilizing updated data collected through the state's data system, DDOE reviewed new randomly selected student records within each of the 8 LEAs identified with noncompliance and verified that 100% of the 8 LEAs identified were correctly implementing regulatory requirements under IDEA, regarding Indicator 13, within the one-year period.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

To identify noncompliance, DDOE reviewed data collected through the State data system for all 42 LEAs. Eight LEAs were identified with noncompliance. A letter of findings was issued to each of the 8 LEAs with required corrective actions and timelines including correction of each instance of individual student noncompliance. DDOE provided technical assistance to all LEAs regarding Indicator 13. Targeted technical assistance was provided directly to the 8 LEAs identified with noncompliance. After LEAs corrected all individual student noncompliance, utilizing updated data collected through the State data system, DDOE reviewed each instance of individual student noncompliance and verified that each instance was 100% correct.

Optional for FFY 2024 and 2025:

Other Areas - All other findings: States may report here on all other findings of noncompliance that were not reported under the compliance indicators listed above (e.g., Results indicators (including related requirements), Fiscal, Dispute Resolution, etc.).

Column B: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Column B for which correction was not completed or timely corrected

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any findings reported in this section:

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

Total for All Noncompliance Identified (Indicators 4B, 9, 10, 11, 12, 13, and Optional Areas):

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
34	1	34	1	0

FFY 2024 SPP/APR Data

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified FFY 2023	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
35	35	96.97%	100%	100.00%	Met target	No Slippage

Percent of findings of noncompliance not corrected or not verified as corrected within one year of identification	0.00%

Provide additional information about this indicator (optional)

Summary of Findings of Noncompliance identified in FFY 2023 Corrected in FFY 2024 (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified during FFY 2023 (the period from July 1, 2023 through June 30, 2024)	35
2. Number of findings the State verified as timely corrected (corrected within one year from the date of written notification to the LEA of the finding)	35
3. Number of findings not verified as corrected within one year	0

Subsequent Correction: Summary of All Outstanding Findings of Noncompliance Identified in FFY 2023 Not Timely Corrected in FFY 2024 (corrected more than one year from identification of the noncompliance):

4. Number of findings of noncompliance not timely corrected	0
5. Number of findings in Col. A the State has verified as corrected beyond the one-year timeline for Indicator 4B, 9, 10, 11, 12, 13 (“subsequent correction”)	0
6a. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 4B	0
6b. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 9	0
6c. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 10	0
6d. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 11	0
6e. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 12	0
6f. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 13	0
6g. (optional) Number of written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - All other findings	0
7. Number of findings not yet verified as corrected	0

Subsequent correction: If the State did not ensure timely correction of previous findings of noncompliance, provide information on the nature of any continuing noncompliance and the actions that have been taken, or will be taken, to ensure the subsequent correction of the outstanding noncompliance, to address areas in need of improvement, and any sanctions or enforcement actions used, as necessary and consistent with IDEA’s enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 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 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

18 - Prior FFY Required Actions

The State must establish baseline for this indicator in the FFY 2024 SPP/APR.

Response to actions required in FFY 2023 SPP/APR

The baseline was corrected for FFY 2023. The baseline for FFY 2023 is 96.97%.

18 - OSEP Response

The State has established the baseline for this indicator, using data from FFY 2023, and OSEP accepts that baseline.

18 - 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:

Dale W Matusevich

Title:

Director, Exceptional Children Resources

Email:

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Determination Enclosures

RDA Matrix

Delaware
2026 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
75.45%	Needs Assistance

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	20	12	60.00%
Compliance	22	20	90.91%

(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 2026: Part B."

2026 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	98%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	94%	0
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	24%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	87%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	18%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	90%	1

Math Assessment Elements

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4	97%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	93%	0
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	39%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	86%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	13%	0
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	87%	1

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

Exiting Data Elements

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	8	2
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma*	87	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.”

2026 Part B Compliance Matrix

Part B Compliance Indicator (3)	**Performance (%)**	**Full Correction of Findings of Noncompliance Identified in FFY 2023** (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.	Not Valid and Reliable	YES	0
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.	2.38%	YES	2
Indicator 11: Timely initial evaluation	99.13%	YES	2
Indicator 12: IEP developed and implemented by third birthday	98.83%	YES	2
Indicator 13: Secondary transition	99.79%	YES	2
Indicator 18: General Supervision	100	YES	2
Timely and Accurate State-Reported Data	95.77%		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/FFY2024-Part-B-SPP-APR-Reformatted-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, 13 and 18.

Data Rubric

Delaware

FFY 2024 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	0	0
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
18	1	1

APR Score Calculation

Subtotal	21
Timely Submission Points - If the FFY 2024 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (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: 7/30/25	1	1	1	3
Personnel Due Date: 2/18/26	1	1	1	3
Exiting Due Date: 2/18/26	1	1	1	3
Discipline Due Date: 2/18/26	1	1	1	3
State Assessment Due Date: 1/7/26	1	0	1	2
Dispute Resolution Due Date: 11/19/25	1	1	1	3
MOE/CEIS Due Date: 11/19/25	1	1	1	3

618 Score Calculation

Subtotal	20
Grand Total (Subtotal X 1.28571429) =	25.71

(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 1.28571429 points are 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	25.71
C. APR Grand Total (A) + 618 Grand Total (B) =	51.71
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
Denominator	54.00
D. Subtotal (C divided by Denominator) (3) =	0.9577
E. Indicator Score (Subtotal D x 100) =	95.77

(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 1.28571429.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2026 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 ED*Facts* files associated with the IDEA Section 618 data collection to ED by the initial due date for that collection (as described in the table below).

618 Data Collection	**ED*Facts* Files**	**Due Date**
Part B Child Count and Educational Environments	FS002 & FS089	7/30/2025
Part B Personnel	FS070, FS099, FS112	2/18/2026
Part B Exiting	FS009	2/18/2026
Part B Discipline	FS005, FS006, FS007, FS088, FS143, FS144	2/18/2026
Part B Assessment	FS175, FS178, FS185, FS188	1/7/2026
Part B Dispute Resolution	FS227, FS228, FS229, FS230	11/19/2025
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	FS231, FS232, FS233, FS234, FS235, FS236, FS237, FS238	11/19/2025

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 and metadata responses submitted to ED*Facts* align. 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

Delaware

School Year: 2024-25

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	18
(1.1) Complaints with reports issued.	14
(1.1) (a) Reports with findings of noncompliance	9
(1.1) (b) Reports within timelines	14
(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.	4

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	29
(2.1) Mediations held.	12
(2.1) (a) Mediations held related to due process complaints.	3
(2.1) (a) (i) Mediation agreements related to due process complaints.	3
(2.1) (b) Mediations held not related to due process complaints.	9
(2.1) (b) (i) Mediation agreements not related to due process complaints.	6
(2.2) Mediations pending.	5
(2.3) Mediations withdrawn or not held.	12

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	37
(3.1) Resolution meetings.	25
(3.1) (a) Written settlement agreements reached through resolution meetings.	6
(3.2) Hearings fully adjudicated.	3
(3.2) (a) Decisions within timeline (include expedited).	3
(3.2) (b) Decisions within extended timeline.	0
(3.3) Due process complaints pending.	6
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	28

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

(4) Total number of expedited due process complaints filed.	4
(4.1) Expedited resolution meetings.	3
(4.1) (a) Expedited written settlement agreements.	1
(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.	4

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

These data were extracted on the close date:
11/19/2025

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 2026 will be posted in June 2026. Copy and paste the link below into a browser to view.

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

Final Determination Letter

June 18, 2026

Honorable Cynthia Marten
Secretary of Education
Delaware Department of Education
401 Federal Street, Suite 2
Dover, DE 19901

Dear Secretary Marten:

I am writing to advise you of the U.S. Department of Education's (Department) 2026 determination under Section 616 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Delaware needs assistance in implementing the requirements of Part B of the IDEA. This determination is based on the totality of Delaware's data and information, including the Federal fiscal year (FFY) 2024 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Delaware's 2026 determination is based on the data reflected in its "2026 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 2026: Part B" (HTDMD).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making determinations in 2026, as it did for Part B determinations in 2015-2025. (The specifics of the determination procedures and criteria are set forth in the HTDMD document and reflected in the RDA Matrix for Delaware).

In making Part B determinations in 2026, OSEP continued to use results data related to:

(1) the participation of children with disabilities (CWD) on Statewide assessments (which include the regular assessment and the alternate assessment);

(2) the participation and performance of CWD on the most recently administered (school year 2023-2024) National Assessment of Educational Progress (NAEP), as applicable (For the 2026 determinations, OSEP is using results data on the participation and performance of children with disabilities on the NAEP for the 50 States, the District of Columbia, the Bureau of Indian Education (BIE), and Puerto Rico. OSEP used the available NAEP data for Puerto Rico in making Puerto Rico's 2026 determination as it did for Puerto Rico's 2025 determination. OSEP used the publicly available NAEP data for the BIE that was comparable to the NAEP data available for the 50 States, the District of Columbia and Puerto Rico; specifically OSEP did not use NAEP participation data in making the BIE's 2026 determination because the most recently administered NAEP participation data for the BIE that is publicly available is 2020, whereas the most recently administered NAEP participation data for the 50 States, the District of Columbia, and Puerto Rico that is publicly available is 2024);

(3) the percentage of CWD who graduated with a regular high school diploma; and

(4) the percentage of CWD who dropped out.

You may access the results of OSEP's review of Delaware's SPP/APR and other relevant data by accessing the ED*Facts* Metadata and Process System (E*MAPS)* SPP/APR reporting tool using your Delaware-specific log-on information at https://emaps.ed.gov/suite/. When you access Delaware's SPP/APR on the site, you will find, in applicable Indicators 1 through 18, the OSEP Response to the indicator and any actions that Delaware is required to take. The actions that Delaware is required to take are in the "Required Actions" section of the indicator.

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

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

(1) Delaware's RDA Matrix;

(2) the HTDMD link;

(3) “2026 Data Rubric Part B,” which shows how OSEP calculated Delaware's “Timely and Accurate State-Reported Data” score in the Compliance Matrix; and

(4) “Dispute Resolution 2024-2025,” which includes the IDEA Section 618 data that OSEP used to calculate the Delaware's “Timely State Complaint Decisions” and “Timely Due Process Hearing Decisions” scores in the Compliance Matrix.

As noted above, Delaware's 2026 determination is Needs Assistance. A State’s or Entity’s 2026 RDA Determination is Needs Assistance if the RDA Percentage is at least 60% but less than 80%. A State’s 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 2023, 2024, and 2025), and those Specific Conditions are in effect at the time of the 2026 determination.

Delaware's determination for 2025 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 Delaware of available sources of technical assistance, including OSEP-funded technical assistance centers and resources at the following website: Individuals with Disabilities Education Act (IDEA), and requiring Delaware to work with appropriate entities. The Secretary directs Delaware 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 Delaware to access technical assistance related to those results elements and compliance indicators for which it received a score of zero. Delaware must report with its FFY 2025 SPP/APR submission, due February 1, 2027, on:

(1) the technical assistance sources from which Delaware received assistance; and

(2) the actions Delaware took as a result of that technical assistance.

As required by IDEA Section 616(e)(7) and 34 C.F.R. § 300.606, Delaware 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.

The Department is committed to transparency, accountability, strong partnerships with States and stakeholders, high expectations, and improved outcomes for children with disabilities. To support these priorities, the Secretary is considering modifications to the factors the Department uses when making determinations, effective June 2027. Potential additional factors include graduation rates and assessment data, such as graduation rates for students with disabilities compared to all students, and Statewide assessment results of students with disabilities compared to all students. Other potential factors include longstanding noncompliance (such as OSEP-identified noncompliance that remains unresolved) as a factor in determinations.

For the FFY 2025 SPP/APR submission due on February 1, 2027, OSEP is providing the following information about the IDEA Section 618 data. The 2025-26 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2025 SPP/APR and the 2027 IDEA Part B Results Matrix and data submitted during correction opportunities will not be used for these purposes. The 2025-26 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform for Part B SPP/APR Indicators 1, 2, 3, 5, 6, 15, and 16 (as they have in the past). 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 EDPass prior to the applicable due date: 1) revise the uploaded data to address the business rule; or 2) provide a data note addressing why the uploaded data 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, Delaware 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 Delaware on the targets in the SPP/APR as soon as practicable, but no later than 120 days after Delaware's submission of its FFY 2024 SPP/APR. In addition, Delaware must:

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

(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, Delaware 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 Delaware'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 Delaware's efforts to improve results for children and youth with disabilities and looks forward to working with Delaware 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,

Erin McHugh
Deputy Director
Office of Special Education Programs

cc: Delaware Director of Special Education