Washington Office of Superintendent of
PUBLIC INSTRUCTION

Washington State Performance Plan (SPP)/Annual Performance Report (APR) Part B: For Reporting on FFY 2024

2026

WASHINGTON STATE PERFORMANCE PLAN (SPP)/ANNUAL PERFORMANCE REPORT (APR)

Reporting for FFY 2024-25

2026

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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

In Washington, the commitment to educational benefits and improved outcomes for students with disabilities (SWD) is not just a goal but a collaborative, ongoing journey. Through a co-design approach with invested partners, including students and families, the state continues to strategically focus on key priority areas to foster positive changes and address systemic challenges, including:

1. Educational benefit and student outcomes to ensure that all students benefit from high-quality instruction and have choice and opportunity to make progress in the general education curriculum. These efforts involve co-designing improvement efforts with students, families, community organizations, and statewide professional development providers to move beyond implementing promising practices to create sustainable systems that result in improved outcomes for SWD.
2. Shaping inclusionary outcomes by aligning practices across statewide initiatives, including social emotional learning, multi-tiered systems of support, and accessing and making progress in grade level standards. Supports include resources and training to improve instruction and post-secondary outcomes. This is driven by increased access to core instruction in general education settings from PreK to 12 and data driven decision-making that result in delivering high-quality special education services.
3. Leading with intention to model, across all levels of the educational system including the SEA, intentional connections among fiscal, data, program, and dispute resolution in support of improved special education outcomes. This includes partnering with other divisions and aligning special education division goals with broader agency goals for students, families, and educators.
4. Fostering excellence by identifying positive exemplars across fiscal, program, and dispute resolution. Supports include onsite visits and community conversations, cross-agency collaborative efforts, data collection, analysis, and reporting to move beyond admiring the problem and shine a light on promising practices.

Washington's commitment to systemic improvement is strengthened by invested partners who build on existing successes, provide constructive feedback, and collaboratively improve processes. Over the past six years, efforts have been centered on enhancing inclusionary practices, with a focus on moving beyond simply implementing inclusionary practices to inclusionary outcomes. This collaborative work has been a priority for divisions across the SEA that work together to design

systems that target key areas identified through data, resulting in a comprehensive network with a common goal to improve outcomes for SWD, leading to better outcomes for all Washington students. Over the past 6 years, and in response to federal and state expectations for greater coherence, the SEA has been deliberate in coordinating efforts to drive systemic change. Through cross-divisional analyses of root causes in our data, our work extends beyond SWD to address impacts on other student groups as well. The agency has established a comprehensive plan to improve outcomes for SWD, supported by a statewide technical assistance (TA) network and federal TA partners. This includes multiple workgroups led by Special Education that elevate priorities across divisions and to the SEA cabinet, ensuring SWD is consistently represented and prioritized in agency activities.

The outcomes are tangible and drive current and future efforts, with statewide data showing improvements and areas of growth highlighted through disaggregation. For instance, while placement data showed overall progress, disaggregated data revealed slower growth for Black students with disabilities and students spending less than 40% of their time in general education settings and students with Intellectual and Developmental Disabilities continuing to spend the majority of their days in separate educational settings. This realization refocused efforts, driven by the data, paving the way for broader systemic improvements. This evolution is apparent through the progress made and strategic decisions accounted for through the inclusionary practices work, currently operating as a statewide Inclusionary Practices TA Network (IPTN). Taking a responsive and data-driven approach has enabled the state to focus on students who continue to experience a lack of choice and opportunity in schools across Washington, and at the same time work towards improving outcomes for all students with disabilities.

On an annual basis, Washington not only recognizes areas where there might have been slippage or where targets were not met but actively commits additional state and federal resources proactively when getting feedback from partners. This feedback is collected ongoing and in a variety of ways, with the goal of making it accessible to a wide range of partners across the state and making sure that priorities and activities are representative of all Washingtonians and represent different contexts, whether it be the priorities of rural or urban schools or districts and schools that have data that tell different stories. This feedback can take the form of contributions to develop updated guidance on regulations, expectations, best practices, and systems development done in partnership with internal teams and outside organizations, and with TA partners.

Improvement activities are designed to not be reactive but proactive, addressing areas where partners are identifying the greatest needs for support and are elevating priorities that impact the educational outcomes for students receiving special education services. The iterative nature of this process reflects a commitment to continuous improvement and a dynamic responsiveness to the evolving needs of the educational landscape.

In essence, Washington State continues to strive for transformative change through instructional leadership. Collaborative efforts underscore the state's dedication to fostering inclusive educational environments where every student, including those with disabilities, can thrive. The allocation of additional resources, supported by a sustained commitment of ongoing state funds, demonstrates a long-term vision of strong outcomes and high-quality instruction for SWD that in turn results in educational benefit for all students.

Given Washington’s commitment to ongoing improvement and the state’s unwavering pursuit of

engaging in proactive, ongoing growth and increased outcomes for students, the state continues to work with multiple national TA centers, including the:

- National Center for Systemic Improvement (NCSI).
- Data Center for Addressing Significant Disproportionality (DCASD)
- National Center for Intensive Intervention (NCII).
- National Center for Pyramid Model Innovations (NCPMI).
- National Center on Deaf-Blindness (NCDB).
- National Technical Assistance Center on Transition (NTACT).
- Early Childhood Technical Assistance Center (ECTA).
- Center for IDEA Early Childhood Data Systems (DaSy).
- Center for the Integration of IDEA Data (CIID).
- IDEA Data Center (IDC) to support data integration, analysis, and accuracy efforts across the agency.
- CEEDAR Center: Collaboration for Effective Educator Development, Accountability, and Reform Center.
- Center for Appropriate Dispute Resolution in Special Education (CADRE); and
- Center for IDEA Fiscal Reporting (CIFR) to ensure IDEA funds are used efficiently, appropriately, and in collaboration with other improvement efforts, when appropriate.
- TAESE (Technical Assistance for Excellence in Special Education) for parent surveys.

Collaboration with the Office of Special Education Programs (OSEP) remains strong, dynamic, and responsive. The TA provided by OSEP continues to be instrumental in enhancing the capacity of SEA special education leadership. This partnership not only supports capacity building but also fosters meaningful changes in both practice and policy.

The TA efforts are strategically targeted at priority areas and aspects of the State Performance Plan (SPP) and Annual Performance Report (APR) where there has been slippage, failure to meet targets, or identified areas needing improvement. We also have been able to use data that shows positive outcomes to plan for progress in other areas. The focus areas include, but are not limited to secondary IEP components, postschool outcomes, state assessments, early childhood outcomes, and overall high-quality instruction that can impact these outcomes. We additionally work hard to align with agency priorities, for example current priorities to improve math and reading show up across our continuous improvement plans for students with disabilities. We are hopeful that we will experience more rapid growth and improve our outcomes with increased alignment. Just last year, we updated the State Systemic Improvement Plan (SSIP) Theory of Action and its evaluation plan, including closer alignment of statewide improvement activities with the Part C counterpart. To address families' reported concerns with mediation, we have continued our efforts to team with family-focused community-based organizations to explore family navigator supports embedded within LEAs and ESDs. We are also working closely with content experts on statewide learning standards revisions, ensuring that professional development and resources are inclusive of high-quality instruction, and access and progress in grade level standards for students receiving special education services.

The impact of TA over the past year is clear in the division's deeper analysis of outcome data for students with disabilities and its sharpened focus on instructional leadership. This work has been strengthened by rigorous review of current research and policy, enabling more informed decisions and more coherent development of universal guidance and targeted interventions. Cross-divisional coordination—within the SEA and with external partners—continues to surface promising practices

and illuminate persistent barriers, generating a more accurate understanding of Washington's educational landscape and directly shaping the Special Education Division's strategic priorities. These priorities are further reflected in our partnerships and grant investments with districts and TA organizations, which are increasingly data-driven and intentionally aligned to build the systems needed to support students and educators statewide.

By addressing the root causes associated with observed outcomes, Washington state demonstrates a sustained commitment to driving meaningful and sustainable change. Through continuous collaboration with the Office of Special Education Programs (OSEP) and national technical assistance providers, the state maintains a dynamic cycle of analysis, refinement, and implementation. This ensures that improvement efforts remain targeted, relevant, and responsive to the evolving needs of the education system.

The partnership with OSEP has served as a catalyst for informed decision-making, evidence-based instructional leadership, and a shared commitment to improving educational outcomes for students with disabilities. TA efforts have been laser focused on building capacity and fostering a culture of continuous improvement, emphasizing a comprehensive approach that addresses systemic challenges and leverages promising solutions.

During the 2024–25 school year, OSPI's Special Education Division partnered closely with families to co-design a new parent survey aimed at improving the quality and usefulness of special education data in Washington State. Rather than relying solely on existing tools, OSPI engaged families as collaborators in shaping survey content, language, and approach, grounding the work in lived experience of the special education process.

Through this partnership, OSPI learned more about what family's value, how they experience engagement across districts, and where current data collection methods fall short. The co-design process helped surface barriers to participation and informed strategies to reach and engage a broader and more diverse range of families, including those whose voices are often underrepresented in statewide data. These insights strengthened the survey's relevance and accessibility while deepening understanding of family engagement in special education across Washington.

The redesigned parent survey launched as a pilot in the 2024–25 school year to test implementation, participation, and data quality. Findings from the pilot guided refinements for the full statewide implementation planned for the 2025–26 school year, ensuring the survey supports meaningful family input and more actionable data to improve special education systems statewide.

Number of Districts in your State/Territory during reporting year: 283

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.

Washington's Integrated System of Monitoring (WISM) monitors LEAs through a data-based system that includes Universal Monitoring (Desk Review), Targeted Review, and Intensive Risk-Based Review (Systems Analysis).

UNIVERSAL MONITORING: All LEAs in the state are monitored annually through a desk review that examines fiscal, data, program, and dispute resolution factors, including but not limited to:

Fiscal:
- Section 611/619 budgets, spending plans, expenditure reports, and impact reports (describing, with data, how the LEA's use of funds contributed to improved outcomes both at the student and system levels), MOE documentation (including expenditure reports)
- Excess Cost verifications
- General Education Provisions Act compliance.
- Audit reports from the State Auditor's Office and LEA resolution of audit findings.
- Fiscal Risk Factors – review of LEA performance across 17 fiscal risk factors, which helps to inform OSPI of LEAs that may require deeper review.

Data:
- Collection, review, and analysis of special education data reports from all LEAs, including data quality reviews
- Analysis of LEA performance across 17 fiscal risk factors, including turnover in administrative and fiscal staff, special education enrollment, size of the IDEA award, proportionate share, audit results, and more.
- Analysis of LEA performance across 13 program risk factors, including performance on the results indicators (LRE, graduation, dropout), determination levels, disproportionality flags, restraint & isolation rates, and more.

Dispute Resolution:
- Analysis of dispute resolution trends within and across LEAs and regional ESDs.

Program:
- Student-level IEP content
- Program Risk Factors – analysis of LEA performance across 13 program risk factors, which helps to inform OSPI of LEAs that may require deeper review.
- Annual Determinations are calculated and issued for all LEAs in the state annually and reviewed to help inform OSPI of LEAs that require deeper review and/or technical assistance.
- Parent engagement results are reviewed to help inform OSPI of LEAs that may benefit from additional resources and/or technical assistance.

OSPI's Universal Monitoring activities also include a process for responding to reported concerns, including deeper review when determined to be needed. Information regarding a reported concern may be received via calls and emails to OSPI from educators, parents, community members,

education partners, media reports, or other sources.

The number of LEAs receiving Universal Monitoring per year is 283. Most Universal monitoring activities take place June through September.

TARGETED MONITORING REVIEWS: LEAs are selected for Targeted Monitoring based on specific criteria such as Safety Net application, private schools and proportionate share, Comprehensive/Coordinated Early Intervening Services (CEIS and CCEIS), dispute resolution, correction of non-compliance, disproportionality, etc. All LEAs that meet the criteria (for example, all LEAs that apply for Safety Net) participate in a Targeted Review. Approximately 200 LEAs in total receive Targeted Reviews each year, which typically take place throughout the year depending on the area being reviewed (i.e., CEIS/CCEIS reviews occur quarterly, dispute resolution is ongoing, Safety Net reviews are in the spring, etc.).

Targeted monitoring reviews include, but are not limited to:

- Safety Net – 162 LEAs received a Targeted Safety Net review in the 2024-25 school year. The review included student IEPs (N=7,440 for 2024-25), billing percentage calculators, transportation cost calculators, purchase orders, contracts, invoices, teacher caseload reports, year-to-date detailed expenditure reports, and personnel reports.
- Private schools/proportionate share – 114 LEAs received a Targeted proportionate share review in the 2024-25 school year. The review included private school count data, LEA's consultation process, written affirmations, proportionate share carry-over, number of students receiving equitable services, what equitable services are being provided, and proportionate share expenditure detail reports.
- CEIS/CCEIS – 8 LEAs received a Targeted CEIS/CCEIS review in the 2024-25 school year. The review included quarterly check-in meetings with LEA program and fiscal staff, CEIS/CCEIS plans and budgets, student data reporting, detailed expenditure reports, and root cause analyses.
- Dispute resolution – 64 LEAs received a Targeted dispute resolution review in the 2024-25 school year. The review included school staff interviews, independent onsite visits (if necessary), student records, school records, data reports, and other relevant information.
- Correction of non-compliance – 92 LEAs received a Targeted correction of non-compliance review (verification/validation) in the 2024-25 school year. The review included corrected IEPs and other student records, updated data reports, information from the LEA's student record system, staff interviews, site visits, and review of other documentation (training materials, agendas, memos, procedural handbooks, etc.).
- Disproportionality – 90 LEAs received a Targeted Disproportionality review in the 2024-25 school year. The review included the results of the LEA's self-review of policies, procedures, and practices; analysis of data; identification of causal factors; and the LEA's plan for addressing the identified root cause(s).
- LEA policies and procedures – 34 LEAs received a Targeted special education policy/procedure review in the 2024-25 school year. The review included comparison of LEA procedures to ensure alignment with state and federal regulations, including any required revisions per changes to state/federal regulations.
- Annual Determinations (enforcement actions) – 25 LEAs received a Targeted Determination Level enforcement action review in the 2024-25 school year. The review included the LEA's implementation of technical assistance resources to address the areas in which the LEA did not meet requirements for multiple consecutive years, how the resource was implemented, and the current status of the implementation, including changes that have taken place due to

implementing the resource.

INTENSIVE RISK-BASED (SYSTEMS ANALYSIS) REVIEWS: LEAs are selected for Intensive Systems Analysis reviews based on 17 fiscal and 13 program risk factors (described above). Additional factors are also considered, including reported concerns about the LEA, number of years since the LEA last participated in an intensive review, the LEA's size grouping, the LEA's trend data across the SPP Indicators, and more. Systems Analysis reviews may be conducted through an onsite visit, virtual visit, or self-assessment. In the 2024-25 school year, 36 LEAs participated in a Systems Analysis review. LEAs are selected for Systems Analysis reviews during the summer and notified in late August/early September. The core reviews typically take place November/December through April.

Systems Analysis reviews consist of three phases:

1. Pre-Review – Review of LEA data, documentation submitted by the LEA for the review, cross-divisional internal prep meetings, review of student files, and development of core review schedule.
2. Core Review – Onsite visit (if applicable), provider and administrator interviews, private school administrator and non-traditional program director interviews, request for additional documentation, etc. If onsite, the core review will also include management work sessions, classroom observations, focus groups, parent and student interviews/focus groups, and school-level interviews.
3. Post-Review – Review of additional requested documentation, development and issuing final report/summary of review (including commendations, recommendations, and required actions.

There are multiple types of Systems Analysis Reviews, including program only, fiscal only, combination program/fiscal, focused/limited, follow-up, exemplar, and self-assessment.

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

Student records, including IEPs and other related documentation, are reviewed as part of all three types of monitoring activities (Universal, Targeted, and Intensive). The number of student records reviewed depends on the specific area being reviewed. Below are some examples:

Universal Monitoring Reviews: We collect and review student IEP information through our new (beginning in 2024-25) statewide Indicator B13 reporting application as part of our Universal monitoring of all LEAs. The number of IEPs selected is based on the LEA's size (1-500 total students = 5 IEPs; 501-2,000 total students = 10 IEPs; 2,001-10,000 total students = 15 IEPs; over 10,000 total students = 20 IEPs). IEPs are selected by LEAs using detailed instructions (File Selection Calculator) provided by OSPI for selecting a set of IEPs that are representative of the LEA with regard to race/ethnicity, LRE, and disability category. For 2024-25, a total of 2,765 IEPs were reviewed across 238 LEAs. In addition to requiring LEAs to identify whether each IEP component met compliance requirements, the reporting platform also required LEA staff to enter actual information from the student's IEP, such as postsecondary goals and courses of study, to assist OSPI program supervisors (who reviewed every LEA report) in ensuring the accuracy of the reported compliance calls made by the LEA.

Targeted Reviews: As part of Targeted Reviews, IEPs for students with high-cost needs submitted to Safety Net are reviewed for documentation of costs and services provided. In the 2024 Safety Net period, a total of 7,440 IEPs were reviewed. The IEPs were selected by the LEA based on the high costs of the students' needs and services.

Intensive Risk-Based (Systems Analysis) Reviews: As part of Systems Analysis reviews (with the exception of self-assessments), the WISM team reviews a stratified sampling of student files, including current and prior IEPs and evaluations, referral documentation, related notices and parent consent, progress reports, High School and Beyond Plans, private school service plans, student schedules, and more. The number of files selected is based on the LEA's size (1-500 total students = 5 files; 501-2,000 total students = 10 files; 2,001-10,000 total students = 15 files; over 10,000 total students = 20 files). The files are selected based on areas in which the LEA was flagged per the program risk assessment (i.e., those factors that contributed to them being selected for intensive review), such as LRE, secondary transition, C to B transition, discipline, disproportionality, etc.

Verification of LEA's correction of identified non-compliance: The verification of the correction of non-compliance includes the review of 100% of the student-level issues of non-compliance identified through any of the three tiers of monitoring, including fiscal, data, dispute resolution, and program improvement. In addition, a sampling of files and/or data are reviewed to ensure that the LEA is currently correctly implementing the identified regulatory requirements. Special education administrators from the LEA's local Educational Service District (ESD), under the direction of OSPI, complete the verification activities, which include onsite visits; review of corrected IEPs, evaluations, and other student-level documentation; meeting agendas; guidance documents; training rosters; interviews with service providers, etc. The documents reviewed as part of the verification depend on what actions the LEA took to correct. For example, if the LEA conducted staff training, the ESD verifier will review the participant roster, along with the PowerPoint, agenda, and/or other training materials, to confirm that the training took place as described in the LEA's correction summary (including date). OSPI provides annual training and guidance documents to the ESD administrators to assist them in determining the scope of data/number of files to sample to determine if the LEA is correctly implementing the applicable regulatory requirements. ESD administrators review, at a minimum, one student record and/or data report for each individual area of non-compliance identified. The student records and data reports are those that were completed in the current school year and were NOT part of the original finding.

The LEA and ESD provide a detailed summary and assurances of the steps taken to correct the identified non-compliance and the activities completed to verify the correction of the non-compliance, including verifying the LEA's compliance with IDEA requirements. OSPI special education program supervisors are assigned to complete the final review and approval (validation) process using an approval rubric. The LEA and ESD summaries are reviewed by OSPI to ensure:

1. All identified areas of non-compliance within each individual student record have been corrected.
2. The dates of correction and verification are included, are in alignment with each other, and are for the current school year.
3. The LEA has described the identified root cause(s) for any system-level non-compliance, and the actions taken to correct the system directly correlate to the identified root cause(s).
4. The sampling of documentation/data reports verifies the LEA's compliance with IDEA requirements.

5. The ESD has verified all actions taken by the LEA; and
6. The LEA and ESD administrator have provided assurances that the information contained in the summaries is valid and accurate.

If any information is missing or concerns are noted, the OSPI program supervisor will contact the ESD director to let them know what is needed. The ESD director will work with the LEA to address the OSPI reviewer's concerns. OSPI reviewers receive annual training on how to review and approve the correction and verification of non-compliance.

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

LEAs may use any student information system (SIS) that they choose to collect data at the unit (student, teacher, course) level.

Washington's overarching data system is the Education Data System (EDS) – a centralized suite of web-based applications regarding Education Data. EDS has a number of applications under it, which are used for collecting, validating, and reporting IDEA Data.

CEDARS is the Comprehensive Education Data and Research System, a longitudinal data warehouse of educational data. Districts report data on courses, students, and teachers. Student data includes demographics, enrollment information, schedules, grades, and program participation. LEAs routinely submit data to CEDARS from their SIS. LEAs have a CEDARS Administrator who uploads the CEDARS submission and a District Data Security Manager (DDSM). The DDSM assigns privileges to individuals who would enter data into the SIS, and who have CEDARS permissions.

At a minimum data are submitted monthly, although some districts submit more often (daily or weekly), depending on LEA needs. Data may be submitted through the standard (CEDARS) process or through a CEDARS Non-standard process, depending on the SIS that the LEA uses. Validations are applied during the submission process to ensure valid and accurate data. Validations are outlined in the CEDARS manual. Data verification continues to occur as the data flow into the EDS applications. Within each individual EDS application additional validation and accuracy checks occur each time data are refreshed.

CEDARS creates error reports using the validations for data submitted. The CEDARS Administrators at each LEA then download the submission error reports from CEDARS, to review and correct the data within their SIS. Once data is corrected by the LEA and uploaded into CEDARS successfully, there are reports that summarize data for LEAs and allow LEAs to review aggregate counts and individual records.

After a successful submission to CEDARS, data also populates custom downstream applications under Special Education Reporting in EDS. There are 4 applications:
- Child Count (Indicators 5, 6, 9, 10 and significant disproportionality)
- Early Childhood outcomes (Indicator 7)
- Secondary IEPs (Indicator 13)
- Timeline and C to B Transition (Indicators 11 and 12)

Non-Special Education applications in EDS that collect data used by special education include:
- Behavior and Weapons (Discipline, Indicator 4A and B, and significant disproportionality)

- Graduation Cohort Rates (used to create FS 009 and Indicators 1 and 2 and the list of students for Indicator 14)
- Assessment (TIDE)
- WaKids Assessment (Indicator 17)

LEAs (often the special education director or their staff) must review, verify, and validate each student level record within these applications, by clicking each individual record prior to certification/submission. This process locks the record in for historical purposes, until the LEA resubmits the file.

The Special Education Data Team is notified by email when each LEA submits their verified data, in a shared email account. The application's admin tab keeps track of what LEA has submitted. The Special Education Data Team reviews data for duplicate students. The Special Education Data Team reviews data for duplicate students as the data are submitted in the application and verified by LEAs.

Final data from CEDARS and other EDS applications are moved via ETL to Generate for Federal Reporting after data quality work is complete.

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

Regarding the correction of the identified non-compliance across any area (fiscal, program, data, etc.), findings are issued by the number of instances. LEAs are required to correct all individual instances of non-compliance, and the notification, correction, and verification of non-compliance are tracked at both the individual instance (i.e., student) and LEA level. For the purposes of summarizing the correction of non-compliance findings in the SPP/APR, Washington reports the findings by LEA.

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).

Washington does not have procedures that permit pre-finding correction.

General Supervision Overview (moved to this section from the "Describe the process the State uses to select LEAs for monitoring, the schedule, and number of LEAs monitored per year" section due to character limitations in the reporting platform):

Washington continues to remain curious about the data and is unwavering in our dedication to creating inclusive and effective learning environments for students with disabilities. The state takes a thoughtful and responsive approach, working to align systems across education, improve developmental, functional, and academic outcomes, and consistently meet the standards of IDEA Part B.

At the heart of Washington's educational strategy is the General Supervisory System, a comprehensive framework orchestrated by three dynamic agency/division work groups, each with policies, procedures, and practices to ensure effective implementation. We continually enhance cross-divisional policies and procedures within our integrated systems for effective implementation. For instance, over the course of the last couple of years, responding to community complaints and credible sources, we adjusted our special education monitoring to gather

comprehensive data on shortened school days and restraint/isolation incidents statewide. The State's general supervision team has developed a systematic process for documenting and analyzing inquiries and concerns received through calls and emails, allowing for more proactive and data-informed oversight. During the 2024–25 period, OSPI continued to strengthen regular cross-collaboration between the Program Improvement and Dispute Resolution teams. This collaboration supports ongoing refinement of general supervision activities, including enhancements to the Systems Analysis review and alignment of LEA self-assessments with cross-divisional priorities, to promote more effective and coordinated general supervision.

Program Improvement Team:

This team is instrumental in designing and implementing the Washington Integrated System of Monitoring (WISM). WISM, focused on data-driven monitoring and innovation, is designed with the intention to support positive change and improving student outcomes. Embracing collaboration, the Program Improvement Team extends its influence across the educational system, co-designing oversight and improvement activities both internally and externally with regional partners. The team works closely with LEA and regional ESD partners to ensure all issues of identified non-compliance are corrected, including the examination of subsequent data to ensure the LEA is correctly implementing the regulatory requirements (more specific information is included under the compliance indicators of this report). The team has made a strategic expansion to accommodate a Special Projects lead focusing on students with disabilities in nontraditional settings, that also includes a program supervisor that is co-located with Special Education and Learning Options. This lead also serves as a liaison across diverse SEA program offices, fostering connections with Native Education, Multilingual Education, Highly Capable, and Learning Options.

Operations Team (Data and Fiscal Management):

Taking a lead role in the activities of data and fiscal management, this team is the keystone in the seamless functioning of several educational priorities that are funded through our department and supports schools and districts in their data and fiscal responsibilities. The responsibilities of this team include data collection, Safety Net activities, and comprehensive fiscal oversight. As part of the state's focus on leading with intention, the Operations Team collaborates with CIFR to improve fiscal policies and protocols, going beyond just managing finances. This team engages in collaborative efforts across teams in the division and across the agency to provide joint fiscal presentations, guidance, and technical assistance.

Dispute Resolution Team:

Operating at the intersection of conflict resolution and policy oversight, the dispute resolution team works to provide an equitable landscape for dispute resolution activities. In response to partner (stakeholder) input, the team has undergone strategic restructuring, augmenting its capacity with additional complaint investigator contractors, expanded leadership roles, and enhanced oversight of non-public agencies. Equity remains paramount, with regular engagements with the state's Office of Administrative Hearings, the Special Education Advisory Council (SEAC), and mediation and IEP facilitation vendors. Technical assistance has been expanded, with continued and ongoing collaboration across the division to ensure that it is meaningful, relevant and will result in systemic change.

Across the entire General Supervisory System is a sustained commitment to universal and targeted professional development, technical assistance, and early childhood oversight and improvement. Involvement from partners is not a checkbox but a cornerstone, with diverse families and community members actively participating in the collaborative process to ensure the needs of each student with an IEP are not just acknowledged but make urgent the need to improve systems, services, and instruction to improve educational outcomes for students.

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.

Washington implements a system of sanctions to ensure correction of noncompliance and address areas in need of improvement. The particular sanction selected would depend upon a number of factors, such as the length of time the issue has occurred, the scope of the issue, the severity of the issue's impact on the provision of FAPE to students. Below are descriptions of actions OSPI has taken, listed in graduated order of severity:

1. Notifications – Notifications of non-compliance or other required actions are sent via email or through the Education Grants Management System (EGMS) to the LEA's special education and/or fiscal administrator and are often copied to the LEA's regional ESD director. The Notifications include a description of the action needed, instructions for completing the action, technical assistance resources to help in completing the activity, and who to contact at OSPI if they need additional assistance.

2. Email notices/reminders – Sent to the LEA's special education and/or fiscal administrator and copied to the LEA's regional ESD director. These are most used when an LEA is late submitting a report, documentation related to a corrective action, or other required activity. If no adequate response is given to the initial notification emails, additional email(s) will include the LEA's superintendent.

3. Requesting a phone call or meeting – If there is no response to the email notice/reminder and/or the LEA is experiencing additional difficulties in completing the required activity, OSPI will schedule a phone call or virtual meetings with LEA staff to discuss what is needed and the priority for completion. Technical assistance is also provided during the call/meeting and could take the form of doing some or all of the required activity together during the call/meeting.

4. Determination level – The timely correction of non-compliance and other related compliance areas are part of the annual determination level designations for all LEAs. If the LEA has outstanding reports, incomplete required actions, or uncorrected issues of non-compliance, it will affect the LEA's determination level. LEAs with uncorrected issues of non-compliance are automatically assigned a level 3 (needs intervention) or level 4 (needs substantial intervention). LEAs that are late on even one required federal data report are unable to receive a level 1 (meets requirements) determination. If the determination level is level 2 (needs assistance) for two consecutive years, level 3 (needs intervention) for three consecutive years, or below level 1 (meets requirements) for three consecutive years, additional enforcement actions are taken (see "Technical assistance review", "Delay or withholding of funds", and "Action plan" sections below).

5. Technical assistance review (TAR) – LEAs whose determination level is level 2 (needs assistance) for two consecutive years, level 3 (needs intervention) for three consecutive years, or below level 1 (meets requirements) for three consecutive years, are required to complete a Technical Assistance Review (TAR) worksheet. The TAR identifies the source(s) of technical assistance the LEA has chosen to implement to address the identified area(s) in which they did not meet requirements, describe the implementation of the activity/resource (including dates of implementation), and describe the status of the activity (including outcomes).

6. Delay or withholding of Funds – During the review and approval process for the annual IDEA grant applications, each LEA is reviewed to ensure that all required reports/actions have been submitted prior to approving the grant. If the LEA has any outstanding reports or actions, the application will not be approved until the required documentation has been submitted. LEAs are notified of outstanding reports/actions through email notices/reminders and/or requesting a phone call/meeting (both are described above). If the LEA's application is already approved but are later determined to not respond to required actions despite all of the activities described above, a hold may be placed on the LEA's federal funds until the actions are complete. In addition, LEAs who receive a Level 4 determination (Needs Substantial Intervention) will have some or all of their federal funds withheld until steps are taken to address the identified area(s).

7. Action Plan – If the identified issues are pervasive and/or occurring over an extended length of time, OSPI may require the LEA to complete an action plan that includes a root cause analysis (if not already identified), action steps to address the root cause(s), individual(s) responsible for completing each step, dates for completing each step, and evidence of completion. OSPI typically provides the template for the plan, and provides technical assistance and support, typically via virtual meetings, to assist LEAs in completing the plan. Regular check-ins are held with the LEA, either virtually or onsite, to discuss the status of the plan and review documentation to ensure each step is completed.

8. High-risk Grantee Status – If ongoing, pervasive issues continue to occur, the LEA may be identified as a high-risk grantee. This status typically requires the district to spend a certain amount of funds on a specific activity, such as an independent review of their systems/programs or hiring an expert consultant (with OSPI approval). Funds are typically either specifically directed or withheld until certain actions are taken, as identified in a comprehensive corrective action plan.

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.

LEA compliance with IDEA requirements is measured through annual LEA Determinations. All LEAs in Washington receive an annual determination level of (1) Meets Requirements, (2) Needs Assistance, (3) Needs Intervention, or (4) Needs Substantial Intervention. LEAs are notified of their annual determination level via email sent to the superintendent, special education director, and regional ESD director for each LEA in the state. The preliminary determinations are issued annually on November 1st.

The criteria for calculating LEA determination levels includes:
- Unresolved special education audit findings.

- Timely correction of non-compliance (including information from ongoing monitoring activities and other public information related to LEA compliance with IDEA 2004).
- Timely and accurate data submissions.
- Compliance on indicators B4 (significant discrepancy in discipline that is the result of non-compliance), B9/B10 (disproportionality that is the result of inappropriate identification), B11 (timely initial evaluations), B12 (timely Part C to Part B transition), and B13 (secondary transition IEP components).
- Performance on indicator B14C (post-secondary engagement rates), including post-school survey response rates.
- Designation of Significant Disproportionality.

As previously stated, preliminary determinations are issued annually on November 1st. For any LEAs that will be issued a preliminary determination of level 4 (needs substantial intervention), the Program Improvement Coordinator schedules a meeting with the LEA's special education administrator in October to let them know they will be receiving a level 4 determination and discuss how it was calculated, the ramifications, and the process for requesting a reconsideration.

LEAs have until the last business day of November to request a reconsideration of their determination level if they believe their level is incorrect as a result of OSPI error. The request for reconsideration must include a description of the reason for the request along with evidence/documentation to support the reconsideration. The requests are reviewed and summarized by the Program Improvement Coordinator in early December and shared with the Assistant Superintendent of Special Education and Executive Director of Special Education for discussion and decision regarding the LEA's final determination level.

Determination levels are considered final after the requests have been processed, and the list of final determinations for each LEA are posted by mid-December to OSPI's Determinations webpage.

The most recent (2024-25) determinations, issued October 31, 2025 are posted to OSPI's website.

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

Revised Code of Washington (State Special Education Policy) – Title 28A.155.

Washington Administrative Code (State Special Education Procedures) – Chapter 392-172A

OSPI Policy Guidance and Resources

Washington Integrated System of Monitoring (WISM) webpage

OSPI's Dispute Resolution webpage

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.

Washington's multifaceted approach, combining data analysis, collaborative partnerships, and a commitment to innovation, reflects a dedicated pursuit of improved educational outcomes for

students with disabilities. The state continues to strive to be a dynamic hub of ingenuity and comprehensive strategies for educational improvement for students with disabilities that include ensuring that families, community partners, and individuals with lived experiences are directly informing statewide efforts. Continuous and regularly scheduled collaborations with school district staff, the SEAC, as well as other education partners that forms the bedrock of the state's commitment to improvement across the education system, one that is inclusive of special education programs and services.

Facilitation for school district access to technical assistance and professional development resources designed to improve educational results and functional outcomes for students with disabilities is a top priority and the division has developed universal and more targeted guidance that is designed to meet Washington's unique strengths and needs and is driven by what we learn about what districts need to effectively access and implement technical assistance recommendations and resources that address needs informed by data. These decisions are also driven by what families and communities share as top priorities to ensure they can experience meaningful inclusion and a sense of belonging in Washington schools.

Under the umbrella of the WISM, technical assistance and support are woven into various activities, offering a multifaceted approach:

- LEA self-assessments undergo thorough review and feedback.
- On-site monitoring reviews and remote virtual and desk reviews involve a variety of components like focus groups, individual interviews, and management work sessions.
- Monitoring reports that provide not just observations but actionable recommendations and resources.
- Districts implementing Comprehensive Coordinated Early Intervening Services (CCEIS) benefit from quarterly meetings.
- Focused monitoring in Washington highlights both strengths and challenges in special education, learning from exemplar districts to promote inclusion and addressing statewide efforts to reduce restraint and eliminate isolation.
- OSPI's Special Education Monthly Update disseminates guidance briefs and tips and both the OSPI webpage and the Inclusionary Practices Technical Assistance Webpage host resource centers that include technical assistance resources that are organized for eased usability from a variety of partners.

The state's commitment to knowledge dissemination extends to a vast audience, with monthly updates reaching over 6,000 subscribers, video summaries have also been incorporated to enhance accessibility and understanding among diverse partner groups. Special education liaisons assigned to the nine Educational Service Districts (ESDs) provide another communication channel, engaging in monthly meetings with district special education directors to discuss key updates and relevant information.

Direct access to SEA leadership is provided through semimonthly office hours, offering school and district leaders guidance on special education programming, fiscal matters, and data-related questions. These sessions, often supported by cross-content experts, address a range of critical topics, including graduation pathways, transition services for students with disabilities, and integrating specially designed instruction (SDI) into grade-level, standards-based instruction. These discussions and technical assistance go beyond compliance, reinforcing the state's commitment to improving student outcomes. Over the past year, these office hours have frequently drawn over

100 attendees for every session, consistently engaging Special Education leaders statewide. Additionally, other teams within the Special Education division, including fiscal/data, program improvement, and early childhood special education, host their own office hours to ensure partners have continuous access to resources and guidance across all aspects of special education.

Technical assistance resources are delivered through Coordinated Service Agreements (CSAs) with the nine regional ESDs and the statewide Inclusionary Practices Technical Assistance Network (IPTN), in coordination with the Office of System and School Improvement (OSSI). These efforts are strategically aligned to strengthen coherence across general and special education systems. ESDs leverage their regional expertise to align support with State Performance Plan indicators and emerging local priorities in partnership with the State Education Agency (SEA). Cross-divisional collaboration with OSSI has strengthened School Improvement Plans (SIPs) by integrating inclusive practices and schoolwide improvement strategies that improve outcomes for students with disabilities.

This coordinated approach reduces fragmentation, reinforces the connection between general education improvement and special education outcomes.

The Inclusionary Practices Technical Assistance Network (IPTN) builds on the foundation of the former Inclusionary Practices Project (IPP) while expanding its scope and partnerships. The IPTN now includes professional development organizations, with a key aim of building systems that work for all Washington state learners, especially those learners that show experience the least amount of choice and opportunity in Washington schools. This expanded network operates collaboratively, significantly enhancing statewide capacity-building efforts. The IPTN continues its focus on identifying and utilizing data that reflect family and student experiences and outcomes, aligning priorities and efforts to demonstrate how meaningful inclusion is being realized beyond Least Restrictive Environment (LRE) reporting. By leveraging the strengths of the IPP, the IPTN aims to amplify and prioritize educational benefits, eliminate barriers that exclude students, and shift the focus from merely implementing inclusionary practices to achieving measurable inclusionary outcomes.

The IPTN collaboration is a statewide comprehensive effort that is building capacity for sustainable, high-fidelity implementation of effective education practices to maximize academic and social outcomes for all P-12 students, with a focus on who data shows has the least access to general education within Washington public schools. IPTN is making significant efforts to address disproportionality and explicitly address the systems and practices that continue to exclude groups of students from choice and opportunity. The IPTN engages in this work using the science of implementation and improvement strategies for organizational change to maximize and support effective practices that produce positive outcomes for students.

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 State's commitment to improving access and outcomes for SWD is evident through its PD Systems, employing multi-tiered support systems (MTSS) tailored to data-driven needs. These systems, facilitated by regional ESDs, LEAs, and a statewide TA network, ensure continuous

improvement, promote collaboration, and prioritize a cohesive approach across the education system. Strategic alignment addresses both state and local needs, prioritizing family involvement in educational design and content. Key features include:

Data-Driven Approach: Design and implementation of PD structures informed by thorough data analyses that help identify areas of improvement and tailor activities to address specific needs.

Partner (Stakeholder) Input: The inclusion of education partners' input is a critical aspect of the design process to ensure that the PD activities align with the expectations and requirements of those directly involved in the educational process.

Alignment with Priorities: The structures are aligned with state and local priorities to ensure that PD efforts align with broader educational goals and initiatives.

Support for Professional Learning: Activities within the PD Systems are designed to support ongoing professional learning. The focus is not only on improving individual skills around instructional leadership but also on engaging leaders in the development of effective system processes and support structures.

Culture of Collaboration: The collaborative culture is intended to positively impact educator knowledge and skills, fostering an environment conducive to improved student learning. The culture of collaboration is not just within PD activities but also making sense of how these activities connect and elevate the work.

Leader Engagement: Instructional leadership plays a crucial role in the success of these systems. PD activities are structured to engage leaders in developing effective inclusive processes and support structures. The goal is for everyone to see that they have a role in improving student outcomes.

Positive Impact on Student Learning: The goal is to positively impact student learning. By enhancing the knowledge and skills of service providers, the PD Systems aim to improve the overall educational experience and outcomes for SWD.

Our partnership with the CEEDAR Center has been instrumental in advancing our efforts to support instructional leadership for SWD across the state. Together we have delved deeply into innovation configurations and analyzed statewide data to inform partnerships and practices with our educator preparation programs (EPPs).

The Keeping Exceptional Special Educators (KESE) grant provided valuable context and support to Washington's special education recruitment and retention efforts by providing PD, TA, and workforce data analyses. The KESE team supports goals like expanding the hiring pool, improving certification pathways, enhancing induction for novices, and improving working conditions. Together with the OSPI Title IIA office, the KESE team provided grant funding to LEAs who are committed to improving recruitment and retention among their special education teams. Through these efforts more than 30 LEAs attracted new teacher candidates, guided, and funded paraeducators through certification, built cross-school support teams, developed teacher incentive programs, and provided crucial PD opportunities.

Partners in Related Initiatives: In partnership with the Washington Association of School Administrators (WASA), OSPI developed the Special Education Director Academy (SPEDA). This

academy supports directors with administrative responsibilities, offering relevant sessions on topics like Supporting Students with Challenging Behavior and Implementing MTSS.

Inter-agency team engagement: Building off the progress that has already been made to actively partner across divisions at the SEA, in 2024-25, members of the Special Education team partnered closely with content area teams, the assessment team, and other agency divisions to support a unified and comprehensive rollout of revised learning standards. This cross-divisional collaboration emphasized Universal Design for Learning (UDL) as a foundational approach and strengthened shared understanding of how specially designed instruction (SDI) can be effectively delivered within general education environments. By aligning standards, assessment, and instructional guidance, this work supports LEAs and schools in ensuring that SWD have meaningful access to grade-level curriculum and are making progress toward academic expectations.

In Washington, educator professional development is strengthened through the IPTN, which aligns statewide priorities across MTSS, UDL, literacy, math, early learning, social-emotional and behavioral supports, multilingual and migrant education, and standards-based instruction. Through coordinated collaboration among TA and professional development providers, IPTN builds shared structures that support LEAs in addressing the diverse needs of students and families while strengthening inclusive education systems.

Over the past year, IPTN advanced a coordinated statewide effort to disrupt segregated systems and reduce exclusionary practices for SWD, with a specific focus on increasing meaningful inclusion and belonging in general education settings. State data continues to show persistent gaps in LRE outcomes, particularly for Black SWD and students with intellectual and developmental disabilities—highlighting the need for targeted, systems-level improvement. IPTN supports LEAs through aligned goals and metrics, including a 2% annual increase in inclusive placement for all students with IEPs and more accelerated targets for the most excluded student groups, to drive measurable progress toward equitable access and improved outcomes.

IPTN member organizations delivered aligned TA, professional learning, and resources grounded in six core drivers of inclusive systems: data-driven decision-making; educator recruitment and retention; family and community partnerships; shared ownership across systems; strategic resource use; and evidence-based practices with adaptive leadership. During the year, IPTN engaged 14,167 participants statewide, including 3,335 general education teachers, 2,021 special education teachers, 2,019 education staff associates, 956 paraeducators, 945 LEA administrators, 348 building administrators, and 721 family and parent partners, along with community members, higher education partners, and professional networks. This broad engagement strengthens aligned professional learning systems and embeds inclusive practices into LEA operations, supporting sustained system change and improved outcomes for SWD across Washington.

As Washington collaborates and explores new ways to measure impact and use data effectively within a MTSS framework, inclusive leadership at all system levels is crucial as are continued efforts to coordinate efforts and learn from one another, which is prioritized within the network and across the SEA.

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 State Design Team (SDT) has been instrumental in setting goals, providing feedback, and codesigning activities through comprehensive input from various partners (stakeholders) in the improvement of special education indicators. Here is an overview of the key components of the SDT and activities:

Composition of the SDT: The SDT comprises a diverse group, including OSPI cross-divisional staff, ESD representatives from all nine regions, partners from other state agencies, close to 300 educational partners from across the state, and technical assistance partners. Among the 356 SDT members that took part in setting targets for the current SPP, there were 12 students, 30 individuals with disabilities, and 142 parents or family members of individuals with disabilities. As we continue to engage the SDT, we have high levels of engagement with over 300 registrants for our last SDT Meeting and almost 200 educators, family members, students, and members from professional organizations attending our annual update meeting. SDT meetings provide information about current data, collect feedback, and engage on an ongoing basis with smaller work teams, like the Equity team, to analyze the data to codesign and evaluate the effectiveness of our activities. To encourage diverse engagement, SDT Meetings offer closed captioning, ASL and Spanish language interpretation, and other accommodations as needed.

Focus Groups & Areas of Analysis: Participants were divided into seven focus groups based on their areas of interest and role. Five focus groups participated in analyzing indicators and target-setting activities, covering areas such as early childhood, secondary transition, inclusionary practices, parent engagement, and addressing disproportionality and significant discrepancy. The focus groups met several times during the 2021-22 and 2022-23 school years.

Since target setting, the State Design Team (SDT) has remained an ongoing and valued partner to OSPI. The SDT has been engaged, as needed, to review indicator data and target updates, provide input on SPP/APR findings, and offer feedback on priority areas, including the Integrated Program and Technical Assistance Network (IPTN) and the OSPI Special Education Systemic Equity Review (SER). This continued collaboration ensures partner perspectives inform the State's special education priorities and improvement efforts.

Dispute resolution data for Indicators B15 and B16 in Washington State are shared semi-annually with partners, including SEAC meetings and presentations to administrators, families, advocates, and communities. The data is publicly posted on the OSPI website for transparency. SEAC reviews and proposes targets for these indicators, continuing to prioritize partner engagement. The SDT reconvenes to discuss OSEP's clarification feedback. Summaries of SEAC meetings and decisions are accessible on the OSPI SEAC webpage.

SSIP State Design Team and Community Partner Engagement: Essential partners collectively form a community that supports the SSIP implementation process. By scaffolding the learning of regional

ESDs, LEAs, community partners, and families, this community contributes to the successful navigation of the Stages of Implementation Science, MTSS implementation, and other identified evidence-based practices (EBPs). In 2024-25 the SSIP state design team came together to learn and share resources, analyze the data, and refine practices to meet goals two times monthly.

Key partners:

- Washington state Early Childhood Special Education (ECSE) Coordination Team: The ECSE Coordination Team participates in coordinating efforts related to early childhood special education and inclusive practices.
- Special Education Advisory Council (SEAC): SEAC serves as an advisory body providing insights and recommendations on special education matters. Their involvement underscores the importance of collaboration with diverse partners.
- Preschool (PreK) and Transitional Kindergarten (TK) Early Childhood Special Education (ECSE) Inclusion Champions Network: This network focuses on promoting inclusive practices in all early childhood learning environments considered placement options for children with disabilities. (PreK, TK, Kindergarten, etc.).
- Association of ESD (AESD) Special Education Directors: The AESD Special Education Directors represent a collective voice and collaboration among educational service districts. Their involvement ensures that strategies and services are coordinated across regions.
- OSPI's Division of Early Learning: The Division of Early Learning within the OSPI plays a central role in shaping early childhood education policies and practices.
- Center for the Improvement of Student Learning (CISL): CISL participates in initiatives that aim to improve student learning outcomes. Their partnership contributes to the identification and implementation of EBPs.
- University of Washington (UW) IPP PreK Demonstration Sites: The UW IPP PreK Demonstration Sites serves as a demonstration of effective practices in pre-kindergarten education.
- University of Denver Positive Early Learning Experiences (PELE) Center BB4B Sites: The UD PELE Center offer intensive technical assistance to local districts currently engaged in the SSIP and are currently exhibiting readiness for stages 3 (implementation-full) and 4 (scale up) of Implementation Science relating to inclusion and inclusionary practices.
- Regional ECSE Inclusion Champions: ECSE Implementation Specialists from 9 ESDs facilitate monthly collaborations with local districts offering technical assistance, professional development, and coaching on a variety of topics (Pyramid Model, K-12 MTSS alignment, discipline interventions, data analysis).
- Community Inclusion Teams: As part of the Early Childhood Technical Assistance Center (ECTA) grant supporting efforts to scale up and sustain inclusion policies and procedures, ECSE Implementation Specialists and local district teams have created Community Inclusion Teams, extending their implementation practices beyond the school boundaries to include the larger vision of inclusion and inclusionary practices within the infrastructures of a community-based program and/or agency.
- Office of Native Education (ONE): ONE's involvement ensures that initiatives related to inclusive EL settings and alternative placements are culturally responsive and consider the unique needs of Native communities.
- Family and Community Engagement: In addition to SEAC, SDT, and SSIP activities, the IPTN focuses on educational benefit, family engagement, and student voice. During FFY 2024-25, the IPTN engaged almost 15,000 participants, including students and families, and leveraged the expertise of the Family Engagement Collaborative.
- Partnerships for Action, Voices for Empowerment (PAVE), Washington State's Parent Training

and Information Center (PTI), are key strategic partners in Washington's statewide special education improvement efforts. Through regular coordination, data sharing, and joint analysis of engagement trends, PAVE and state partners align technical assistance, professional development, and family support to strengthen system coherence.
- The SEA has attended and presented in collaboration with students and families at national conferences. These conferences included but were not limited to TASH and last year's OSEP conference, providing opportunities to share about how partnerships improve educational outcomes and experiences.

These collaborative structures highlight Washington's sustained and ongoing commitment to engaging partners with an emphasis on students and families in the decision-making processes, prioritizing diversity, equity, and inclusion across all improvement efforts.

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

Number of Parent Members: 142

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 Special Education State Design Team (SDT) engaged 142 parents and family members in seven focus groups, analyzing indicator data and crafting recommendations for targets beginning in October 2021.

Since target setting, the State Design Team (SDT) has remained an ongoing and valued partner to OSPI. The SDT has been engaged, as needed, in reviewing indicator data and target updates, providing input on SPP/APR findings, and offering feedback on priority areas, including the IPTN and the OSPI Special Education Systemic Equity Review (SER). This continued collaboration ensures stakeholder perspectives inform the State's special education priorities and improvement efforts.

Ongoing contributions and reports on the indicators, with opportunities for engagement and feedback are provided to families multiple times a year. This is done through SEAC meetings, SDT meetings, and by looking at indicators and priorities with the equity team engaging with the Special Education Division at OSPI as part of our Systemic Equity Review. Additionally, one of the primary drivers of our IPTN is Innovative Family and Community engagement, and family engagement is called out in all our primary drivers to identify change activities to improve educational outcomes for students with disabilities.

In addition, as part of our systemic equity review, an equity team was created to dive deeper into our indicator data and parent representation was and continues to be a priority on this team and are included across activities, including our continued work on statewide IEP improvements and cross divisional collaborations that are highlighted below. Furthermore, the IPTN Family Engagement Collaborative continues to engage across critical drivers for change that directly targets our priorities, targets and goals related to the activities that started with the state design team.

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.

Family and Community Engagement with Statewide Technical Assistance Partners: Beyond directly supporting a significant number of families from diverse backgrounds, the IPTN Family Engagement Collaborative continues to play a pivotal role in providing leadership to other organizations that are part of the IPTN. Their contributions include providing strategies and fostering capacity for meaningful community dialogues, co-designing activities and plans for improvement with families and community members and involving them in collaborative decision-making processes. To achieve these objectives, the IPTN maintains a continuous reflection on their beliefs aligned with inclusive culture, philosophy, and practices, in addition to how to engage a broad range of partners, both educators and families. One of the drivers that communities of practice are engaged in as part of the IPTN includes innovative family and community engagement, recognizing that this is necessary across all other five drivers as well.

IPTN technical assistance ensures that educators are learning alongside families and that technical assistance is reflective of the schools and community partners. Some of the key inquiries the entire IPTN addresses in partnership with districts across Washington include exploring the narratives, experiences, and events that define the significance of inclusion for staff, students, and families and how this impacts educational outcomes for students with and without disabilities. The IPTN deliberately creates spaces for discussions on inclusion and identity, honoring diverse cultures and identities in the school community, and critically examining how a variety of perspectives influence the way students and families are perceived, engaged with, and valued. This technical assistance has and continues to center students and families in our work to improve educational experiences and outcomes.

Special Education State Design Team (SDT): In a concerted effort to foster greater representation within the SDT, extensive measures were taken to ensure a representative participant pool. The original invitation and survey were available in the 13 most spoken languages in Washington state and was employed to collect essential details such as contact information, represented age group(s), county/school district affiliations, optional race/ethnicity, role/position, areas of interest, and any necessary accommodations or language access requirements. Wide-reaching dissemination methods included GovDelivery communications, OSPI's Special Education Monthly Updates, ESD meetings, Spanish and English radio, and newspaper advertisements, as well as collaborations with statewide professional organizations, diverse community-based organizations, and PTI Centers. Notably, Spanish advertisements were initiated to address underrepresentation of individuals identifying as Hispanic in the preliminary participant demographics.

Participants were thoughtfully assigned to one of seven focus groups based on their identified interests and roles, each comprising 45–55 members with a balanced mix of race/ethnicity, geographic location, background, and role. The demographics of each focus group were closely monitored by the Special Education Program Improvement Coordinator to ensure optimal representativeness aligned with the pool of applicants and their specified areas of interest.

Several of these focus groups continued to meet through the 2022-23 school year and based on

the data/targets from the state design team, other teams have formed to continue carrying these priorities forward. In 2023-24, there were ongoing efforts to engage these partners in improvement efforts based on their engagement in the SDT. Over the 2024-25 school year, this included opportunities to provide experience and input to a statewide IEP feasibility study, ongoing engagement as part of our legislative session to align key statewide priorities, and partnership in the development of universal guidance that was developed in partnership with the TIES Center.

Cross-divisional SEA Family Engagement: Leadership from the Special Education Division actively collaborates with other divisions across the agency to ensure students with disabilities are meaningfully included in broader efforts to improve student outcomes. These efforts are rooted in a commitment to co-design and authentic collaboration, intentionally involving families and individuals with lived experiences to guide our work.

Examples of this collaborative approach include Reducing Restraint and Eliminating Isolation Partnership: Partnering with the Student Engagement and Supports Division, we engage families and individuals with lived experiences in focus groups and as ongoing reviewers, ensuring their insights shapes our efforts. This partnership focuses on building systems grounded in positive behavior support practices, reducing reliance on restraint, and eliminating isolation in schools statewide.

Standards Review Team: Our team plays a key role in working with OSPI content leads in literacy, math, and science to ensure revised standards reflect diverse learners. This includes creating a family and caregiver guide to support understanding and implementation of the updated standards.

Partnership with the Office of System and School Improvement: Through regular data analysis, we identify professional development needs and prioritize support for students with disabilities in school improvement plans, ensuring these efforts are data-driven and impactful.

These examples demonstrate our commitment to integrating the needs of students with disabilities into agency-wide efforts to improve student outcomes and engage families as an integral part of those efforts.

Family and Community Engagement with Statewide Technical Assistance Partners: We earlier described the family and community engagement partners deliberately integrated into the IPTN and the efforts to prioritize family and community engagement through all the IPTN activities. Furthermore, we have actively involved families in our Special Education Divisions Systemic Equity Review. In this collaborative effort, family partners played a crucial role by reviewing the memo compiled from a national technical assistance partner, because of months of engagement with those same families providing feedback. For this, parents and families engaged in professional development and shared their own experiences, analyzed data, and participated in focus group sessions. Their input and continued partnership will be instrumental in shaping division priorities by ensuring that our priorities are driven by what was identified and recommended as part of this review.

Soliciting Public Input:

The mechanisms and timelines for soliciting public input for setting targets, analyzing data,

developing improvement strategies, and evaluating progress.

In 2023-24, partners were asked to provide feedback and make adjustments to the draft memo that was part of the Systemic Equity Review (SER) and to continue to engage in activities that are tied to our division priorities and are ongoing, including statewide IEP feedback while exploring a feasibility study, the agencies work to reduce restraint and isolation and to engage in learning about inclusive systems that are showing improvement and/or serve as exemplars across our state, based on the experiences in Washington, to more intentionally inform our guidance.

Additional information:

In spring 2021, OSPI issued a request for individuals who were interested in joining a Special Education SDT. Individuals were directed to complete an invitation survey that was translated into the 13 most commonly spoken languages in Washington state. The survey identified the individual's contact information, age group(s) representing, county/school district representing, race/ethnicity (optional), role, focus area(s) of interest, and any accommodations or language access considerations needed. The invitation was disseminated statewide through multiple methods, including but not limited to GovDelivery communications, OSPI's Special Education Monthly Updates, ESD meetings, Spanish and English radio and newspaper advertisements, and collaboration with statewide professional organizations, diverse CBOs, and PTI Centers.

Participants were assigned to a focus group based on their role and identified area(s) of interest. The individual focus groups, facilitated by OSPI staff, met virtually in October through December 2021 to analyze indicator data and collaboratively develop recommendations for indicator targets. The full SDT was brought together for a second virtual meeting on January 11, 2022, to review the work of the focus groups and the recommended targets, prior to presenting the targets to the state SEAC for review and approval on January 20, 2022. All focus group materials, including slide decks, indicator guides, discussion protocols, participant guidelines, meeting recordings/transcripts, and participant input was maintained in a shared Google Docs folder for all participants to access. Additional opportunities to provide input included a parking lot document, homework assignments, and email.

Since target setting, the SDT has remained a valued partner to OSPI. While the SDT was not engaged during the 2024–25 reporting period, the team continues to stand ready to support OSPI, as needed, to review indicator data and target updates, provide input on SPP/APR findings, and offer feedback on priority initiatives, including the Inclusionary Practices Technical Assistance Network (IPTN) and the OSPI Special Education Systemic Equity Review (SER). This ongoing partnership ensures that stakeholder perspectives can inform the State's special education priorities and continuous improvement efforts when engagement is appropriate.

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.

All SDT focus group materials, including slide decks, indicator guides, discussion protocols, participant guidelines, meeting recordings/transcripts, and participant input was maintained in a shared Google Docs folder for all participants to access. Additional opportunities to provide input

included a parking lot document, homework assignments, and email. Updates on the work of the SDT and focus groups were posted publicly on OSPI's Special Education Family Engagement and Guidance webpage. Summaries of SEAC meetings and decisions are posted on OSPI's SEAC webpage

Each of the IPTN partner organizations in 2024-25 were featured and hyperlinked on the main webpage for the statewide IPP and have resources they have developed highlighted on the webpage as part of a central resource center. Universal guidance our division has created in partnership with content experts in OSPI and other partners have also been posted on our website, under student success, not residing solely on our Special Education Page to reflect the value these resources provide to all students: Inclusionary Practices.

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.

The state continues to publicly post and report on both SEA and LEA performance on the state performance plan (SPP)/annual performance report (APR) indicators. The FFY 2023 data were posted in February 2025. Complete copies of the Washington SPP and APR are located on the same webpage.

The APR is disseminated throughout the state via OSPI's website for Special Education data, the agency's social media accounts (RSS feeds, Facebook, Instagram), and available to the media and families. This information is also distributed in the Special Education Monthly update, through the Partnerships for Action Voices for Empowerment (PAVE) PTI Center, to partner committees who are active in the activities described in this report, and to the SEAC. This information is also presented at regional ESD meetings and when sharing data and priorities at statewide and national conferences.

Data showing the performance of each LEA in the state on the SPP and APR indicators are posted on the data profiles (Indicators 1 through 14, and timely reporting status). Districts enter their unique county-district number on the data profile, and their district's performance data can be compared to statewide data at-a-glance. Districts also use these data to complete their LEA federal fund applications.

State assessment data links:

Accommodations Data for State and District: scroll down the page to "Part B Assessments".

Statewide Smarter Balanced Assessment: On the Washington State Report Card Website, choose "I Want to See Data for Washington State", scroll down the page, then choose "ELA, Math, and Science Assessments", and then choose "Summary or Score Details".

Statewide Alternate Assessment, On the Washington State Report Card Website: Choose "I Want to See Data for Washington State", scroll down the page, then choose "ELA, Math, and Science Assessments" in the Student Performance Section, and then choose "Alt Assessment Summary or Alt Assessment Participation by Grade".

District-Level Example for Smarter Balanced Assessment, On the Washington State Report Card Website: Under "I Want to See Data for a school or school district" type in "Spokane School District" and click "GO", scroll down the page to choose "ELA, Math, and Science Assessments" in the Student Performance Section, and then choose "Score Details".

District-Level Example for Alternate Assessment, On the Washington State Report Card Website: Under "I Want to See Data for a school or school district" type in "Seattle School District No. 1" and click "GO", scroll down the page to choose "ELA, Math, and Science Assessments" in the Student Performance Section, and then choose "Alt Assessment Summary or Alt Assessment Participation by Grade".

School-Level Example for Smarter Balanced Assessment, On the Washington State Report Card Website: choose "I Want to See Data for a school or school district" and type in "Ballard High School, Seattle School District No. 1" and click "GO", scroll down the page to choose "ELA, Math, and Science Assessments" in the Student Performance Section, and then choose "Score Details".

School-Level Example for Alternate Assessment, On the Washington State Report Card Website: choose "I Want to See Data for a school or school district" and type in "Maya Angelou Elementary School, Pasco School District" and click "GO", scroll down the page, then choose "ELA, Math, and Science Assessments" in the Student Performance Section, and then choose "Alt Assessment Summary or Alt Assessment Participation by Grade". There are very few cases where alternate assessment data meet the n sizes for public reporting at the school/building level.

Intro - Prior FFY Required Actions

None

Intro - OSEP Response

None

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

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

Percent of youth with Individualized Education Programs (IEPs) exiting special education due to graduating with a regular high school diploma. *[20 United States Code (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

Baseline year	Baseline data
FFY 2018	68.21%

Historical Data

FFY	2019	2020	2021	2022	2023
Target >=	61.30%	71.00%	72.00%	73.00%	74.00%
Data	62.24%	73.91%	76.13%	75.87%	75.92%

Targets

FFY	2024	2025
Target >=	75.00%	76.00%

Targets: Description of Stakeholder Input

See Introduction for Broad Stakeholder Input.

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)	5,736
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)	
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)	7
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)	1,865

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
5,736	7,608	75.92%	75.00%	75.39%	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.

Washington State Requirements for the class of 2023: Total credits required = 24

1. Develop a High School and Beyond Plan (HSBP) - All students, with the help of educators and students' families, if possible, must build a HSBP that shows how they will meet state and local graduation requirements and prepare for what they want to do following high school. A student's HSBP, which starts no later than 8th grade, is annually revised by students throughout high school to adjust for changing interests and goals.
2. Complete a Graduation Pathway - Students will complete one or more graduation pathways to demonstrate their preparation for a meaningful first step after high school, which could include engaging in work, starting an apprenticeship, attending college, or joining the military. The graduation pathway(s) chosen by a student must be aligned with their HSBP. Pathways for the Class of 2024 included:
    - Career/Technical Education (CTE) Sequence
    - Military - ASVAB Exam (AFQT Section only)
    - English Language Arts (ELA) and Math Courses and Exams (including ACT, SAT, AP/IB/Cambridge, CTE Dual Credit, Running Start, Smarter Balanced Assessment, WA-AIM (alternate state assessment), and transition courses).
3. Complete High School Subject Area Requirements - All students must complete specific course requirements, including any Personalized Pathway Requirement courses, and other credit requirements established by their local districts.

Through course completion and credit-earning opportunities aligned to the state's Learning Standards, students gain the needed communication and subject area knowledge and skills outlined in Washington's Goals of Basic Education. The total credit required for the Class of 2024 was 24 credits, plus any additional LEA requirements.

For more information on these requirements, see the Class of 2024 Graduation Toolkit website.

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

1—Prior FFY Required Actions

None

1—Office of Special Education Programs (OSEP) Response

None

1—Required Actions

None

INDICATOR 2: DROP OUT

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

Percent of youth with Individualized Education Programs (IEPs) who exited special education due to dropping out. *[20 United States Code (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

Baseline year	Baseline data
FFY 2018	31.93%

Historical Data

FFY	2019	2020	2021	2022	2023
Target <=	5.45%	31.00%	30.50%	29.00%	27.50%
Data	6.81%	25.75%	23.63%	23.94%	23.25%

Targets

FFY	2024	2025
Target <=	26.20%	25.10%

Targets: Description of Stakeholder Input

See Introduction for Broad Stakeholder Input.

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)	5,736
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)	*N/A*
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)	*N/A*
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)	7
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)	1,865

FFY 2022 SPP/APR Data

Number of youth with IEPs (ages 14–21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14–21)	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
1,865	7,608	23.25%	26.20%	24.51%	Met target	No Slippage

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

Dropping out is defined as any student who leaves school for any reason, except death, before completing school with a high school diploma or transferring to another school with a known exit reason. A student is considered as dropping out regardless of when dropping out occurs (i.e., during or between regular school terms). A student who leaves during the year but returns during the reporting period is not considered as dropping out.

Dropping out includes those students who provide a reason for dropping out, those who leave school to attempt/obtain a General Equivalency Degree (GED), and those students who have an unconfirmed transfer or who were enrolled but stopped attending and no further information could be found for these students.

There is no differentiation of the definition of dropping out between students with or without disabilities.

Is there a difference in what counts as dropping out for youth with IEPs? (Yes / No) NO

2—Prior FFY Required Actions

None

2—Office Of Special Education Programs (OSEP) Response

None

2—Required Actions

None

INDICATOR 3A: PARTICIPATION FOR CHILDREN WITH IEPS

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

Participation and performance of children with Individualized Education Programs (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 United States Code (U.S.C.) 1416 (a)(3)(A)]

Data Source

3A. Same data as used for reporting to the U.S. Department of Education (Department) under Title I of the Elementary and Secondary Education Act (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 (HS). 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 Code of Federal Regulations (C.F.R.) §300.160(f), i.e., a link to the website 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, and HS. Account for **all** children with IEPs, in grades 4, 8, and HS, 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 (FFY)	Baseline data
Reading	A	Grade 4	2018	95.00%
Reading	B	Grade 8	2018	92.60%
Reading	C	Grade HS	2018	88.40%
Math	A	Grade 4	2018	94.90%
Math	B	Grade 8	2018	92.10%
Math	C	Grade HS	2018	86.60%

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

See Introduction for Broad Stakeholder Input.

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)	14,468	11,572	11,135
b. Children with IEPs in regular assessment with no accommodations (3)	4,511	3,659	4,362
c. Children with IEPs in regular assessment with accommodations (3)	8,251	6,062	4,222
d. Children with IEPs in alternate assessment against alternate standards	872	687	814

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)	14,464	11,566	11,127
b. Children with IEPs in regular assessment with no accommodations (3)	7,018	4,112	5,113
c. Children with IEPs in regular assessment with accommodations (3)	5,719	5,573	3,286
d. Children with IEPs in alternate assessment against alternate standards	870	680	816

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	13,634	14,468	94.61%	95.00%	94.24%	Did not meet target	No Slippage
B	Grade 8	10,408	11,572	89.35%	95.00%	89.94%	Did not meet target	No Slippage
C	Grade HS	9,398	11,135	83.14%	95.00%	84.40%	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	13,607	14,464	94.53%	95.00%	94.07%	Did not meet target	No Slippage
B	Grade 8	10,365	11,566	88.81%	95.00%	89.62%	Did not meet target	No Slippage
C	Grade HS	9,215	11,127	81.64%	95.00%	82.82%	Did not meet target	No Slippage

Regulatory Information

The State Educational Agency (SEA) [or, in the case of a district-wide assessment, Local Educational Agency (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 Code of Federal Regulations (C.F.R.) §300.160(f)].

Public Reporting Information

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

- Washington State Report Card - Choose ELA, Math, and Science Assessments.
- Information on students with disabilities using an accommodation at statewide assessment

3A—Prior FFY Required Actions

None

3A—OSEP Response

None

3A—Required Actions

None

INDICATOR 3B: PROFICIENCY FOR CHILDREN WITH IEPS (GRADE LEVEL ACADEMIC ACHIEVEMENT STANDARDS)

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

[20 United States Code (U.S.C.) 1416 (a)(3)(B)]

Data Source

3B. Same data as used for reporting to the U.S. Department of Education (Department) under Title I of the Elementary and Secondary Education Act (ESEA), using ED*Facts* file specifications FS175 and 178.

Measurement

B. Proficiency rate percent = [(# of children with Individualized Education Programs (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 (HS). 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 Code of Federal Regulations (C.F.R.) §300.160(f), i.e., a link to the website where these data are reported.

Indicator 3B: Proficiency calculations in this State Performance Plan (SPP) / Annual Performance Report (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 HS, 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 (FFY)	Baseline data
Reading	A	Grade 4	2018	25.50%
Reading	B	Grade 8	2018	15.60%
Reading	C	Grade HS	2018	24.80%
Math	A	Grade 4	2018	24.30%
Math	B	Grade 8	2018	10.00%
Math	C	Grade HS	2018	6.30%

Targets

Subject	Group	Group name	2024	2025
Reading	A >=	Grade 4	76.90%	83.50%
Reading	B >=	Grade 8	76.90%	83.50%
Reading	C >=	Grade HS	76.90%	83.50%
Math	A >=	Grade 4	75.90%	82.80%
Math	B >=	Grade 8	75.90%	82.80%
Math	C >=	Grade HS	75.90%	82.80%

Targets: Description of Stakeholder Input

See Introduction for Broad Stakeholder Input.

Federal Fiscal Year (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 regular assessment	12,762	9,721	8,584
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,113	974	1,287
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,025	460	644

Data Source: SY 2024–25Assessment Data Groups—Math (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 regular assessment *(1)*	12,737	9,685	8,399
b. Children with IEPs in regular assessment with no accommodation scored at or above proficient against grade level	2,600	748	495
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	509	210	113

(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	3,138	12,762	23.44%	76.90%	24.59%	Did not meet target	No Slippage
B	Grade 8	1,434	9,721	14.70%	76.90%	14.75%	Did not meet target	No Slippage
C	Grade HS	1,931	8,584	23.05%	76.90%	22.50%	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	3,109	12,737	23.56%	75.90%	24.41%	Did not meet target	No Slippage
B	Grade 8	958	9,685	9.17%	75.90%	9.89%	Did not meet target	No Slippage
C	Grade HS	608	8,399	5.85%	75.90%	7.24%	Did not meet target	No Slippage

Regulatory Information

The State Educational Agency (SEA) [or, in the case of a district-wide assessment, Local Educational Agency (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 Code of Federal Regulations (C.F.R.) §300.160(f)].

Public Reporting Information

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

- Washington State Report Card - Choose ELA, Math, and Science Assessments.
- Information on students with disabilities using an accommodation at statewide assessment

3B—Prior FFY Required Actions

None

3B—Office Of Special Education Programs (OSEP) Response

None

3B—Required Actions

None

INDICATOR 3C: PROFICIENCY FOR CHILDREN WITH IEPS (ALTERNATE ACADEMIC ACHIEVEMENT STANDARDS)

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

[20 United States Code (U.S.C.) 1416 (a)(3)(C)]

Data Source

3C. Same data as used for reporting to the U.S. Department of Education (Department) under Title I of the Elementary and Secondary Education Act (ESEA), using ED*Facts* file specifications FS175 and 178.

Measurement

C. Proficiency rate percent = [(# of children with Individualized Education Programs (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 (HS). 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 Code of Federal Regulations (C.F.R.) §300.160(f) (i.e., a link to the website where these data are reported).

Indicator 3C: Proficiency calculations in this State Performance Plan (SPP) / Annual Performance Report (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 HS, 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 (FFY)	Baseline data
Reading	A	Grade 4	2018	56.10%
Reading	B	Grade 8	2018	58.30%
Reading	C	Grade HS	2018	33.60%
Math	A	Grade 4	2018	58.40%
Math	B	Grade 8	2018	48.90%
Math	C	Grade HS	2018	60.50%

Targets

Subject	Group	Group name	2024	2025
Reading	A >=	Grade 4	76.90%	83.50%
Reading	B >=	Grade 8	76.90%	83.50%
Reading	C >=	Grade HS	76.90%	83.50%
Math	A >=	Grade 4	75.90%	82.80%
Math	B >=	Grade 8	75.90%	82.80%
Math	C >=	Grade HS	75.90%	82.80%

Targets: Description of Stakeholder Input

See Broad Stakeholder Input in Introduction for a detailed description.

FFY 2024 Data Disaggregation from ED*Facts*

Data Source: School Year (SY) 2024–25 Assessment Data Groups—Reading (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	872	687	814
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	271	238	304

Data Source: School Year (SY) 2024–25 Assessment Data Groups —Math (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	870	680	816
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	319	214	438

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	271	872	28.91%	76.90%	31.08%	Did not meet target	No Slippage
B	Grade 8	238	687	37.73%	76.90%	34.64%	Did not meet target	Slippage
C	Grade HS	304	814	37.39%	76.90%	37.35%	Did not meet target	No Slippage

Provide reasons for slippage for Group B, if applicable

There are several key factors that contributed to observed slippage in performance data for students with the most complex disabilities who participated in the alternate state assessment, particularly in English Language Arts (ELA) and Math for grade 8 which show slippage. These factors are multifaceted, encompassing educational, developmental, and assessment-related considerations.

The SEA has been working with partners in our agency's Assessment office and with schools and districts statewide to reexamine the profile of students participating in the alternate state assessment, including reducing the number of students who do not meet eligibility criteria, such as students who are eligible under Specific Learning Disability and Communication Disorder. The reduction of students who are not correctly identified as eligible for the alternate state assessment impacts the overall proficiency scores, along with an increase in the numbers of students with cognitive disabilities. There were more students with cognitive disabilities taking the alternate assessment in this reporting period than in the prior reporting period.

As reported in the previous APR, our data in each area indicate an increased use of the Less Complex Access Point, which will produce a lower overall score due to weighting. Based on teacher predicted achievement levels, our data shows strong correlation between teacher predicted achievement and actual achievement. This suggests that students are administered the correct access point and this is likely an accurate reflection of the students' skills during this test administration. While Washington improved in grades 4 and HS (last year there was slippage in these areas), additional training continues to be needed in Grade 8, both ELA and Math.

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	319	870	34.73%	75.90%	36.67 %	Did not meet target	No Slippage
B	Grade 8	214	680	34.11%	75.90%	31.47 %	Did not meet target	Slippage
C	Grade HS	438	816	52.52%	75.90%	53.68 %	Did not meet target	No Slippage

Provide reasons for slippage for Group B, if applicable

There are several key factors that contributed to observed slippage in performance data for students with the most complex disabilities who participated in the alternate state assessment, particularly in English Language Arts (ELA) and Math for grade 8 which show slippage. These factors are multifaceted, encompassing educational, developmental, and assessment-related considerations.

The SEA has been working with partners in our agency's Assessment office and with schools and districts statewide to reexamine the profile of students participating in the alternate state assessment, including reducing the number of students who do not meet eligibility criteria, such as students who are eligible under Specific Learning Disability and Communication Disorder. The reduction of students who are not correctly identified as eligible for the alternate state assessment impacts on the overall proficiency scores, along with an increase in the numbers of students with cognitive disabilities. There were more students with cognitive disabilities taking the alternate assessment in this reporting period than in the prior reporting period.

As reported in the previous APR, our data in each area indicate an increased use of the Less Complex Access Point, which will produce a lower overall score due to weighting. Based on teacher predicted achievement levels, our data shows strong correlation between teacher predicted achievement and actual achievement. This suggests that students are administered the correct access point and this is likely an accurate reflection of the students' skills during this test administration. While Washington improved in grades 4 and HS (last year there was slippage in these areas), additional training continues to be needed in Grade 8, both ELA and Math.

Regulatory Information

The State Educational Agency (SEA) [or, in the case of a district-wide assessment, Local Educational Agency (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 United States Code (U.S.C.) 1412 (a)(16)(D); 34 Code of Federal Regulations (C.F.R.) §300.160(f)].*

Public Reporting Information

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

- Washington State Report Card - Choose Student Performance >> Assessment
- Information on students with disabilities using an accommodation at statewide assessment

Provide additional information about this indicator. (Optional)

3C—Prior FFY Required Actions

None

3C—Office Of Special Education Programs (OSEP) Response

None

3C—Required Actions

None

INDICATOR 3D: GAP IN PROFICIENCY RATES (GRADE LEVEL ACADEMIC ACHIEVEMENT STANDARDS)

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

[20 United States Code (U.S.C.) 1416 (a)(3)(D)]

Data Source

3D. Same data as used for reporting to the U.S. Department of Education (Department) under Title I of the Elementary and Secondary Education Act (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 (FFY)	Baseline data
Reading	A	Grade 4	2018	32.30
Reading	B	Grade 8	2018	44.10
Reading	C	Grade HS	2018	48.00
Math	A	Grade 4	2018	30.70
Math	B	Grade 8	2018	37.20
Math	C	Grade HS	2018	36.30

Targets

Subject	Group	Group name	2024	2025
Reading	A <=	Grade 4	13.30	9.50
Reading	B <=	Grade 8	25.10	21.30
Reading	C <=	Grade HS	29.10	25.30
Math	A <=	Grade 4	14.70	11.50
Math	B <=	Grade 8	21.20	18.00
Math	C <=	Grade HS	20.30	17.10

Targets: Description of Stakeholder Input

See Introduction for Broad Stakeholder Input.

Federal Fiscal Year (FFY) 2024 Data Disaggregation from ED*Facts*

Note: 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.

Data Source: School Year (SY) 2024–25 Assessment Data Groups—Reading (EDFacts file spec FS178; Data Group: 876, 877) Date: 01/07/2026

Reading Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	75,692	76,521	77,005
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	12,762	9,721	8,584
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	34,641	37,571	48,404
d. All students in regular assessment with accommodations scored at or above proficient against grade level	3,766	1,628	1,367
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,113	974	1,287
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	1,025	460	644

Data Source: SY 2024–25 Assessment Data Groups—Math (EDFacts file spec FS175; Data Group: 874, 875) Date: 01/07/2026

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	75,688	76,282	76,157
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	12,737	9,685	8,399
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	36,895	28,387	25,878
d. All students in regular assessment with accommodations scored at or above proficient against grade level	685	326	171
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	2,600	748	495
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	509	210	113

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	24.59%	50.74%	26.29	13.30	26.15	Did not meet target	No Slippage
B	Grade 8	14.75%	51.23%	35.13	25.10	36.47	Did not meet target	Slippage
C	Grade HS	22.50%	64.63%	43.20	29.10	42.14	Did not meet target	No Slippage

Provide reasons for slippage for Group B, if applicable

After analyzing the proficiency data for both students with and without disabilities it was concluded that proficiency rates for both students with and without disabilities increased, although the rate of increase for students without disabilities outpaced the proficiency rates for students with disabilities, causing slippage for this indicator. This was true for grade 8 in both Math and ELA.

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	24.41%	49.65%	25.53	14.70	25.24	Did not meet target	No Slippage
B	Grade 8	9.89%	37.64%	26.43	21.20	27.75	Did not meet target	Slippage
C	Grade HS	7.24%	34.20%	27.60	20.30	26.97	Did not meet target	No Slippage

Provide reasons for slippage for Group B, if applicable

After analyzing the proficiency data for both students with and without disabilities it was concluded that proficiency rates for both students with and without disabilities increased, although the rate of increase for students without disabilities outpaced the proficiency rates for students with disabilities, causing slippage for this indicator. This was true for grade 8 in both Math and ELA.

3D—Prior FFY Required Actions

None

3D—Office Of Special Education Programs (OSEP) Response

None

3D—Required Actions

None

INDICATOR 4A: SUSPENSION/EXPULSION

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

Rates of suspension and expulsion:

A. Percent of Local Educational Agencies (LEAs) 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 Individualized Education Programs (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 United States Code (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 Individuals with Disabilities Education Act (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, 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 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

Baseline year	Baseline data
FFY 2019	3.41%

Historical Data

FFY	2019	2020	2021	2022	2023
Target <=	2.25%	3.16%	2.91%	2.66%	2.41%
Data	3.19%	0.71%	0.00%	2.12%	1.40%

Targets

FFY	2024	2025
Target <=	2.16%	1.91%

Targets: Description of Stakeholder Input

See Broad Stakeholder Input in the Introduction above for a detailed description.

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 who have received out-of-school suspensions and expulsions of more than 10 days within the LEA).

LEAs must have a minimum cell size of at least two students with out-of-school suspensions and expulsions of more than 10 days, and a minimum ''n" size of 10 total students with IEPs enrolled in 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.

As established in the State Performance Plan (SPP) LEAs must have a minimum cell size of at least two students with out-of-school disciplinary incidents of more than 10 days, and a minimum ''n" size of 10 total students with IEPs is required in order to be considered for significant discrepancy.

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.

The Office of Superintendent of Public Instruction (OSPI) established minimum n and cell size

definitions for Indicators B-4A and B-4B through a structured, stakeholder-driven process designed to ensure valid, equitable, and meaningful identification of local educational agencies (LEAs) with significant discrepancy. In April 2021, OSPI convened a Special Education State Design Team (SDT) through a statewide, multilingual outreach effort that engaged a broad and diverse group of stakeholders, including students with disabilities, parents, educators, administrators, representatives from state agencies, and community-based organizations.

Stakeholders were assigned to seven focus groups reflecting diverse roles, geographic regions, and demographic characteristics. Five of these focus groups were directly involved in indicator analysis and target-setting, including the Disproportionality and Significant Discrepancy focus group responsible for Indicator B-4.

The Disproportionality and Significant Discrepancy focus group, composed of 47 members representing six race/ethnicity groups and a broad range of stakeholder perspectives, conducted an in-depth review of multiple years of discipline trend data to inform recommendations regarding minimum n and cell size definitions. The group examined alternative analytic methodologies and compared the effects of different minimum n thresholds on LEA identification outcomes, including the extent to which varying thresholds produced stable, interpretable results versus volatile outcomes driven by small cell sizes.

Through this analysis, stakeholders assessed the trade-offs between statistical reliability and inclusivity. Smaller n sizes were found to increase the risk of instability and over-identification due to year-to-year fluctuations, while larger n thresholds risked excluding smaller LEAs and masking meaningful disparities for historically underserved student groups. The recommended minimum n and cell size definitions were determined to be reasonable because they minimize the likelihood that identification is based on anomalous data, while still allowing for the detection of persistent and meaningful patterns of disproportionality across multiple years.

The focus group developed recommendations grounded in data analysis and stakeholder consensus. These recommendations were reviewed, vetted, and approved by the State Special Education Advisory Council (SEAC). The resulting minimum n and cell size definitions reflect stakeholder input, are aligned with federal expectations, and ensure that OSPI appropriately analyzes data and identifies LEAs with significant discrepancy in a manner that is both statistically sound and equity focused.

By grounding recommendations in longitudinal data analysis and stakeholder review of real-world impacts, Washington ensured that the final definitions appropriately balance methodological rigor with equity considerations. As a result, the adopted n sizes support consistent and defensible identification of LEAs with significant discrepancy, including smaller LEAs, while maintaining confidence that identified disparities reflect systemic issues rather than statistical noise.

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.

There was no change from the prior SPP/APR reporting period for minimum n or cell sizes.

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

There was no change from the prior SPP/APR reporting period for minimum n or cell sizes.

If yes, the State may only include, in both the numerator and the denominator, LEAs that met that 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. 1

Number of LEAs that have a significant discrepancy	Number of LEAs that met the state's minimum n/cell size	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
4	286	1.40%	2.16%	1.40%	Met target	No Slippage

Choose one of the following comparison methodologies to determine whether significant discrepancies are occurring [34 Code of Federal Regulations (C.F.R.) §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:
Washington calculates significant discrepancy in the rates of long-term suspensions and expulsions for students with IEPs through the following steps:

1. Calculate each district's rate of suspension/expulsion for greater than 10 days for students with IEPs (total number of students with IEPs who were suspended/expelled for greater than 10 days in the district divided by the total number of students with IEPs in the district). This process will result in each district's rate of suspensions/expulsions for students with IEPs.
2. Calculate each district's rate of suspension/expulsion for greater than 10 days for students without IEPs (total number of students without IEPs who were suspended/expelled for greater than 10 days in the district divided by the total number of students without IEPs in the district). This process will result in each district's rate of suspensions/expulsions for students without IEPs.
3. Subtract the district rate of suspension/expulsion for greater than 10 days for all students without IEPs from the district rate of suspension/expulsions for students with IEPs. The result is the rate difference.
4. Districts with a rate difference of 2.0 or greater are identified as having a significant discrepancy.
5. Districts must have a minimum cell size of at least two students with out-of-school disciplinary incidents of more than 10 days, and a minimum ''n" size of 10 total students with IEPs is required in order to be considered for significant discrepancy.
6. One district was excluded from the FFY 2024 calculation as a result of not meeting these minimum cell and "n" size requirements.

Rate difference = (number of students with disabilities suspended more than 10 days in LEA divided by all students with disabilities in LEA) minus (number of students without disabilities suspended more than 10 days in LEA divided by all students without disabilities in LEA).

A significant discrepancy is defined as a rate difference of 2.0 or more, with a minimum of two

students with disciplinary incidents (out of school suspensions of more than 10 days) in the identified school year.

Provide additional information about this indicator. (Optional)

Review of Policies, Procedures, and Practices (completed in FFY 2024 using 2023–20234 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.

Based on the methodology described in the section titled "Definition of Significant Discrepancy and Methodology", four districts had a rate difference over 2.0 and were therefore identified as having a significant discrepancy in FFY 2024 (using school year 2023-24 data).

For all four of the districts that the state identified as having a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in FFY 2024, OSPI reviewed and, if appropriate, required the affected district to revise the policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports (PBIS), and procedural safeguards to ensure that these policies, procedures, and practices comply with IDEA.

All four districts were required to complete a self-review of discipline, and other related policies, procedures, and practices, as part of a disproportionality self-assessment (Disproportionality Workbook). In the self-assessment, the districts were required to report on their review of policies procedures, and practices; identify potential root causes for the significant discrepancy; and describe their plan for addressing the discrepancy in the upcoming school year. If revisions were made to the district's policies, procedures, or practices as a result of this review, the district was required to describe those revisions in the self-review. Revisions to formal, written special education policies and procedures were also required to be submitted for OSPI review. OSPI special education program supervisors reviewed the results of each district's self-assessment and provided written feedback, technical assistance, and required follow-up actions, as appropriate, to ensure that identified root causes were addressed and that proposed district actions were aligned with evidence-based practices and compliance requirements.

Data collections conducted through the general supervisory system were analyzed to verify district-reported results. The state also selected a sampling of student records from the discrepant cells as part of WISM systems analysis reviews in designated districts.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 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

4A—Prior FFY Required Actions

None

4A—OSEP Response

None

4A—Required Actions

None

INDICATOR 4B: SUSPENSION/EXPULSION BY RACE OR ETHNICITY

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Compliance Indicator

Rates of suspension and expulsion:

A. Percent of Local Educational Agencies (LEAs) 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 Individualized Education Programs (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 United States Code (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 Individuals with Disabilities Education Act (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 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.

4B—Indicator Data

Baseline year	Baseline data
FFY 2019	0.00%

Historical Data

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/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).

LEAs must have a minimum cell size of at least two students with out-of-school suspensions and expulsions of more than 10 days, and a minimum ''n" size of 10 total students with IEPs enrolled in the LEA.

If yes, the State also provides 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 Office of Superintendent of Public Instruction (OSPI) established minimum n and cell size definitions for Indicators B-4A and B-4B through a structured, stakeholder-driven process designed to ensure valid, equitable, and meaningful identification of local educational agencies (LEAs) with significant discrepancy. In April 2021, OSPI convened a Special Education State Design Team (SDT) through a statewide, multilingual outreach effort that engaged a broad and diverse group of stakeholders, including students with disabilities, parents, educators, administrators, representatives from state agencies, and community-based organizations.

Stakeholders were assigned to seven focus groups reflecting diverse roles, geographic regions, and demographic characteristics. Five of these focus groups were directly involved in indicator analysis and target-setting, including the Disproportionality and Significant Discrepancy focus group responsible for Indicator B-4.

The Disproportionality and Significant Discrepancy focus group, composed of 47 members representing six race/ethnicity groups and a broad range of stakeholder perspectives, conducted an in-depth review of multiple years of discipline trend data to inform recommendations regarding minimum n and cell size definitions. The group examined alternative analytic methodologies and compared the effects of different minimum n thresholds on LEA identification outcomes, including the extent to which varying thresholds produced stable, interpretable results versus volatile outcomes driven by small cell sizes

Through this analysis, stakeholders assessed the trade-offs between statistical reliability and inclusivity. Smaller n sizes were found to increase the risk of instability and over-identification due to year-to-year fluctuations, while larger n thresholds risked excluding smaller LEAs and masking meaningful disparities for historically underserved student groups. The recommended minimum n and cell size definitions were determined to be reasonable because they minimize the likelihood that identification is based on anomalous data, while still allowing for the detection of persistent and meaningful patterns of disproportionality across multiple years.

The focus group developed recommendations grounded in data analysis and stakeholder consensus. These recommendations were reviewed, vetted, and approved by the State Special Education Advisory Council (SEAC). The resulting minimum n and cell size definitions reflect stakeholder input, are aligned with federal expectations, and ensure that OSPI appropriately analyzes data and identifies LEAs with significant discrepancy in a manner that is both statistically sound and equity focused.

By grounding recommendations in longitudinal data analysis and stakeholder review of real-world impacts, Washington ensured that the final definitions appropriately balance methodological rigor with equity considerations. As a result, the adopted n sizes support consistent and defensible identification of LEAs with significant discrepancy, including smaller LEAs, while maintaining confidence that identified disparities reflect systemic issues rather than statistical noise.

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.

There was no change from the prior SPP/APR reporting period for minimum n or cell sizes.

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

N/A--There was no change from the prior SPP/APR reporting period for minimum n or cell sizes.

If yes, the state may only include, in both the numerator and the denominator, LEAs that met the state-established n/cell size. Report the number of LEAs excluded from the calculation as a result of the requirement. 36

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
29	0	251	0.00%	0.00%	0.00%	Met target	No Slippage

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

X	Compare the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs among LEAs in the State
	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

Washington calculates significant discrepancy in the rates of long-term suspensions and expulsions for students with IEPs through the following steps:

1. Calculate each district's rate of suspension/expulsion for greater than 10 days for students with IEPs for each race/ethnicity group (total number of students with IEPs from that race/ethnicity group who were suspended/expelled for greater than 10 days in the district divided by the total number of students with IEPs from that race/ethnicity group in the district). This process will result in each district's rate of suspensions/expulsions for students with IEPs for each race/ethnicity group.
2. Calculate each district's rate of suspension/expulsion for greater than 10 days for students without IEPs (total number of students without IEPs who were suspended/expelled for greater than 10 days in the district divided by the total number of students without IEPs in the district). This process will result in each district's rate of suspensions/expulsions for students without IEPs.
3. Subtract the district rate of suspension/expulsion for greater than 10 days for all students without IEPs from the district rate of suspension/expulsions for students with IEPs for each race/ethnicity group. The result is the rate difference.
4. Districts with a rate difference of 2.0 or greater for any race/ethnicity group are identified as having a significant discrepancy.
5. Districts must have a minimum cell size of at least two students with out-of-school disciplinary incidents of more than 10 days, and a minimum "n" size of 10 total students with IEPs is required in order to be considered for significant discrepancy.
6. Thirty-six districts were excluded from the FFY 2024 calculation as a result of not meeting these minimum cell and "n" size requirements.

Rate difference = (# SWD from a specific race/ethnicity group with out of school suspensions for >10 days divided by all SWD from that race/ethnicity group in the district) minus (# Students without disabilities with out of school suspensions >10 days divided by all students without disabilities in the district)

A significant discrepancy is defined as a rate difference of 2.0 or more for any race/ethnicity group, with a minimum of two students with disciplinary incidents (out of school suspensions of more than 10 days) that school year.

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.

Based on the methodology described in the section titled "Definition of Significant Discrepancy and Methodology", 29 districts had a rate difference over 2.0 and were therefore identified as having a significant discrepancy in FFY 2024 (using school year 2023-24 data).

All 29 districts were required to complete a self-review of discipline, and other related policies, procedures, and practices, as part of a disproportionality self-assessment (Disproportionality Workbook). In the self-assessment, the districts were required to report on their review of policies procedures, and practices; identify potential root causes for the significant discrepancy; and describe their plan for addressing the discrepancy in the upcoming school year. If revisions were made to the district's policies, procedures, or practices as a result of this review, the district was required to describe those revisions in the self-review. Revisions to formal, written special education policies and procedures were also required to be submitted for OSPI review.

OSPI special education program supervisors reviewed the results of each district's self-assessment and provided written feedback, technical assistance, and required follow-up actions, as appropriate, to ensure that identified root causes were addressed and that proposed district actions were aligned with evidence-based practices and compliance requirements.

Data collections conducted through the general supervisory system were analyzed to verify district-reported results. The state also selected a sampling of student records from the discrepant cells as part of WISM systems analysis reviews in designated districts. The state did not identify any noncompliance with IDEA Part B requirements as a result of the review required by 34 C.F.R. §300.170(b).

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

Correction of Findings of Noncompliance Identified in FFY 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.

Washington State has not adopted procedures permitting LEAs to correct noncompliance prior to the issuance of a finding.

4B—Prior FFY Required Actions

None

4B—OSEP Response

None

4B—Required Actions

None

INDICATOR 5: EDUCATION ENVIRONMENTS (CHILDREN FIVE (KINDERGARTEN)–21)

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

Percent of children with Individualized Education Programs (IEPs) aged five who are enrolled in kindergarten and aged six 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 United States Code (U.S.C.) 1416(a)(3)(A)]

Data Source

Same data as used for reporting to the U.S. Department of Education (Department) under Section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in ED*Facts* file specification FS002.

Measurement

A. Percent = [(# of children with IEPs aged five who are enrolled in kindergarten and aged six through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged five who are enrolled in kindergarten and aged six through 21 with IEPs)] times 100.
B. Percent = [(# of children with IEPs aged five who are enrolled in kindergarten and aged six through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged five who are enrolled in kindergarten and aged six through 21 with IEPs)] times 100.
C. Percent = [(# of children with IEPs aged five who are enrolled in kindergarten and aged six through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged five who are enrolled in kindergarten and aged six through 21 with IEPs)] times 100.

Instructions

Sampling from the state's Section 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

Part	Year	Baseline data
A	2020	59.99%
B	2020	12.15%
C	2020	0.98%

Historical Data

Part	FFY	2019	2020	2021	2022	2023
A	Target >=	57.00%	60.00%	61.70%	63.40%	65.10%
A	Data	57.73%	59.99%	62.37%	63.41%	65.05%
B	Target <=	12.75%	12.20%	12.13%	12.06%	11.99%
B	Data	12.43%	12.15%	11.65%	11.36%	10.84%
C	Target <=	1.00%	1.00%	1.00%	0.99%	0.99%
C	Data	0.95%	0.98%	0.96%	0.94%	0.89%

Targets

FFY	2024	2025
Target A >=	66.80%	68.50%
Target B <=	11.92%	11.85%
Target C <=	.98%	.97%

Targets: Description of Stakeholder Input

See Broad Stakeholder Input in the Introduction for a detailed description.

Prepopulated Data

Source SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74), Date 07/30/2025

Description	Data
Total number of children with IEPs aged 5 (kindergarten) through 21	153,286
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	101,509
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	16,481
c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	1,019
c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	203
c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	174

Select yes if the data reported in this indicator is 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 five (kindergarten) through 21 served	Total number of children with IEPs aged five (kindergarten) through 21	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A. Number of children with IEPs aged five (kindergarten) through 21 inside the regular class 80% or more of the day	101,509	153,286	65.05%	66.80%	66.22%	Did not meet target	No Slippage
B. Number of children with IEPs aged five (kindergarten) through 21 inside the regular class less than 40% of the day	16,481	153,286	10.84%	11.92%	10.75%	Met target	No Slippage
C. Number of children with IEPs aged five (kindergarten) through 21 inside separate schools, residential facilities, or homebound/ hospital placements.	1,396	153,286	0.89%	0.98%	0.91%	Met target	No Slippage

5—Prior Federal Fiscal Year (FFY) Required Actions

None

5—OSEP Response

None

5—Required Actions

None

INDICATOR 6: PRESCHOOL ENVIRONMENTS

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

Percent of children with Individualized Education Programs (IEPs) aged three, four, and five years 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 United States Code (U.S.C.) 1416(a)(3)(A)]

Data Source

Same data as used for reporting to the U.S. Department of Education (Department) under Section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in ED*Facts* file specification FS089.

Measurement

A. Percent = [(# of children ages three, four, and five years 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 three, four, and five years with IEPs)] times 100.
B. Percent = [(# of children ages three, four, and five years with IEPs attending a separate special education class, separate school, or residential facility) divided by the (total # of children ages three, four, and five years with IEPs)] times 100.
C. Percent = [(# of children ages three, four, and five years with IEPs receiving special education and related services in the home) divided by the (total # of children ages three, four, and five years with IEPs)] times 100.

Instructions

Sampling from the state's Section 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 three, four, and five years, 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 three, four, and five years, 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 State Performance Plan (SPP) / Annual Performance Report (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

Historical Data—6A, 6B

Measure by Part	2019	2020	2021	2022	2023
A Target >=	29.20%	21.04%	23.24%	25.44%	27.64%
A Data	26.39%	21.04%	25.71%	31.09%	33.17%
B Target <=	37.80%	53.50%	51.40%	49.30%	47.20%
B Data	39.03%	53.50%	49.41%	43.28%	40.95%
C Target <=	n/a	1.00%	0.90%	0.80%	0.70%
C Data	n/a	0.53%	0.59%	0.45%	0.46%

Targets: Description of Stakeholder Input

See Broad Stakeholder Input above in the Introduction for a detailed description.

Targets

Please select if the state wants to set baseline and targets based on individual age ranges (i.e., separate baseline and targets for each age), or inclusive of all children ages three, four, and five years. Inclusive Targets

Please select if the state wants to use target ranges for 6C. Target Range not used

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

Part	Baseline year (FFY)	Baseline data
A	2020	21.04%
B	2020	53.50%
C	2020	0.53%

Inclusive Targets—6A, 6B, 6C

FFY	2024	2025
Target A >=	29.84%	32.04%
Target B <=	45.10%	43.00%
Target C <=	0.60%	0.50%

Prepopulated Data

Data Source: SY 2024-25 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) Date: 7/30/2025

Description	3	4	5	3 through 5—Total
Total number of children with IEPs	**4,448**	**6,804**	**1,224**	**12,476**
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	1,345	2,534	430	4,309
b1. Number of children attending separate special education class	1,865	2,386	413	4,664
b2. Number of children attending separate school	134	136	36	306
b3. Number of children attending residential facility	1	9	0	10
c1. Number of children receiving special education and related services in the home	30	32	4	66

Select yes if the data reported in this indicator is not the same as the state's data reported under Section 618 of the IDEA. NO

FFY 2024 SPP/APR Data—Aged Three through Five

Preschool environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	4,309	12,476	33.17%	29.84%	34.54%	Met target	No Slippage
B. Separate special education class, separate school, or residential facility	4,980	12,476	40.95%	45.10%	39.92%	Met target	No Slippage
C. Home	66	12,476	0.46%	0.60%	0.53%	Met target	No Slippage

6—Prior FFY Required Actions

None

6—Office Of Special Education Programs (OSEP) Response

None

6—Required Actions

None

INDICATOR 7: PRESCHOOL OUTCOMES

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

Percent of preschool children aged three through five with Individualized Education Programs (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 United States Code (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:

- 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.
- 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.
- 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.
- 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.
- 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 percentage substantially increased their rate of growth by the time they turned six 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 six 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.

In the measurement include, in the numerator and denominator, only children receive 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 federal fiscal year (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 Center) 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 six or seven 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

Part	Baseline Year	Data
A1	2020	87.01%
A2	2020	38.14%
B1	2020	86.01%
B2	2020	37.56%
C1	2020	86.65%
C2	2020	48.06%

Historical Data

Part	FFY 2019	2020	2021	2022	2023
A1 Target >=	83.70%	87.00%	87.40%	87.90%	88.30%
A1 Data	89.59%	87.01%	87.29%	83.72%	85.89%
A2 Target >=	51.20%	38.10%	39.30%	40.40%	41.60%
A2 Data	44.43%	38.14%	40.69%	37.85%	37.73%
B1 Target >=	82.70%	86.00%	86.50%	87.00%	87.50%
B1 Data	88.77%	86.01%	86.71%	83.60%	84.26%
B2 Target >=	52.20%	37.56%	38.80%	40.10%	41.30%
B2 Data	44.77%	37.56%	38.39%	38.30%	37.60%
C1 Target >=	81.70%	86.65%	87.10%	87.50%	87.80%
C1 Data	88.91%	86.65%	86.81%	82.63%	82.92%
C2 Target >=	66.20%	48.06%	49.30%	50.40%	51.60%
C2 Data	54.74%	48.06%	48.92%	45.92%	44.71%

Targets

FFY	2024	2025
Target A1 >=	88.70%	89.20%
Target A2 >=	42.70%	43.90%
Target B1 >=	88.00%	88.50%
Target B2 >=	42.50%	43.80%
Target C1 >=	88.20%	88.60%
Target C2 >=	52.70%	53.90%

Targets: Description of Stakeholder Input

See Broad Stakeholder Input above in the Introduction for a detailed description.

FFY 2024 State Performance Plan (SPP) / Annual Performance Report (APR) Data

Number of preschool children aged three through five with IEPs assessed: 5,961

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	92	1.54%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	514	8.62%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,083	51.72%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,688	28.32%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	584	9.80%

Outcome A data

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 six years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)*	4,771	5,377	85.89%	88.70%	88.73%	Met target	No Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned six years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	2,272	5,961	37.73%	42.70%	38.11%	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	86	1.44%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	526	48.82%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	3,044	51.07%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,822	30.57%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	483	8.10%

Outcome B data

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 six years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)*	4,866	5,478	84.26%	88.00%	88.83%	Met target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned six years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	2,305	5,961	37.60%	42.50%	38.67%	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	112	1.88%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	508	8.52%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	2,670	44.79%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1,872	31.40%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	799	13.40%

Outcome C data

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 six years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)*	4,542	5,162	82.92%	88.20%	87.99%	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 six years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	2,671	5,961	44.71%	52.70%	44.81%	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

Was Sampling Used? NO

Did you use the ECO Center COS Form process? (Yes / No) YES

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

The Early Childhood Technical Assistance Center: Improving Systems, Practices and Outcomes for Young Children with Disabilities and their Families.

Washington state adopted the instruments and instructions initially developed by the ECO Center. The state continues to use the instrument (7-point scale) and training modules developed jointly by the Center for IDEA Early Childhood Data Systems (DaSy) and the Early Childhood Technical Assistance Center (ECTA Center).

The COS process is a team process for summarizing information on a child's functioning in each of the three child outcome areas using a 7-point scale. With the COS process, a team of individuals who are familiar with a child (including parents) can consider multiple sources of information about his/her functioning, including parent/provider observation and results from direct assessment. Additionally, the COS process allows early intervention and early childhood special education programs to synthesize information about children across different assessment tools to produce data that can be summarized across programs in the state, as well as across states for a national picture. The ECTA Center developed a print resource providing an Overview of the COS Process.

Beginning with the 2020–21 school year Washington added all the elements of the COS to the statewide student information system. Any student with an IEP in grade level preschool (PreK) was required to submit COS data to this system This was the first time to receive this detailed information as it included all corresponding demographic data for each of these students, in addition to the COS data. The validations in place in Washington's student information system insured all data elements were received and met the requirements associated with each element (as outlined in the ECTA document "Calculating OSEP [Office of Special Education Programs] Categories from COS Responses"). By adding these elements to Washington's statewide student information system, the manual checking by the State Part B Data Manager of missing elements or duplicate students has been eliminated, saving time, and ensuring a higher quality of collected data.

7—Prior FFY Required Actions

None

7—Office Of Special Education Programs (OSEP) Response

None

7—Required Actions

None

INDICATOR 8: PARENT INVOLVEMENT

Instructions And Measurement

Monitoring Priority

Free, appropriate public education (FAPE) in the least restrictive environment (LRE).

Results Indicator

Percent of parents with a child receiving special education services report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.
[20 United States Code (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

Do you use a separate data collection methodology for preschool children? No

Targets: Description of Stakeholder Input

See Broad Stakeholder Input above in the Introduction for a detailed description.

Baseline year	Baseline data
FFY 2011	21.10%

Historical Data

FFY	2019	2020	2021	2022	2023
Target >=	22.50%	33.10%	33.80%	34.60%	35.30%
Data	32.34%	41.99%	30.16%	28.16%	30.00%

Targets

FFY	2024	2025
Target >=	36.00%	36.80%

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
859	1,130	30.00%	36.00%	76.02%	Met target	No Slippage

Provide reasons for slippage, if applicable

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.

Washington state does not use a separate data collection methodology for preschool children. The state continues to use a single instrument for students ages 3–22*; therefore, there is only one data set for baseline data, targets, and actual target data.

*The state now uses ages 3–22 instead of 3–21 due to a recent change in state law.

The number of parents to whom the surveys were distributed: 12,142

Percentage of respondent parents: 9.31%

Response Rate

FFY	2023	2024
Response rate	14.26%	9.31%

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

Include the State's analysis 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.
In spring 2025, Washington conducted a pilot of a new special education survey and associated process. More detailed information regarding the development of the new survey and the spring 2025 pilot is provided later in this indicator. Data from the spring 2025 pilot were used for reporting on Indicator B-8 in this APR. The new survey will be fully implemented in the spring of 2026, and the state will be setting a new baseline for Indicator B-8 in next year's APR based on the results of the spring 2026 implementation.

The State compared the representation by race/ethnicity, grade group, disability, and LRE category in the population of Pilot LEAs to the representation in the respondents using a +/- 3% criteria to

identify over-or under-representativeness. Using this methodology, differences were found by race/ethnicity, grade group, disability, and LRE category. Additionally, data from all cohort districts were systematically reviewed and disaggregated by geographic location (regional Educational Service Districts [ESDs]) and by district size to support internal planning and inform continuous improvement activities.

The categories that were overrepresented are as follows:
- White/Caucasian (+8.61%)
- Grades TK (transitional kindergarten) through 2nd grade (+5.47%)
- Autism (+16.13%)
- Emotional/Behavioral Disability (+7.42%)
- Other Disability Categories (+3.69%)
- Early Childhood LRE aligned to Indicator 6b (+13.54%)

The categories that were under-represented are as follows:
- Hispanic (-5.14%)
- Grades 6-8 (-3.11%)
- Grades 9-12 (-3.65%)
- Communication Disorder (-5.34%)
- Other Health Impairment (-14.74%)
- Specific Learning Disability (-8.86%)
- Early Childhood LRE aligned to Indicator 6a (-12.66%)

All other demographic categories were within +/-3% of the target population. In addition, this year served as a pilot for a new Indicator 8 data collection system, with 43 LEAs participating. The response rate was 9%, which is lower than in the previous three years. However, the pilot year allowed for system improvements and resolution of initial technical issues. We anticipate a higher response rate next year, when the survey will be administered to a representative sample of LEAs.

Due to the low response rate, the small number of participants in LEAs, and differences in the demographic composition of respondents—including race/ethnicity, grade level, primary disability, and educational environment—the data collected during the pilot year is not considered representative.

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

During the 2021-22 school year, Washington convened a Parent Engagement Focus Group, part of the State Design Team (SDT), which engaged in work related to Indicator B-8. The Parent Engagement Focus Group consisted of 51 participants, including three individuals with disabilities and 30 parents/family members of individuals with disabilities. The group also included representatives from all seven federal race/ethnicity groups, tribal partners, advocates, general and special education teachers and administrators, state agency staff, and professional and community organizations. The group's work was focused on the development of the new parent survey tool, as well as methods for implementing the new survey process. This work included analyzing survey

data and response rates and identifying methods for increasing response rates particularly for underrepresented groups.

In developing the new survey tool, the Parent Engagement Focus Group considered multiple strategies to increase participation, including reducing the overall number of survey questions, improving clarity and readability, expanding language translations, offering incentives, and enhancing accessibility across multiple formats and platforms.

This work resulted in a condensed set of survey questions, which was reviewed with the State Special Education Advisory Council (SEAC) in May 2022 and finalized by the end of the 2021–22 school year.

The new survey was piloted during the 2024–25 school year, and the results are presented above. Following the pilot administration, participating local education agencies (LEAs) completed a comprehensive feedback survey to assess their implementation experiences. Feedback areas included:

- Ease of use of the survey portal and recommendations for improvement
- Clarity and usefulness of survey administration instructions
- Effectiveness of notification guidance, materials, and available languages
- Factors that positively or negatively influence response rates
- Quality and timeliness of technical assistance provided by OSPI
- Feedback received from families regarding the survey experience

Findings from the pilot feedback survey informed additional refinements to the survey process. In response to the feedback from participating in LEAs, OSPI made targeted enhancements to the survey administration process, including revisions to guidance materials, clarification of notification procedures, and expansion of available language translations. Most notably, Marshallese was added as a survey translation to better support meaningful participation from families in communities with significant Marshallese-speaking populations. These refinements were implemented to reduce linguistic barriers, support equitable access to the survey, and improve the overall quality and representativeness of response data in future administrations.

While the pilot survey results were not fully representative of the state's demographic diversity, the state views the pilot as a critical step in an iterative development process. Based on the enhancements informed by stakeholder feedback—including expanded language access and improved administration supports—the state anticipates increased participation and more representative survey results as the survey is implemented statewide in the 2025–26 school year.

To ensure that future response data are representative of the state's demographic diversity, including race/ethnicity, language, disability status, and geographic region, Washington will implement targeted outreach and administration strategies informed by pilot findings. These strategies include expanded language access, enhanced LEA guidance and technical assistance, and ongoing analysis of response rates by demographic subgroup to guide continuous improvement.

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

Strategies for increasing parent survey response rates moving forward include multiple, coordinated efforts designed to reduce participation barriers and support equitable access for all

families. These strategies include providing a survey in the 13 most commonly spoken languages in Washington to address linguistic barriers and ensure families can meaningfully participate in their preferred language. The state has also reduced the overall number of survey questions and improved clarity and readability to minimize respondent burden and make the survey easier to complete.

To further improve access, OSPI has implemented a new parent survey portal that includes clear, standardized instructions and multiple methods for accessing and submitting the survey, including mobile-friendly options. Families may also request additional assistance as needed, such as paper copies, interpretation services, or other individualized support, to ensure participation is accessible regardless of technology access or disability-related needs.

In addition, OSPI will work directly with LEAs to support consistent and timely parent notification and outreach. This includes providing LEAs with guidance, templates, and materials to communicate the purpose and importance of the survey, emphasizing how parent feedback informs improvements to parent engagement practices, special education services, and student outcomes at both the state and local levels. LEAs will be encouraged to use multiple outreach methods and to engage trusted school and community staff to promote participation among historically underrepresented groups.

These strategies are expected to increase participation among historically underrepresented groups, including families of students in higher grade levels, by addressing common barriers such as limited time, reduced school contact, language access needs, and technology constraints. Improved survey accessibility, mobile-friendly options, and streamlined survey design support participation by families who may have fewer opportunities for in-person engagement as students age. Additionally, strengthened LEA outreach guidance encourages intentional communication with families of secondary students through multiple channels, helping ensure that families remain informed, engaged, and aware of the importance of their input regardless of student grade level.

The state believes that this comprehensive set of strategies—particularly expanded language access, improved survey design, and accessibility, and strengthened LEA outreach and support—will lead to increased overall response rates and improved representativeness of parent survey data moving forward.

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.

Nonresponse bias measures the differences in opinions between respondents and non-respondents in meaningful ways, such as the positivity of responses. A few things can be examined to determine nonresponse bias. One is the overall response rate. The higher the response rate, the less likely nonresponse bias will occur. The response rate is 9%, which is lower than years' past. It is possible that those parents who did not respond are different in some meaningful way in their level of positivity from those who did respond. Thus, we proceeded with the next two ways for examining nonresponse bias.

Second, the representativeness of the responses can be examined. Significant differences were found in response rates by race/ethnicity, disability, grade group, and LRE, further, parents of

students in grades TK-2 were slightly more positive than parents of students in grades 9-12. This may have resulted in a slightly inflated parent involvement rate relative to what would have been observed had the responses been fully representative by grade group, which suggests that non-response bias might be present. While the potential for non-response bias exists, it is important to note that parents across the Pilot LEAs from across the state responded to the survey.

Third, we can compare the responses of parents who responded early in the process to those who responded later in the process. The idea being that perhaps those who do not immediately respond are different in some meaningful way than those who respond immediately. When examining results no differences were found between parents who responded early to the administration compared to those who responded later in the administration. Therefore, we can conclude that nonresponse bias is potentially present.

To address potential nonresponse bias and encourage responses from a broad cross section of parents with disabilities, OSPI implemented multiple targeted strategies informed by stakeholder input and pilot feedback. These included:

Expanded language access: Moving forward, the survey will be provided in the 13 most commonly spoken languages in Washington, including Marshallese, to reduce linguistic barriers and support participation by families from diverse cultural and language backgrounds.

Improved survey design and accessibility: The survey was streamlined to reduce respondent burden, with clearer and more readable questions, mobile-friendly options, and multiple submission methods (online, paper, or request-based formats) to ensure accessibility for families regardless of technology access or disability-related needs.

Targeted LEA outreach and support: OSPI provided LEAs with guidance, templates, and communication materials to notify parents about the survey and emphasize its importance. LEAs were encouraged to engage multiple outreach methods and trusted school and community staff to reach historically underrepresented groups.

Focus on underrepresented populations: Particular attention was given to engaging families of students in higher grades and other groups with lower historical response rates. Strategies included tailored messaging, additional reminders, and outreach emphasizing the value of parent input for improving special education services

These steps are expected to increase participation across demographic groups, minimize nonresponse bias, and improve the representativeness of the data as the survey is implemented statewide.

Was Sampling Used? No

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	YES
If yes, provide a copy of the survey	WA Parent Survey 2024-25 English

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

Representativeness of FFY 2024 Indicator 8 Data:

The State determined that the FFY 2024 Indicator 8 data are not representative of the demographics of children receiving special education services statewide.

To assess representativeness, the State compared the demographic composition of survey respondents to the population of students with disabilities served by the pilot LEAs. Representation was analyzed by race/ethnicity, grade group, primary disability category, and least restrictive environment (LRE) using a ±3 percent threshold to identify over- or under-representation. In addition, data were reviewed across all pilot districts and disaggregated by geographic region (ESD) and district size.

Using this methodology, differences were identified across multiple demographic categories. Respondents were over-represented in the following groups: White/Caucasian students, students in grades TK–2, students with autism, emotional/behavioral disability, and other disability categories, and students in early childhood settings aligned with Indicator 6b. Respondents were under-represented among Hispanic students, students in grades 6–8 and 9–12, students with communication disorders, other health impairment, and specific learning disability, as well as students in early childhood settings aligned with Indicator 6a. All remaining demographic categories fell within ±3 percent of the target population.

The FFY 2024 data were collected during the pilot year for a new Indicator 8 data collection system, with participation from 43 LEAs. The overall response rate was 9 percent, which was lower than in the previous three years. Due to the low response rate, the limited number of participating LEAs, and observed differences in the demographic composition of respondents by race/ethnicity, grade level, disability category, and educational environment, the State concluded that the FFY 2024 data are not representative.

Actions to Address Representativeness:

The State is implementing multiple coordinated strategies to improve response rates and the representativeness of future Indicator 8 data. These actions include expanding survey translations to the 13 most commonly spoken languages in Washington; reducing the number of survey questions and improving clarity and readability to decrease respondent burden; and implementing a new parent survey portal with clear instructions and multiple access options, including mobile-friendly formats. Additional support, such as paper surveys and interpreter assistance, will be provided upon request to further reduce participation barriers.

The State will also work directly with LEAs to strengthen outreach and parent communication, including providing guidance, templates, and materials that emphasize the importance of parent feedback in improving parent engagement, special education services, and student outcomes. LEAs will be encouraged to use multiple notification methods and leverage trusted school and community partners to reach historically underrepresented families.

Based on these improvements and the planned statewide administration of the survey to a representative sample of LEAs in FFY 2025, the State anticipates increased response rates and improved demographic representativeness in future Indicator 8 data submissions.

8—OSEP Response

None

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 United States Code (U.S.C.) 1416(a)(3)(C)]

Data Source

State's analysis, based on state's child count data collected under Individuals with Disabilities Education Act (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, which 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 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

If the State has established a minimum n and/or cell size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of districts totally excluded from the calculation as a result of this requirement because the district did not meet the minimum n and/or cell size for any racial/ethnic group.

Consider using multiple methods in calculating disproportionate representation of racial and ethnic groups to reduce the risk of overlooking potential problems. Describe the method(s) used to calculate disproportionate representation.

Provide the number of districts that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups identified with disproportionate representation of racial and ethnic groups in special education and related services and the number of those districts identified with disproportionate representation that is the result of inappropriate identification.

Targets must be 0%.

Provide detailed information about the timely correction of 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

Baseline year	Baseline data
FFY 2020	0.00%

Historical Data

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. 8

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
8	0	275	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 state has a process in place for reviewing all districts and educational service agencies in the state each year with regard to disproportionate representation. The first step of this process includes a data analysis of all districts conducted by the Office of Superintendent of Public

Instruction (OSPI). The state utilizes risk ratios or alternate risk ratios (RR) for the purpose of determining whether the district has met the state-defined threshold for disproportionate representation:

Over-representation: RR = 2.0 or greater for three consecutive years in the same race/ethnicity group, with a minimum cell size (numerator) of 10 and a minimum "n" size (denominator) of 20.

The source data used to calculate the RRs for FFY 2024 were the Total Enrollment Report submitted by every district in the state in October 2024, and the November 2024 Federal Special Education Child Count and Least Restrictive Environment (LRE) Report submitted by every district in the state.

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.

Using the criteria established above, the state determined that eight districts were identified as meeting the data threshold for disproportionate representation under Indicator B-9. The state analyzed the eight districts identified through the FFY 2024 data review as having disproportionate representation to determine whether the disproportionate representation was the result of inappropriate identification. The identified districts were required to complete a self-assessment (Disproportionality Workbook). As part of the self-assessment, districts were required to conduct a self-review of their policies, procedures, and practices related to child finding, referral, evaluation, and eligibility. The self-assessment also required an analysis of potential causal factors for the identified disproportionality and a description of the district's plan to address the disproportionality in the upcoming school year.

OSPI special education program supervisors reviewed the results of each district's self-assessment, including the district's self-review of child find, referral, evaluation, and eligibility policies, procedures and practices, and provided written feedback, technical assistance, and required follow-up actions, as appropriate, to ensure that identified root causes were addressed and that proposed district actions were aligned with evidence-based practices and compliance requirements.

Data collections conducted through the state's general supervisory system were also analyzed to verify district-reported results. The state also completed a comprehensive student record review within the disproportionate cells across designated districts.

Following this process, the state determined that all eight identified districts were in compliance with child find, eligibility, and evaluation requirements, and that the disproportionate representation of racial and ethnic groups in special education within these districts was not the result of inappropriate identification.

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

9—Prior FFY Required Actions

None

9—OSEP Response

None

9—Required Actions

None

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 United States Code (U.S.C.) 1416(a)(3)(C)]

Data Source

State's analysis, based on state's child count data collected under Individuals with Disabilities Education Act (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, which 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

Baseline year	Baseline data
FFY 2020	0.00%

Historical Data

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. 18

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
50	0	265	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 state has a process in place for reviewing all LEAs in the state each year with regard to disproportionate representation. The first step of this process includes a data analysis of all LEAs conducted by the Office of Superintendent of Public Instruction (OSPI). The state utilizes risk ratios and alternate risk ratios (RR) for the purpose of determining whether the LEA has met the state-defined threshold for disproportionate representation:

Over-representation: RR = 2.0 or greater for three consecutive years in the same race/ethnicity group and disability category, with a minimum cell size (numerator) of 10 and a minimum "n" size (denominator) of 20.

The source data used to calculate the RRs for FFY 2024 were the Total Enrollment Report submitted by every LEA in the state in October 2024, and the November 2024 Federal Special Education Child Count and Least Restrictive Environment (LRE) Report submitted by every LEA in the state.

It is important to note that all LEAs are examined under this indicator regardless of their n or cell sizes. However, LEAs that do not meet the n or cell size after OSPI's initial examination are not required to take any additional actions.

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.

Using the criteria established above, the state determined that 50 districts were identified as meeting the data threshold for disproportionate representation under Indicator B-10. The state analyzed the 50 districts identified through the FFY 2024 data review as having disproportionate representation to determine whether the disproportionate representation was the result of inappropriate identification. The identified districts were required to complete a self-assessment (Disproportionality Workbook). As part of the self-assessment, districts were required to conduct a self-review of their policies, procedures, and practices related to child finding, referral, evaluation, and eligibility. The self-assessment also required an analysis of potential causal factors for the identified disproportionality and a description of the district's plan to address the disproportionality in the upcoming school year.

OSPI special education program supervisors reviewed the results of each district’s self-assessment, including the district's self-review of child find, referral, evaluation, and eligibility policies, procedures and practices, and provided written feedback, technical assistance, and required follow-up actions, as appropriate, to ensure that identified root causes were addressed and that proposed district actions were aligned with evidence-based practices and compliance requirements.

Data collections conducted through the state's general supervisory system were also analyzed to verify district-reported results. The state also completed a comprehensive student record review within the disproportionate cells across designated districts.

Following this process, the state determined that all 50 identified districts were in compliance with child find, eligibility, and evaluation requirements, and that the disproportionate representation of racial and ethnic groups in special education within these districts was not the result of

inappropriate identification.

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

10—Prior FFY Required Actions

None

10—OSEP Response

None

10—Required Actions

None

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

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in the Office of Special Education Programs (OSEP) response for the previous State Performance Plan (SPP) / Annual Performance Review (APR). If the state did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), 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

Baseline year	Baseline data
FFY 2005	98.00%

Historical Data

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	99.37%	99.72%	98.94%	98.92%	99.31%

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
30,144	29,983	99.31%	100%	99.47%	Did not meet target	No Slippage

Number of children included in (a) but not included in (b): 161

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.

A review of both the range of days beyond the timeline the evaluation was completed and the reason(s) for the delay(s) was conducted.

For those 161 children whose evaluations were not completed on time or under federal exception:
- 50.9% (82) were late due to district scheduling and/or staffing issues with no agreement to extend.
- 29.8% (48) agreement to extend did not meet requirements.
- 17.4% (28) were due to data/tracking errors.
- 1.9% (3) were late due to other issues not specified by the district.

Regarding the range of days for the 161 students reported above, a total of 66.5% (107) were delayed 15 school days or less and 33.5% (54) were delayed more than 15 school days.

Further data analysis addressing the reasons for delay and an examination of the range of days by geographic region and district size groupings within each of the nine regions, was completed and discussed with stakeholders. There were no emerging patterns or trends identified in a specific LEA or region. Universal support is provided for the correction of noncompliance to all LEAs not at 100% compliance through the designated regional professional development system.

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).
When the student is to be evaluated to determine eligibility for special education services and the educational needs of the student, the school district shall provide prior written notice to the parent, obtain consent, fully evaluate the student, and arrive at a decision regarding eligibility within:

(a) Thirty-five school days after the date written consent for an evaluation has been provided to the school district by the parent; or

(b) Thirty-five school days after the date the consent of the parent is obtained by agreement through mediation, or the refusal to provide consent is overridden by an administrative law judge following a due process hearing; or

(c) Such other time period as may be agreed to by the parent and documented by the school district, including specifying the reasons for extending the timeline.
(d) Exception. The thirty-five-school-day time frame for evaluation does not apply if:
    (i) The parent of a child repeatedly fails or refuses to produce the child for the evaluation; or
    (ii) A student enrolls in another school district after the consent is obtained and the evaluation has begun but not yet been completed by the other school district, including a determination of eligibility.
(e) The exception in (d)(ii) of this subsection applies only if the subsequent school district is making sufficient progress to ensure a prompt completion of the evaluation, and the parent and subsequent school district agree to a specific time when the evaluation will be completed.

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.
A statewide data collection process was implemented in FFY 2020. All districts continue to report evaluation and eligibility data on all children referred to Individuals with Disabilities Education Act (IDEA) Part B for initial eligibility determination but at the student level using the statewide student database. District staff review and verify each student record submitted for the reporting time period. This indicator is then calculated using the student level data verified by district staff to determine the statewide percentage of on-time initial 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
52	52	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*

OSPI issued a written notification of non-compliance in September 2024 to 52 districts that were determined to not meet the IDEA implementation requirements for Indicator B-11 (i.e., all districts that were not at 100% for this indicator) for the 2023-24 school year per the Indicator B-11 report submitted by districts on July 15, 2024.

Districts identified with non-compliance under Indicator B-11 conducted a root cause analysis to identify the cause(s) for the non-compliance, which included a review of policies, procedures, and/or practices that contributed to the noncompliance. Actions were taken by each district to address the specific, identified root cause(s) and were reported to the Office of Superintendent of Public Instruction (OSPI) through the IDEA Compliance Package (an Education Grants Management System (EGMS) application, due from districts as soon as possible but no later than March 3, 2025).

Actions taken by districts were specific to the identified root cause(s) and included activities such as:

- providing professional development to district staff, including individuals responsible for data reporting, related to the timelines for initial evaluations and allowable exceptions.
- providing written guidance to staff related to the timelines and allowable exceptions.
- updating the district's procedures manual/standard operating procedures.
- implementing a new district practice or form to timely document an agreement to extend the evaluation timeline.
- implementing additional internal controls (i.e., supervision and oversight) to ensure the accuracy of data reporting for Indicator B-11 prior to submission of the data to OSPI; etc.

In order to verify that the districts corrected the identified non-compliance with the specific regulatory requirement(s) (systemic compliance) related to C.F.R. §300.301(c)(1), verification activities were conducted by special education administrators from the district's regional Educational Service District (ESD), in partnership with OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and observations. The verification also included a review of documentation, including updated data reports for the 2024-25 school year showing evidence of timely initial evaluations; student records; information from the district's student information system; guidance documents provided to staff; professional development materials and attendee rosters; updated/revised policies, procedures, and practices manuals; staff meeting agendas; and more.

A detailed description of the identified root cause(s), the specific actions taken to correct the systemic non-compliance, and the documentation and activities completed to verify the systemic correction, were submitted by district's and ESD administrators through the IDEA Compliance Package (due from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative if any additional documentation, information, or evidence was needed to validate the correction of the identified non-compliance. The results of these validations showed 100% compliance; all 52 districts were correctly implementing the specific regulatory requirements found in 34 C.F.R. §300.301(c)(1).

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

The identified districts corrected and accounted for each individual, child-specific instance of noncompliance identified in the notification of findings. Special education representatives from the district's regional ESD, in partnership with OSPI, verified that the 52 districts' corrections, as summarized in the IDEA Compliance Package, were made. Verification activities included on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and/or observations.

The verification also included a review of documentation, including student records, information from the district's student information system, guidance documents provided to staff, professional development materials and attendee rosters, updated procedures manuals, staff meeting agendas, and more.

A detailed description of the identified root cause(s) for each individual, child-specific case of non-compliance, the specific actions taken to correct the child-specific non-compliance, and the

documentation and activities completed to verify the corrections, were submitted by districts and ESD administrators through the IDEA Compliance Package. OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative to obtain any supplementary documentation, information, or evidence necessary to validate the correction of identified child-specific non-compliance instances.

In addition, OSPI's Special Education Data Team confirmed each individual student's status within the CEDARS system to ensure that each evaluation had been completed, although late.

The outcomes of these verifications demonstrated that all 52 districts successfully completed the initial evaluation, albeit late with delays, for every student for whom the initial evaluation was not timely, unless the child was no longer under the district's jurisdiction. OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the child through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI special education complaint investigators.

All identified noncompliance from FFY 2023 for Indicator B-11 was corrected within one year of identification.

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

As described previously in this indicator, OSPI issued a written notification of non-compliance in September 2024 to 52 LEAs that were determined to not meet the IDEA implementation requirements for Indicator B-11 (i.e., all LEAs that were not at 100% for this indicator) for the 2023-24 school year per the Indicator B-11 report submitted by districts on July 15, 2024.

In order to verify that the LEAs corrected the identified non-compliance with the specific regulatory

requirement(s) (systemic compliance) related to C.F.R. §300.301(c)(1), verification activities were conducted by special education administrators from the LEA's regional Educational Service District (ESD), in partnership with OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and observations. The verification also included a review of documentation, including updated data reports for the 2024-25 school year showing evidence of timely initial evaluations; student records; information from the district's student information system; guidance documents provided to staff; professional development materials and attendee rosters; updated/revised policies, procedures, and practices manuals; staff meeting agendas; and more.

A detailed description of the identified root cause(s), the specific actions taken to correct the systemic non-compliance, and the documentation and activities completed to verify the systemic correction, were submitted by LEA's and ESD's administrators through the IDEA Compliance Package (due from LEAs as soon as possible but no later than March 3, 2025 and from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative if any additional documentation, information, or evidence was needed to validate the correction of the identified non-compliance. The results of these validations showed 100% compliance; all 52 LEAs were correctly implementing the specific regulatory requirements found in 34 C.F.R. §300.301(c)(1).

The identified LEAs corrected and accounted for each individual; child-specific instance of noncompliance identified in the notification of findings. Special education representatives from the LEA's regional ESD, in partnership with OSPI, verified that the 52 LEAs' corrections, as summarized in the IDEA Compliance Package, were made. Verification activities included on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and/or observations.

The verification also included a review of documentation, including student records, information from the LEA's student information system, guidance documents provided to staff, professional development materials and attendee rosters, updated procedures manuals, staff meeting agendas, and more.

A detailed description of the identified root cause(s) for each individual, child-specific case of non-compliance, the specific actions taken to correct the child-specific non-compliance, and the documentation and activities completed to verify the corrections, were submitted by LEA and ESD administrators through the IDEA Compliance Package. OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative to obtain any supplementary documentation, information, or evidence necessary to validate the correction of identified child-specific non-compliance instances.

The outcomes of these verifications demonstrated that all 52 districts successfully completed the initial evaluation, albeit late with delays, for every student for whom the initial evaluation was not timely, unless the child was no longer under the LEA's jurisdiction. OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the child through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI special education complaint investigators.

All identified noncompliance from FFY 2023 for Indicator B-11 was corrected within one year of identification.

11—OSEP Response

None

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 IDEA Part C prior to age three years, who are found eligible for Individuals with Disabilities Education Act (IDEA) Part B, and who have an Individualized Education Program (IEP) developed and implemented by their third birthdays.
[20 United States Code (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 IDEA 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 Code of Federal Regulations (C.F.R.) §300.301(d) applied.
e. # of children determined to be eligible for early intervention services under IDEA 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 C.F.R. §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 Local Educational Agencies (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 C.F.R. §303.211 or a similar state option.

Provide detailed information about the timely correction of noncompliance as noted in the Office of Special Education Programs (OSEP) response for the previous State Performance Plan (SPP) / Annual Performance Report (APR). If the state did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 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

Baseline year	Baseline data
FFY 2005	83.00%

Historical Data

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	97.93%	98.43%	92.41%	91.43%	94.75%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 SPP/APR Data

Measure	Data
a. Number of children who have been served in IDEA Part C and referred to Part B for Part B eligibility determination.	3,826
b. Number of those referred determined to be **not** eligible and whose eligibility was determined prior to third birthday.	523
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	3,042
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 C.F.R. §300.301(d) applied.	100
e. Number of children who were referred to IDEA Part C less than 90 days before their third birthdays.	66
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 C.F.R. §303.211 or a similar state option.	0

Calculation data

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 IDEA Part C prior to age three who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. *Calculation: (c)/(a-(b-d-e-f))*	3,042	3,137	94.75%	100%	96.97%	Did not meet target	No Slippage

Number of children who served in IDEA Part C and referred to Part B for eligibility determination that are not included in b, c, d, e, or f. 95

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.

For those 95 children whose evaluations were not completed on time or under federal exception:

- 23.2% (22) were due to district scheduling or staffing issues.
- 31.6% (30) were because the student was referred late to IDEA Part B.
- 28.4% (27) were due to the family and district agreeing to extend the timeline.
- 13.7% (13) were due to the transition meeting not occurring at least 90 days prior to the student's third birthday; and
- 2.1% (2) were due to data entry or tracking errors; and
- 1.0% (1) were due to issues for which districts did not provide explanations.

Regarding the range of days for the 95 students reported above:

- 40% (38) were completed 1–15 calendar days beyond the child's third birthday.
- 14.7% (14) were completed 16–29 calendar days beyond the child's third birthday; and
- 45.3% (43) were completed 30 or more calendar days beyond the child's third birthday.

Further data analysis addressing the reasons for delay and an examination of the range of days by geographic region and district size groupings within each of the nine regions, was completed and discussed with stakeholders. There were no emerging patterns or trends identified with one exception. In addition to the universal support provided for the correction of noncompliance to all LEAs not at 100% compliance, targeted and/or intensive technical assistance will be provided to this LEA through the designated regional professional development system.

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.
A statewide data collection process was implemented in FFY 2020. All districts continue to report evaluation and eligibility data on all children referred to Individuals with Disabilities Education Act (IDEA) Part B for initial eligibility determination but at the student level using the statewide student database. District staff review and verify each student record submitted for the reporting time period. This indicator is then calculated using the student level data verified by district staff to determine the statewide percentage of on-time initial 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
41	41	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*.
OSPI issued a written notification of non-compliance in September 2024 to 41 LEAs that were determined to not meet the IDEA implementation requirements for Indicator B-12 (i.e., all LEAs that were not at 100% for this indicator) for the 2023-24 school year per the Indicator B-12 report submitted by LEAs on July 15, 2024.

In order to verify that the LEAs were correctly implementing the identified regulatory requirements related to C.F.R. §300.124(b), verification activities were conducted by special education administrators from the LEA's regional Educational Service District (ESD), under the direction of OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and observations. The verification included a review of documentation, such as updated data reports for the 2024-25 school year showing evidence of timely Part C to Part B transitions, student records including transition planning meetings, information from the district's student information system, and more.

The LEA and ESD provided a detailed summary and assurances of the actions taken to correct the identified non-compliance and the activities completed to verify the correction of the non-compliance, including verifying the LEA's compliance with IDEA requirements. These were submitted by LEA and ESD administrators through the IDEA Compliance Package (an Education

Grants Management (EGMS) application due from LEAs as soon as possible but no later than March 3, 2025, and from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each LEA and ESD summary to ensure:

- all identified areas of non-compliance within each individual student record had been corrected.
- the dates of correction and verification were included, were in alignment with each other, and were for the current school year (i.e., after the finding was issued).
- the LEA described the identified root cause(s) for any system-level non-compliance, and the actions taken to correct the system directly correlated to the identified root cause(s).
- the sampling of documentation/data reports verified the LEA's compliance with IDEA requirements.
- the ESD verified all actions taken by the LEA; and
- The LEA and ESD administrator provided assurances that the information contained in the summaries was valid and accurate.

If any information was missing or concerns were noted, the OSPI program supervisor contacted the ESD director to let them know what was needed. The ESD director then worked with the LEA to address the OSPI reviewer's concerns.

The results of these validations showed 100% compliance; all 41 LEAs were correctly implementing the specific regulatory requirements found in 34 C.F.R. §300.124(b).

Describe how the state verified that each *individual case* of noncompliance was corrected
The identified LEAs corrected and accounted for each individual, child-specific instance of noncompliance identified in the notification of findings.

LEAs identified with non-compliance under Indicator B-12 conducted a root cause analysis to identify the cause(s) for the non-compliance, which included a review of policies, procedures, and/or practices that contributed to the noncompliance. Actions were taken by each LEA to address the specific, identified root cause(s) and were reported to the Office of Superintendent of Public Instruction (OSPI) through the IDEA Compliance Package (due from LEAs as soon as possible but no later than March 3, 2025). Actions taken by LEAs were specific to the identified root cause(s) and included activities such as:

- partnering with Part C lead agency staff to develop and implement new timelines, procedures, and/or practices for timely notification and transition planning for identified children.
- providing professional development to LEA staff, including individuals responsible for data reporting, related to the timelines for the transition of Part C to Part B and allowable exceptions.
- providing written guidance to staff related to the Part C to Part B transition and allowable exceptions.
- updating the LEA’s procedures manual/standard operating procedures.
- implementing a new LEA practice or form for documenting late Part C to Part B transitions and the reason for the late transition.
- implementing additional internal controls (i.e., supervision and oversight) to ensure the accuracy of data reporting for Indicator B-12 prior to submission of the data to OSPI; etc.

In order to verify that the LEAs corrected the identified non-compliance, verification activities were conducted by special education administrators from the LEA’s regional Educational Service District

(ESD), under the direction of OSPI. Verification activities included on-site visits and/or virtual meetings; staff interviews; data reviews; student record reviews; observations; guidance documents provided to staff; professional development materials and attendee rosters; updated/revised policies, procedures, and practices manuals; staff meeting agendas; and more. The documents reviewed as part of the verification depended on what actions the LEA took to correct. For example, if the LEA conducted a staff training, the ESD verifier reviewed the participant roster, along with the PowerPoint agenda, and/or other training materials, to confirm that the training took place as described in the LEA's correction summary (including date).

A detailed description of the identified root cause(s), the specific actions taken to correct the systemic non-compliance, and the documentation and activities completed to verify the systemic correction, were submitted by LEAs and ESDs administrators through the IDEA Compliance Package (due from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each LEA and ESD summary to ensure:

- all identified areas of non-compliance within each individual student record had been corrected.
- the dates of correction and verification were included, were in alignment with each other, and were for the current school year (i.e., after the finding was issued).
- the LEA described the identified root cause(s) for any system-level non-compliance, and the actions taken to correct the system directly correlated to the identified root cause(s).
- the sampling of documentation/data reports verified the LEA's compliance with IDEA requirements.
- the ESD verified all actions taken by the LEA; and
- The LEA and ESD administrator provided assurances that the information contained in the summaries was valid and accurate.

If any information was missing or concerns were noted, the OSPI program supervisor contacted the ESD director to let them know what was needed. The ESD director then worked with the LEA to address the OSPI reviewer's concerns.

In addition, OSPI's Special Education Data Team confirmed each individual student's status within the CEDARS system to ensure that the C to B transition process had been completed, although late.

The outcomes of these verifications demonstrated that all 41 LEAs successfully completed the transition to Part B, albeit with delays, for every student for whom the transition was not executed promptly, unless the child was no longer under the LEA's jurisdiction. OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the child through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI special education complaint investigators.

All identified noncompliance from FFY 2023 for Indicator B-12 was corrected within one year of identification.

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

As previously described under this indicator, OSPI issued a written notification of non-compliance in September 2024 to 41 LEAs that were determined to not meet the IDEA implementation requirements for Indicator B-12 (i.e., all LEAs that were not at 100% for this indicator) for the 2023-24 school year per the Indicator B-12 report submitted by districts on July 15, 2024.

In order to verify that the LEAs corrected the identified non-compliance with the specific regulatory requirement(s) (systemic compliance) related to C.F.R. §300.124(b), verification activities were conducted by special education administrators from the LEA's regional Educational Service District (ESD), in partnership with OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and observations. The verification also included a review of documentation, including updated data reports for the 2024-25 school year showing evidence of timely Part C to Part B transitions; student records including transition planning meetings; information from the LEA's student information system; guidance documents provided to staff; professional development materials and attendee rosters; updated/revised policies, procedures, and practices manuals; staff meeting agendas; and more.

A detailed description of the identified root cause(s), the specific actions taken to correct the systemic non-compliance, and the documentation and activities completed to verify the systemic correction, were submitted by LEA and ESD administrators through the IDEA Compliance Package (due from LEAs as soon as possible but no later than March 3, 2025 and from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative if any additional documentation, information, or evidence was needed to validate the correction of the identified non-compliance. The results of these validations showed 100% compliance; all 41 LEAs were correctly implementing the specific regulatory requirements found in 34 C.F.R. §300.124(b).

The identified LEAs corrected and accounted for each individual, child-specific instance of noncompliance identified in the notification of findings. Special education representatives from the district's regional ESD, in partnership with OSPI, verified that the 41 LEAs' corrections, as summarized in the IDEA Compliance Package, were made. Verification activities included on-site

visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and/or observations.

The verification also included a review of documentation, including student records, information from the LEA's student information system, guidance documents provided to staff, professional development materials and attendee rosters, updated procedures manuals, staff meeting agendas, evidence of meetings with the Part C lead agency, and more.

A detailed description of the identified root cause(s) for each individual, child-specific case of non-compliance, the specific actions taken to correct the child-specific non-compliance, and the documentation and activities completed to verify the corrections, were submitted by LEA and ESD administrators through the IDEA Compliance Package. OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative to obtain any supplementary documentation, information, or evidence necessary to validate the correction of identified child-specific non-compliance instances.

The outcomes of these verifications demonstrated that all 41 LEAs successfully completed the transition to Part B, albeit with delays, for every student for whom the transition was not executed promptly, unless the child was no longer under the LEA's jurisdiction. OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the child through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI special education complaint investigators.

All identified noncompliance from FFY 2023 for Indicator B-12 was corrected within one year of identification.

12—OSEP Response

None

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 Individualized Education Programs (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, which will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition service 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 United States Code (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, which will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition service 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 State Performance Plan (SPP) / Annual Performance Report (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 Local Educational Agencies (LEAs) for monitoring. If data are from a state database, include data for the entire reporting year.

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

Targets must be 100%.

Provide detailed information about the timely correction of noncompliance as noted in the Office of Special Education Programs (OSEP) response for the previous SPP/APR. If the state did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 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

Baseline year	Baseline data
FFY 2009	66.47%

Historical Data

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	97.47%	99.08%	98.04%	98.17%	75.00%

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
1,838	2,765	75.00%	100%	66.47%	N/A	N/A

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

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

The State implemented a new statewide data collection and reporting process for Indicator B-13 beginning in the 2024–25 school year. This new system represents a significant shift from the State's prior methodology and provides a more comprehensive and accurate measure of statewide compliance. Because the new statewide reporting system differs substantially from the prior sampling-based approach—and because the first year of implementation reflects initial calibration challenges—the State determined that resetting the Indicator B-13 baseline is appropriate. The new baseline will more accurately reflect statewide performance under the revised data collection process and provide a stronger foundation for measuring progress and targeting improvement efforts in subsequent years.

Previously, B-13 compliance was assessed through a limited review of selected local education agencies (LEAs) each year. Under the new system, all LEAs that serve students with IEPs who are turning age 16 or older are required to submit an annual Secondary Transition IEP Components report. To support implementation, OSPI provided extensive resources to LEAs, including detailed guidance documents, rubrics aligned to federal B-13 requirements, training materials, and technical assistance. In addition, OSPI's Program Improvement Supervisors conducted a thorough review of every LEA submission to verify the accuracy of reported compliance and to identify potential discrepancies in compliance determinations.

As part of this report, LEAs receive detailed instructions on selecting a set of student records that are representative of their local demographics. LEA staff then conduct a review of the selected IEPs and report compliance for each of the required secondary transition components. In addition to requiring LEAs to identify whether each component met compliance requirements, the reporting platform also required LEA staff to enter actual information from the student's IEP, such as postsecondary goals and courses of study, to assist OSPI in ensuring the accuracy of the reported compliance calls made by the LEA.

Despite these supports, the first year of statewide implementation revealed variability in the accuracy of LEA compliance determinations. In some cases, districts identified IEP components as compliant when required elements were missing or identified components as noncompliant when they met federal requirements. These inconsistencies reflect the learning curve associated with transitioning to a new, self-reported statewide review process and underscore the need for continued calibration and clarification.

As a result, the State is engaging in targeted follow-up with LEAs and is enhancing and expanding guidance, rubrics, training, and technical assistance. OSPI is also strengthening outreach and coordination with regional special education directors to promote consistent interpretation of B-13 requirements and improve the accuracy of future reporting. These efforts are intended to support both improved data quality and increased compliance with secondary transition requirements.

Do the state's policies and procedures provide that public agencies must meet these requirements at an age younger than 16? NO

Provide additional information about this indicator (optional)
The State is resetting the baseline for Indicator B-13 (Secondary Transition IEP Components) due to the implementation of a new statewide data collection and reporting process beginning in the 2024–25 school year. This new system represents a significant shift from the State's prior methodology and provides a more comprehensive and accurate measure of statewide compliance.

Previously, B-13 compliance was assessed through a limited review of selected local education agencies (LEAs) each year. Under the new system, all LEAs that serve students with IEPs who are turning age 16 or older are required to submit an annual Secondary Transition IEP Components report. As part of this report, LEAs receive detailed instructions on selecting a set of student records that are representative of their local demographics. LEA staff then conduct a review of the selected IEPs and report compliance for each of the required secondary transition components.

Because the new statewide reporting system differs substantially from the prior sampling-based approach—and because the first year of implementation reflects initial calibration challenges—the State determined that resetting the Indicator B-13 baseline is appropriate. The new baseline will more accurately reflect statewide performance under the revised data collection process and provide a stronger foundation for measuring progress and targeting improvement efforts in subsequent years.

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
6	6	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*.
OSPI issued a written notification of non-compliance in September 2024 to six districts that were determined to not meet the IDEA implementation requirements for Indicator B-13 (i.e., all districts that were not at 100% for this indicator) for the 2023-24 school year, as identified through monitoring reviews completed in spring/summer 2024.

Districts identified with non-compliance under Indicator B-13 were required to report on the correction of the non-compliance to the Office of Superintendent of Public Instruction (OSPI) through the IDEA Compliance Package (an Education Grants Management System (EGMS) application, due from districts as soon as possible but no later than March 3, 2025).

In order to verify that the districts corrected the identified non-compliance with the specific regulatory requirement(s) (systemic compliance) related to C.F.R. §300.320(b) and 300.321(b), verification activities were conducted by special education administrators from the district's regional Educational Service District (ESD), in partnership with OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, observations, etc. The verification also included a review of updated documentation, including IEPs developed during the 2024-25 school year, showing evidence that

the district was correctly implementing the applicable regulatory requirements for secondary transition.

A detailed description of the specific actions taken to correct the non-compliance, and the documentation and activities completed to verify the systemic correction, were submitted by districts and ESD administrators through the IDEA Compliance Package (due from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative if any additional documentation, information, or evidence was needed to validate the correction of the identified non-compliance. The results of these validations showed 100% compliance; all six districts were correctly implementing the specific regulatory requirements found in 34 C.F.R. §300.320(b) and 300.321(b).

Describe how the state verified that each *individual case* of noncompliance was corrected. Special education representatives from the district's regional ESD, in partnership with OSPI, verified that the six districts' corrections, as summarized in the IDEA Compliance Package, were made. Verification activities included on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and/or observations.

The verification also included a review of documentation, including each student's current IEP and/or IEP amendment, information from the district's student information system, professional development and/or guidance documents provided to staff, etc.

A detailed description of the specific actions taken to correct each individual, child-specific case of non-compliance, and the documentation and activities completed to verify the corrections, were submitted by districts and ESD administrators through the IDEA Compliance Package. OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative to obtain additional documentation, information, or evidence necessary to validate the correction of the identified child-specific non-compliance.

The outcomes of these verifications demonstrated that all six districts corrected each individual case of non-compliance unless the student was no longer under the district's jurisdiction. OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the child through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI special education complaint investigators.

All identified noncompliance from FFY 2023 for Indicator B-13 was corrected within one year of identification.

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.

Washington State has not adopted procedures permitting LEAs to correct noncompliance prior to the issuance of a finding.

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

As previously described under this indicator, OSPI issued a written notification of non-compliance in September 2024 to six LEAs that were determined to not meet the IDEA implementation requirements for Indicator B-13 (i.e., all LEAs that were not at 100% for this indicator) for the 2023-24 school year, as identified through monitoring reviews completed in spring 2024.

LEAs identified with non-compliance under Indicator B-13 were required to report on the correction of the non-compliance to the Office of Superintendent of Public Instruction (OSPI) through the IDEA Compliance Package (due from LEAs as soon as possible but no later than March 3, 2025).

In order to verify that the LEAs corrected the identified non-compliance with the specific regulatory requirement(s) (systemic compliance) related to C.F.R. §300.320(b) and 300.321(b), verification activities were conducted by special education administrators from the LEA’s regional Educational Service District (ESD), in partnership with OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, observations, etc.

The verification also included a review of updated documentation, including IEPs developed during the 2024-25 school year, showing evidence that the LEA was correctly implementing the applicable regulatory requirements for secondary transition.

A detailed description of the specific actions taken to correct the non-compliance, and the documentation and activities completed to verify the systemic correction, were submitted by LEAs and ESD administrators through the IDEA Compliance Package (due from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each IDEA

Compliance Package and worked with the ESD representative if any additional documentation, information, or evidence was needed to validate the correction of the identified non-compliance. The results of these validations showed 100% compliance; all six LEAs were correctly implementing the specific regulatory requirements found in 34 C.F.R. §300.320(b) and 300.321(b).

The identified LEAs corrected and accounted for each individual, child-specific instance of noncompliance identified in the notification of findings. Special education representatives from the LEA's regional ESD, in partnership with OSPI, verified that the six LEAs' corrections, as summarized in the IDEA Compliance Package, were made. Verification activities included on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and/or observations.

The verification also included a review of documentation, including each student's current IEP and/or IEP amendment, information from the LEA's student information system, professional development and/or guidance documents provided to staff, etc.

A detailed description of the specific actions taken to correct each individual, child-specific case of non-compliance, and the documentation and activities completed to verify the corrections, were submitted by LEAs and ESD administrators through the IDEA Compliance Package. OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative to obtain additional documentation, information, or evidence necessary to validate the correction of the identified child-specific non-compliance.

The outcomes of these verifications demonstrated that all six LEAs corrected each individual case of non-compliance unless the student was no longer under the district's jurisdiction. OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the child through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI special education complaint investigators.

All identified noncompliance from FFY 2023 for Indicator B-13 was corrected within one year of identification.

13—OSEP Response

None

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 Individualized Education Programs (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 United States Code (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.

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 federal fiscal year (FFY) 2015 State Performance Plan (SPP) / Annual Performance Report (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, the Office of Special Education Programs (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 one complete term at any time in the year since leaving high school in an education or training program (e.g., Job Corps, adult education, workforce development program, vocational technical school which is less than a two-year program).

Some other employment as used in measure C means youth have worked for pay or been self-employed for a period of at least 90 days at any time in the year since leaving high school. This includes working in a family business (e.g., farm, store, fishing, ranching, catering services, etc.).

II. Data Reporting

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

Provide the total number of targeted youth in the sample or census.

Provide the actual numbers for each of the following mutually exclusive categories. The actual number of "leavers" who are:

1. Enrolled in higher education within one year of leaving high school.
2. Competitively employed within one year of leaving high school (but not enrolled in higher education).
3. Enrolled in some other postsecondary education or training program within one year of leaving

high school (but not enrolled in higher education or competitively employed); or
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

Measure	FFY	Baseline
A	2013	23.74%
B	2013	52.11%
C	2013	65.13%

Historical Data

Measure	2019	2020	2021	2022	2023
A Target >=	26.20%	19.75%	20.50%	21.40%	22.40%
A Data	19.50%	16.74%	16.87%	17.40%	18.11%
B Target >=	52.21%	54.00%	55.40%	57.40%	59.40%
B Data	52.95%	43.91%	47.61%	58.36%	49.94%
C Target >=	70.00%	73.00%	74.00%	75.50%	77.50%
C Data	72.04%	69.93%	74.27%	72.86%	69.00%

Targets

FFY	2024	2025
Target A >=	23.40%	24.40%
Target B >=	61.40%	63.30%
Target C >=	80.00%	83.00%

Targets: Description of Stakeholder Input

See Broad Stakeholder Input above in the Introduction for a detailed description.

FFY 2024 SPP/APR Data

Measure	Data
Total number of targeted youth in the sample or census	8,585
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	6,519
Response rate	75.93%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	1,360
2. Number of respondent youth who competitively employed within one year of leaving high school	1,714
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)	359
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).	1,215

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.	1,360	6,519	18.11%	23.40%	20.86%	Did not meet target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school.	3,074	6,519	49.94%	61.40%	47.15%	Did not meet target	Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment.	4,648	6,519	69.00%	80.00%	71.30%	Did not meet target	No Slippage

Part B Reasons for slippage, if applicable

The Competitive Employment category decreased by 5.53 percentage points, or 17.38% (from 31.82% to 26.29%). This is the lowest rate of Competitive Employment since FFY 2012 (22.61%). The average Competitive Employment rate over the last 10 years is 32.82%. Given that the rates of Higher Education, Other Education, and Other Employment increased from FFY2023 to 2024, it may be that some leavers who would have engaged in Competitive Employment participated in postsecondary education or Other Employment activities instead.

Please select the reporting option your state is using:

Option 1: Use the same definition as used to report in the FFY 2015 SPP/APR, i.e., competitive employment means that youth have worked for pay at or above the minimum wage in a setting with others who are nondisabled for a period of 20 hours a week for at least 90 days at any time in the year since leaving high school. This includes military employment.

Response Rate

FFY	2023	2024
Response rate	76.73%	75.93%

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

Washington uses +/-3% discrepancy in the proportion of responders compared to target group.

Include the State's analyses of the extent to which the response data are representative of the

demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States must include race/ethnicity in 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.

After the census was conducted, a Response Calculator from the National Technical Assistance Center on Transition: The Collaborative (NTACT:C) was used to measure the representativeness of the respondent group. Calculations were made on the characteristics of disability type, race/ethnicity, gender, English language proficiency, and exit status to determine whether the leavers who responded to the interviews were similar, or different from, the total population of young adults with an IEP who exited school in 2023-24.

According to the NTACT:C Response Calculator, differences between the Respondent Group and the Target Leaver Group of ±3% are important. Negative differences indicate an under-representativeness of the group and positive differences indicate over-representativeness. In the Response Calculator, a red highlight is used to indicate a difference exceeding the ±3% interval.

The NTACT:C Response Calculator includes eight categories of respondents for measuring representativeness: Specific Learning Disability, Emotional Behavioral Disability, Intellectual Disability, All Other Disabilities, Female, Non-white, Limited English Proficiency, and Dropped out. Washington state gathered representative data from all groups.

Respondent Group	Target Leaver Totals	Response Totals	Target Leaver Representation	Respondent Representation	Difference
Overall	**8,585**	**6,519**	N/A	N/A	N/A
Specific Learning Disability	3,984	3,005	46.41%	46.10%	-0.31%
Emotional/Behavioral Disability	425	311	4.95%	4.77%	-0.18%
Intellectual Disability	336	255	3.91%	3.91%	0.00%
All Other Disabilities	3,840	2,948	44.73%	45.22%	0.49%
Female	3,104	2,315	36.16%	35.51%	-0.64%
Non-white Race/Ethnicity	4,355	3,278	50.73%	50.28%	-0.44%
Limited English Proficiency	1,465	1,116	17.06%	17.12%	0.05%
Dropped out	1,155	701	13.45%	10.75%	-2.70%

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

Describe strategies that will be implemented which are expected to increase the response rate year after year, particularly for those groups that are underrepresented.
As in previous years, post-school outcome data collection shows representativeness in areas of disability, gender, and ethnicity. Based on data collected since FFY 2013, this is the fourth consecutive year data were also representative of students who dropped out. While representativeness among these former students decreased by 0.66 percentage points, or 32.35%, from FFY 2023 to FFY 2024 (-2.04% to -2.70), it is still within the threshold of ±3%.

To increase the likelihood of representativeness among students who drop out, starting in FFY 2021 TSF2 users must provide a reason for deleting leavers from the data collection platform (e.g., student returned to school and is no longer considered a leaver). In FFY 2023, CCTS also added additional language to the platform to emphasize that students who drop out are considered leavers and should be surveyed. CCTS reviews all deleted leaver records, follows up with TSF2 users for further information as needed, and adds leaver surveys back to the system if they were deleted incorrectly.

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.

A total of 8,585 youth was eligible for the survey because they were aged 16–21, permanently exited high school in the 2023–24 school year, and had an IEP in place at the time of exit. Among these 8,585 eligible youth, surveys were submitted for 8,499 leavers. Submitted surveys are separated into two categories: Respondents and Non-respondents (Figure 3).

A total of 6,519 Respondents were contacted for the survey and answered the survey questions. A total of 1,980 non-respondents were contacted but did not answer the survey questions. Of the 1,980 non-respondents, 313 were reached by phone but opted not to participate in the survey, and 1,667 were not able to be reached at all. Educators reported a variety of reasons for non-response, including poor or no contact information (15.35%), inability to reach after three attempts (65.25%), declined interview (15.81%), and other reasons (3.59%). Since there was no underrepresentation identified, OSPI concluded that there was no nonresponse bias with respect to the variables the state examined.

A total of 86 eligible leavers were not contacted by school district personnel for the survey. Surveys for these youth were never started and/or not completed, and they are not included in the total count of non-respondents. CCTS is collaborating with school districts to reduce the number of students who are not contacted for the 2026 survey.

The state promotes responses from a broad cross section of youth by supporting school districts in using multiple outreach methods, partnering with districts and community agencies to provide information about the surveys, providing clear and accessible survey materials, and offering follow-up supports to increase participation among youth who have exited secondary school with an IEP.

Was Sampling used? NO

Was a survey used? YES

If yes, is it a new or revised survey? NO

14—Prior FFY Required Actions

None

14—OSEP Response

None

14—Required Actions

None

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 United States Code (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 baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline and targets and report on them in the corresponding State Performance Plan (SPP) / Annual Performance Report (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 Local Educational Agency (LEA) level.

15—Indicator Data

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	47
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	8

Select yes if the data reported in this indicator is not the same as the state's data reported under Section 618 of the IDEA. NO

Targets: Description of Stakeholder Input

See Broad Stakeholder Input above in the Introduction for a detailed description.

Baseline year	Baseline data
FFY 2013	27.66%

Historical Data

FFY	2019	2020	2021	2022	2023
Target >=	26.75%	27.69%	28.63%	29.57%	30.51%
Data	27.14%	26.58%	26.32%	15.79%	13.11%

Targets

FFY	2024	2025
Target >=	31.46%	32.40%

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
8	47	13.11%	31.46%	17.02%	Did not meet target	No Slippage

Provide reasons for slippage, if applicable n/a

15—Prior FFY Required Actions

None

15—Office Of Special Education Programs (OSEP) Response

None

15—Required Actions

None

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 United States Code (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 baseline or targets if the number of mediations is less than 10. In a reporting period when the number of resolution mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding State Performance Plan (SPP) / Annual Performance Report (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 Local Educational Agency (LEA) level.

16—Indicator Data

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	43
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	6
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	28

Select yes if the data reported in this indicator is not the same as the state's data reported under Section 618 of the IDEA. NO

Targets: Description of Stakeholder Input

See Broad Stakeholder Input above in the Introduction for a detailed description.

Baseline

Baseline year	Baseline data
FFY 2013	78.00%

Historical Data

FFY	2019	2020	2021	2022	2023
Target >=	75.60%-85.60%	82.40%	83.40%	84.40%	85.40%
Data	81.40%	81.08%	65.52%	85.11%	88.00%

Targets

FFY	2024	2025
Target >=	86.40%	87.40%

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
6	28	43	88.00%	86.40%	79.07%	Did not meet target	Slippage

Provide reasons for slippage, if applicable
OSPI staff and mediation partners reviewed the data and had discussions to determine reasons for the identified slippage. Following is a description of the potential contributing factors.

In reflecting with mediation partners, the mediators report a sense that many broader cultural factors are impacting mediation from national trends toward polarization, to ever increasing fatigue with government mandates and limited access to their expectations of daily normal life. Mediators report a sense that increasingly participants entered mediation unprepared to mediate or not entering mediation in "good faith" due to heightened levels of stress, frustration, anxiety, and hostility; participants bringing issues that are not necessarily negotiable; and participants entering a mediation with decisions already made and an unwillingness to compromise. While it is difficult to pinpoint an exact of single cause, OSPI believes these factors have influenced a climate in which participants in mediation are less willing to compromise and agree, elements necessary to reaching a written mediation agreement.

OSPI works to ensure that mediation is an accessible dispute resolution option that allows parties a successful outcome through a mediation agreement. In response to what our partners are reporting on the current mediation climate, OSPI is using dispute resolution data, partner feedback, and mediation outcome trends to guide continuous improvement of the state system. OSPI works with our mediation partners to strengthen pre-mediation preparation, including clarifying the purpose of mediation and reinforcing expectations for good-faith participation to support informed engagement by families and districts. In collaboration with mediation providers, OSPI is refining intake and screening processes to ensure mediation is used appropriately and effectively. These actions are intended to improve the quality of participation, increase the likelihood of mutually acceptable agreements, and support the timely resolution of disputes.

Provide additional information about this indicator. (Optional) n/a

16—Prior FFY Required Actions
None

16—Office Of Special Education Programs (OSEP) Response
None

16—Required Actions
None

INDICATOR 17: STATE SYSTEMIC IMPROVEMENT PLAN

Instructions And Measurement

Monitoring Priority

General Supervision.

The state's State Performance Plan (SPP) / Annual Performance Report (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 (SiMR).
- Selection of Coherent Improvement Strategies; and
- Theory of Action.

Phase II: Plan (in addition to the Phase I content (and any updates) outlined above:

- Infrastructure Development.
- Support for Local Educational Agency (LEA) Implementation of Evidence-Based Practices; and
- Evaluation.

Phase III: Implementation and Evaluation (in addition to the Phase I and Phase II content (and 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 SiMR.
B. The rationale for any revisions that were made, or that the state intends to make, to the SSIP as the result of implementation, analysis, and evaluation; and
C. A description of the meaningful stakeholder engagement.

If the state intends to continue implementing the SSIP without modifications, the state must describe how the data from the evaluation support this decision.

A. Data Analysis
As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through 2025 SPP/APR, the state must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The state must report on whether the state meets its target. In addition, the state may report on any additional data (e.g., progress monitoring data) that was 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 supports 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)?
Washington's SiMR is designed to increase the social emotional learning (SEL) performance rates of students with disabilities entering Kindergarten programs. The method of data collection for the SiMR is the Washington Kindergarten Inventory of Developing Skills (WaKIDS) entrance assessment that is administered to all kindergarteners in the fall of each school year. The observational assessment tool used to collect the data is GOLD® by Teaching Strategies® (TSG) which evaluates six domain areas including cognition, literacy, language, physical development, SEL, and mathematics.

Has the SiMR changed since the last SSIP submission? (Yes / No) NO

Is the state using a subset of the population from the indicator (e.g., a sample, cohort model)? (Yes / No) YES

Provide a description of the subset of the population from the indicator.
The State Systemic Improvement Plan (SSIP) Implementation Project, developed to assess the progress of the SiMR target for FFY 2024 included nine Educational Service District (ESD) regions (101, 112, 113, 114, 121, 121,123, 105, 171, and 189). This represents a sample of 36 (up from 34 last year) local districts from ESD regions across the state, hosting children with disabilities enrolled in preschool (PreK) programs between the ages of 3-5 years with Individualized Education Programs (IEPs). This sample is pulled from 295 local districts and 6 State-Tribal Education Compact Schools statewide, representing 14.7% of the population. This is an expansion of the project work first reported in the 2020 submission, which included samples from five ESDs statewide, and 9 local districts. All local school districts recruited into the SSIP Implementation Project are contractors or subcontractors with the Department of Children, Youth, and Families (DCYF) Early Childhood Education and Assistance Program (ECEAP), a State-funded preschool program; Head Start, a federally-funded preschool program; or a locally-funded community preschool program, which in most cases is also a licensed child care facility that enrolls children between 3 and 5 years of age with and without disabilities who have met specific enrollment criteria.

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.
Washington SSIP Theory of Action website

Please provide the data for the specific federal fiscal year (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
FFY 2019	49.00%

Targets

FFY	Current Relationship	2024	2025
Target	Data must be greater than or equal to the target	56.25%	57.75%

FFY 2024 SPP/APR Data

The # of students with IEPs entered K ready in SEL	The # of students with IEPs tested	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
4,285	9,864	52.37%	56.25%	43.44%	Did not meet target	Slippage

Provide reasons for slippage, if applicable.
Although slippage is reported in FFY 2024, participation patterns in the WaKIDS Assessment changed notably. The proportion of kindergarten students with IEPs participating in WaKIDS increased substantially—from 80.2% in FFY 2023 to 94.0% in FFY 2024—indicating improved access and inclusion of students with disabilities in the assessment. In contrast, participation among students without disabilities declined slightly, from 79.4% to 79.2%, representing an overall decrease of approximately 1,000 students assessed statewide. As a result, the reported slippage is not driven by reduced participation among students with disabilities but rather reflects changes in the broader kindergarten population and participation patterns among students without disabilities. Many sites are still in the initial stages of Pyramid Model implementation or are working through levels of implementation and system-level work of this scale requires sustained engagement and time to reach full fidelity. Workforce transitions and the increasing complexity of children's social-emotional needs have further underscored the importance of Washington's SSIP strategies, even as these factors temporarily influence outcome data. As programs move into full implementation, the state anticipates more focused and durable improvements in social-emotional outcomes, consistent with the SSIP's theory of action and long-term vision.

Provide the data source for the FFY 2024 data.
WaKIDS Fall Kindergarten Entry Assessment SEL Domain.

Please describe how data are collected and analyzed for the SiMR.
Each fall, from late August to October 31st, Kindergarten teachers, support staff, and Special Education teachers who provide specially designed instruction (SDI) to kindergarten students, observe, and conduct formative and summative assessments based on children's everyday activities. These include each child's interactions with peers, ability to successfully navigate learning environments, and ability to access adults facilitating learning experiences to meet their personal and academic needs.

Once data is collected, teachers enter student ratings into the Teaching Strategies GOLD® platform by the due date. OSPI data analysts process the data and provide each district with a scorefile that indicates kindergarten readiness for each child based on widely held expectations for 5-year-olds. The term widely held expectations describes the range of knowledge, skills, and abilities that children of a particular age or class/grade typically demonstrate over a year of life (birth through age 3) or from the beginning to the end of a program year (PreK 3, PreK 4, kindergarten, first grade, second grade, third grade).

The data are then shared with the OSPI Special Education Division by the OSPI Assessment Office, and are further disaggregated by race/ethnicity, gender, student program, and characteristics (English language learner [ELL], low income, homeless, students with disabilities). Data are shared

annually via the WA state Report Card, and for purposes of this project, are further disaggregated for SSIP regions and participating local districts. The data collected are then shared by early childhood special education (ECSE) Implementation Specialists for deeper analysis of student and program level outcomes with the participating SSIP Implementation program wide leadership team (PWLT) members. By creating this data review process, the SSIP State Leads (SLs) have ensured a mechanism for the development of data literacy nurtured at the local, regional, and state levels, enabling these different levels of systems to engage in root cause analysis relating to the SiMR outcomes in their program and/or region. The SSIP SLs partner with regional and local districts to align findings of the WaKIDS Fall Kindergarten Entry Assessment (KEA) with other local data, including but not limited to B6 PreK Environments data, B7 PreK Outcomes data, and other data metrics highlighted throughout this report and within the SSIP Evaluation Plan to build a comprehensive improvement plan. Data findings elevated at the state, regional, and local levels are then leveraged for deeper reflection and inevitably create greater collaboration opportunities with communities, Tribal, and other essential cross sector partners to strengthen the systems change.

Optional: Has the state collected additional data (i.e., *benchmark, continuous quality improvement (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 addition to the SiMR, SSIP leadership identified additional assessment measures to reflect input from state, regional, and local school district partners. These prescribed assessment measures include:

- The Local District Preschool Inclusion Self-Assessment (LDPISA). This self-assessment tool evaluates partnerships among schools, early care, and education providers to promote the inclusion of young children with disabilities. Programs are required to conduct an initial assessment to collect a baseline data within eight weeks of the start of the current school year and to then engage planning activities based upon the stage of implementation they are found to be in. Districts are asked to revisit the LDPISA at the end of each school year to assess progress and to support strategic planning for the year to come. LDPISA data reflect changes in children's social-emotional skills over time, including self-regulation, engagement, and adaptive behaviors necessary for successful participation in learning environments.

- The Parent Survey Instrument: Schools Efforts to Partner with Parent Scale: This nationally normed evaluation instrument was administered in correlation to the parent engagement strand of the theory of action annually across all participating programs. This data provides valuable information about the extent of parental involvement within the context of Indicator B-8 on the State Performance Plan. These results indicate how much parents believe that school districts have facilitated their involvement in their child's education to improve student outcomes. The Parent Survey has historically been shared to families of children with IEPs in the SSIP Implementation programs in the spring of each implementation cycle. Specifically for social emotional learning, the parent survey results further indicate progress by capturing family perceptions of their child's social-emotional development and the effectiveness of communication and support.

NOTE: During the 2021-22 school year, Washington convened a Parent Engagement Focus Group, part of the State Design Team (SDT), which worked on developing a new parent survey tool. This group included diverse participants and aimed to increase response rates, especially among underrepresented groups. Considerations for the new tool included discussions on methods for

increasing response rate, such as reducing survey questions, ensuring clarity, offering it in more languages, using incentives, and improving accessibility. The Parent Engagement Group's work led to a condensed set of survey questions, discussed with the state's Special Education Advisory Council (SEAC) in May 2022, and finalized by the end of the 2021-22 school year. In the 2022-23 school year, OSPI collaborated with the TAESE center to plan the implementation process based on the group's recommendations. This involved reviewing other state's processes and issuing a request for proposals to partner with a vendor. During the 24-25 year, Washington piloted the new parent survey with a smaller but representative cohort from Washington state and the results of that pilot parent survey are included later in this report.

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.
WASHINGTON'S STATE SYSTEMIC IMPROVEMENT PLAN (SSIP) EVALUATION

Is the state's evaluation plan new or revised since the previous submission? (Yes / No) No

Provide a summary of each infrastructure improvement strategy implemented in the reporting period:
The iterative nature of responding to statewide data and having a responsive, reflective, and collaborative professional development structure, leads to ongoing infrastructure improvement strategies. The SDT continues to include family and community partner engagement, synchronous and asynchronous facilitated training, coaching, and efforts dedicated to sustainability and scale-up practices. The strategies outlined focus on promoting state, regional, and local district efforts to integrate the frameworks of inclusion, inclusionary practices, and trauma informed care throughout the implementation activities. Many of these activities have transitioned from a training format to more intentional coaching based on regional data and root cause analysis and through feedback/engagement with the SDT. A deeper explanation of the improvement strategies for the 2024 SSIP cycle is as follows:

1) Family and community partners engagement strategies continue to be a priority for the SSIP SLs as efforts continue to be made to increase access to existing State and Federal PreK programs as well as childcare settings. Ongoing focus on family and community partner engagement strategies includes increasing opportunities for participation in cross-sector state work groups, WAPM and ECSE Inclusion Champion training events. Within current grant activities associated with this project, local districts are required to include the representation of families and community partners within their Program-Wide Leadership Teams (PWLTs).

2) Providing synchronous and asynchronous training, and specific professional development around data-based decision making is supporting the learning of early childhood practitioners. An example of targeted and collaborative efforts to drive systems positive systems change is the partnership of the SSIP Regional Leads (RL) with the Regional PreK-3 Coordinators, who are working together to support the increase of general education learning opportunities for

children, prenatal to age 8. Initially funded in fiscal year 2021, this ESSER-funded initiative was designed to support the expansion of Transitional Kindergarten. Building on the existing work of the RLs, PreK–3 Coordinators championed local school districts in implementing inclusive practices aligned with the Washington Pyramid Model (WAPM) to improve student outcomes.

SSIP SLs then worked to build opportunities for proficiency in training content for this group of professionals, using Multi-Tiered System of Supports (MTSS) frameworks. To further enrich the learning opportunities of the local districts, the SSIP RLs and higher education partners started providing training opportunities related to IDEA performance indicators B6 PreK Environments, B7 Child Outcomes, and the WAPM Program Coach and Data Manager Trainings. These learnings, first developed in 2020, have since been moved to a Canvas platform and converted to a learning module to be used as training tools for new and existing ECSE professionals to better understand the relationship between LRE, creating an expansive continuum of placement options, and inclusionary practices. Additionally, to further strengthen the skills of the SSIP RLs and local leaders, OSPI continued its contract with Swan Innovations to examine existing assessment tools and resources to ensure they were culturally affirming, which resulted in a report that was disseminated and shared with the SDT and is an accompanying resource for districts engaging with the WAPM.

3) Focused coaching activities to support implementation remain a critical strategy. The statewide ECSE Inclusion Champions Training and Coaching Network, previously referred to as the WAPM Training and Coaching Network, was initially developed in partnership with OSPI, the University of Washington Haring Center, Regional ESDs, DCYF ECEAP, Head Start, ESIT, and licensed care, to support the implementation and scale up of WAPM. Expanded training opportunities have been supported through federal grants (PreK Development Grant- PDG) and state legislation (Senate House Bill 5237), which prioritizes the dissemination of WAPM instructional practice and data training to providers within licensed childcare, state, and federal PreK programs.

   OSPI also worked to secure contracts with external partners to support the refinement of the ECSE Coaching and Training Network. This was intended to ensure that the RLs have up to date training content as well as access to proprietary training material (Prevent Teach Reinforce for Young Children, Practice Based Coaching, Teaching Pyramid Model Observation Tool), and the support of communities of practice led by statewide leaders in inclusion, Pyramid Model and LEAP Replication practices (starting its transition to BB4B this past year).

   Lastly, with the University of Denver, the SSIP SLs have created a Coaching Practice Guide intended to outline how the stages of implementation science parallel with the coaching and training structures of the SSIP Implementation process. At each stage of implementation, criteria are defined for both the RL and local district to ensure full understanding of their roles and responsibilities. This includes utilization of fidelity metrics, strategies to support in person and remote coaching, and opportunities to bridge technical assistance and professional learning to prepare local districts to scale up and scale out inclusionary practices, MTSS frameworks and more. This document was finalized in the summer of 2025, and includes the structures required to create community inclusion teams and bridges the support of school, home, and community-based programs.

4) An ongoing focus on sustainability and scale-up practices to support knowledge of systems change and leadership practices remains a top priority for the SSIP SDT. An ongoing method of supporting this has been through the engagement of the SSIP RLs monthly to connect with key

SSIP SLs and cross-agency partners to create a community of belonging. The RLs participate in monthly meetings with SLs and cross-agency partners to support coordination, shared learning, and alignment across the SSIP implementation infrastructure. These meetings provide a structured forum for reviewing data, clarifying roles and responsibilities, deepening understanding of implementation stages, and strengthening cross-sector collaboration to support sustainable, inclusive systems change for young children with disabilities.

ECTA's TA experts continued meaningful momentum this past year, expanding their efforts to deepen statewide coherence and quality of inclusive practices. Building on prior work, ECTA collaborated closely with the SSIP SDT to further assess and refine state, program, and community-level practices using the Indicators of High-Quality Inclusion, ensuring fidelity measures are aligned with ongoing implementation needs. This year also brought considerable progress toward the development of a statewide MOU, with a working draft now in place that reflects strengthened cross-agency alignment and shared commitment to improving access to inclusive services for young children with disabilities across Washington's early learning system. In addition, ECTA supported 6 of the 9 SSIP RLs and 36 districts in advancing family and community partnerships through the development of local community inclusion teams. The SSIP SLs also made notable strides in refining the Inclusionary Practice Demonstration Sites, integrating ECSE Inclusion Champions in 4 of the 6 locations, and elevating districts with effective inclusive models from PreK through grade 12 to make the connection between strong and inclusive early learning programs for students with disabilities and outcomes for school aged children. Together, these efforts showcase continued statewide momentum toward reducing silos, elevating high-quality inclusive practices, and strengthening coordinated support for children, families, and educators.

Describe the short-term or intermediate outcomes achieved for each infrastructure improvement strategy during the reporting period including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Please relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up.

The short term and intermediate outcomes achieved for each infrastructure improvement strategy to further aid system change in support of the achievement of the SiMR include:

Improvement Implementation Strategy 1: Strengthening Family and Community Partner Engagement to Support Inclusive Systems

Outcomes Achieved

- Local districts increased both the frequency and depth of family and community partner (CP) engagement, with a clear shift toward co-designing improvement efforts rather than episodic participation.
- Family engagement indicators showed sustained improvement across cohorts, with districts moving from planning to embedded practice as systems matured.
- Access to Regular Early Childhood Programs (RECP) for children with disabilities increased as districts aligned with DCYF ECEAP and Head Start partners, with enrollment of children with IEPs in ECEAP increasing from 11.7% (2018) to 19% (2024).

Related Systems Framework Area(s)
- Governance
- Accountability/Monitoring
- Quality Standards
- Professional Development/Technical Assistance

Measures/Metrics for Achievement
- Local District PreK Inclusion Self-Assessment (LDPISA), particularly family engagement indicators
- ECSE Inclusion Champions End-of-Year Reports (anecdotal and qualitative data)
- Enrollment data for children with IEPs in ECEAP and Head Start programs

How and to Whom Achievement Was Communicated
- Results were reviewed with local district leadership teams, Program-Wide Leadership Teams (PWLTs), SSIP Regional Leads (RLs), and community partners through action planning meetings and Communities of Practice.
- Findings were shared through SSIP coaching calls, regional meetings, and reporting processes connected to PIDS and SSIP monitoring.
- How This Strategy Supports System Change, Sustainability, and the SiMR
- By embedding family and CP engagement into routine district operations, this strategy strengthens inclusive infrastructure and promotes sustained access to high-quality early learning environments.
- Increased collaboration with CPs supports durable systems change that improves social-emotional readiness and access to inclusive settings, which is essential for achieving and sustaining progress toward the SiMR.

Improvement Implementation Strategy 2: Statewide Training & Professional Learning to Build Inclusive and Trauma-Informed Practice

Outcomes Achieved
- Educators, families, and CPs increased knowledge of inclusion, systems change, trauma-informed practices, and evidence-based frameworks such as WAPM, LEAP Replication, and BB4B.
- Regional capacity was strengthened as RLs developed and delivered supplemental training modules responsive to local needs.
- During FFY24, more than 75 synchronous training opportunities were delivered statewide, totaling approximately 300 hours of professional learning.
- Related Systems Framework Area(s)
- Professional Development/Technical Assistance
- Quality Standards
- Governance

Measures/Metrics for Achievement
- LDPISA data indicating increased readiness and capacity to implement inclusive practices
- Training participation records and hours delivered
- Documentation on regional training development and delivery

How and to Whom Achievement Was Communicated
- Training outcomes and participation were shared with SSIP State Leads (SLs), RLs, district

leadership teams, families, and CPs through Communities of Practice, coaching calls, and SSIP reporting mechanisms.
- Regional training resources were maintained in shared repositories to ensure consistency and accessibility.

How This Strategy Supports System Change, Sustainability, and the SiMR
- Consistent statewide training builds shared understanding and common language for inclusion, supporting durable practice change across districts.
- Increased adult capacity directly supports improvements in social-emotional readiness and inclusive participation for children with disabilities, contributing to sustained SiMR progress.

Improvement Implementation Strategy 3: Practice-Based Coaching to Support High-Fidelity Implementation

Outcomes Achieved
- Coaching practices strengthened educator implementation of evidence-based, trauma-informed, and culturally responsive practices.
- All nine ESDs now have at least one certified WAPM Regional Lead, expanding statewide coaching capacity.
- Coaching alignment improved with the adoption of the WA State Coaching Practice Guide in FFY24.

Related Systems Framework Area(s)
- Professional Development/Technical Assistance
- Accountability/Monitoring
- Quality Standards

Measures/Metrics for Achievement
- Fidelity tools such as TPOT and BIRS
- Documentation of WAPM certification and co-facilitation with master trainers
- Coaching logs and participation data across 36 program sites

How and to Whom Achievement Was Communicated
- Coaching progress and fidelity data were shared during monthly coaching calls with RLs and district coaches.
- Findings informed SSIP SDT discussions related to programmatic, fiscal, and governance decisions.

How This Strategy Supports System Change, Sustainability, and the SiMR
- Coaching ensures evidence-based practices are implemented with fidelity and adapted to each site's stage of implementation.
- High-quality coaching is essential for sustaining improvements in inclusive practice and social-emotional outcomes over time, supporting SiMR achievement and scale-up.

Improvement Implementation Strategy 4: Sustainability and Scale-Up Through Implementation Science

Outcomes Achieved
- Sustainability and scale-up plans were embedded early in the SSIP and strengthened through

ongoing technical assistance from NCMPI and ECTA.
- Three programs are consistently aligned across all stages of implementation, with 44 local districts engaged in systems change and 14 districts actively implementing scale-up strategies (BB4B, LEAP, IP Demonstration Sites).
- Washington State was awarded an intensive technical assistance grant from ECTA, funded by OSEP, through FY24–25.

Related Systems Framework Area(s)
- Governance
- Finance
- Accountability/Monitoring
- Data

Measures/Metrics for Achievement
- Stages of Implementation data
- SSIP Evaluation Plan, Theory of Action, and Logic Model (updated 2023)
- Participation and scale-up tracking across districts and initiatives

How and to Whom Achievement Was Communicated
- Progress was shared with state and regional leadership, districts, and federal partners through SSIP reporting, coaching calls, and TA engagements.
- Data informed ongoing action planning and priority setting by the SSIP SDT.

How This Strategy Supports System Change, Sustainability, and the SiMR
- Implementation Science ensures that improvements are not isolated but embedded within state and local systems.
- Sustained infrastructure change supports long-term gains in social-emotional development and inclusive outcomes, which are necessary for achieving and maintaining the SiMR.

Overall, SSIP data demonstrates meaningful and sustained progress in strengthening inclusive early learning systems across Washington State. LDPISA results and ECSE Inclusion Champions reports show that districts have moved from planning to embedded practice in family and community partner engagement, with family engagement indicators increasing from 32% "in place" in 2023–24 to approximately 75–80% in place in 2024–25. This growth reflects a shift toward intentional co-design with families and community partners and the integration of inclusive practices into routine district operations.

Statewide training and coaching efforts have further reinforced this progress by building shared knowledge of inclusion, systems change, and trauma-informed practice, supported by more than 300 hours of professional learning delivered in FFY24 alone. The continued expansion of certified coaching capacity across all nine ESDs, coupled with the adoption of the WA State Coaching Practice Guide, has strengthened alignment between data, training, and coaching, supporting high-fidelity implementation across participating sites.

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.

The next reporting period infrastructure improvement strategies will continue to focus on:

Family and community partner engagement will remain a central priority. Strategies will focus on deepening family and community partner participation in Program-Wide Leadership Teams (PWLTs) and expanding shared leadership through co-designed training and improvement activities. These efforts are intended to increase understanding of regional and local early learning systems and to systematize cross-sector collaboration that supports coordinated recruitment and enrollment (CRE) for young children with disabilities. With continued intensive technical assistance and system-level coaching, the SSIP SDT anticipates further increases in meaningful family and community partner engagement across all participating sites. All districts will continue to participate in SSIP project work with established PWLTs, coaching protocols, and technical assistance partners, while also receiving guidance to strengthen collaboration with local Tribal Nations.

The SSIP will sustain and expand synchronous and asynchronous professional learning aligned to WAPM, MTSS, inclusionary practices, and systems change. Training and coaching will continue to be informed by data from the Early Childhood Program-Wide Benchmarks of Quality (EC PW-BoQ), which indicate steady progress in implementation of WAPM critical elements across sites. In partnership with OSPI early childhood program supervisors, ESD early childhood support and University of Denver technical assistance will build capacity in IDEA Part B, universal design for learning (UDL), inclusionary practices, and MTSS frameworks. These efforts are intended to ensure consistent, high-quality technical assistance across regions, regardless of geography or resource access. Certified trainers and systems-level coaches providing services across all ESD regions will continue to deliver regional and statewide training to district leaders, educators, community partners, families, Part C partners, and childcare providers.

In the upcoming implementation year, the SSIP will enhance the WAPM training and coaching network by taking what was learned through a systemic review of current coaching structures in partnership with University of Denver. The refinements to the WA State Coaching Practice Guide will ensure the statewide coaching model is responsive to current and future needs of districts, families, and community partners. The resulting coaching framework will provide differentiated guidance based on each site's stage of implementation, with intentional adaptations for integrated programs (e.g., Transitional Kindergarten, ECEAP with special education), Tribal programs, and rural or remote districts. University of Denver will facilitate the Coaching of Coaches Community of Practice to strengthen problem-solving, data-based instructional decision-making, and effective use of UDL, inclusion indicators, and positive behavior supports.

The SSIP will also engage in internal and external strategic planning to maximize resources and align policies and procedures across funding streams. Planned activities include executing a contract with the Pyramid Model Consortium to secure statewide access to the Pyramid Model Implementation Data System (PIDS), providing a consistent and vetted platform for data submission and analysis. The SSIP will continue to scale and sustain the ECSE Inclusion Champions Network, supporting engagement across 44 local districts, community partners, and families. The Inclusionary Practices Technical Assistance Network (IPTN) will focus on resources and TA for the P-3 continuum, strengthening inclusive placement options through aligned MTSS and inclusionary

practices. The expansion of BB4B will include additional early childhood programs alongside existing PreK sites.

Finally, OSPI will continue to strengthen cross-agency alignment with the Department of Children, Youth, and Families (DCYF) by integrating WAPM training and coaching practices into the Early Achievers framework. The SSIP will also intentionally align with the Inclusionary Practices Technical Assistance Network (IPTN) to reinforce inclusive systems from PreK through age 22, with a focused emphasis on reducing disproportionality and exclusionary practices for students with disabilities, particularly students with Intellectual or Developmental Disabilities and Black students with disabilities. Together, these strategies are intended to sustain and scale inclusive infrastructure improvements necessary to achieve long-term progress toward the SiMR.

List the selected evidence-based practices implemented in the reporting period:
The selected EBPs implemented by the state in the reporting period include:
1) Washington Pyramid Model (WAPM)
2) Learning Experiences: An Alternative Program for Preschoolers and Parents (LEAP Replication) and beginning stages of Building Blocks for Belonging (BB4B)
3) Multi-Tiered Systems of Support (MTSS)
4) The Stages of Implementation Science

Provide a summary of each evidence-based practice.
The state deployed EBPs to increase capacity to support regional and local educational systems and to positively impact the SiMR findings. These practices include the implementation of WAPM, MTSS, LEAP/BB4B, and Implementation Science.

(1) The Pyramid Model is a framework of evidence-based practices for promoting young children's healthy social and emotional development. With the support of the National Center for Pyramid Model Innovations (NCPMI), Washington state initiated the process to become a Pyramid Model state (WAPM). The SSIP SLs support the implementation of WAPM across Washington state's complex mixed delivery system. This framework is tailored to meet state-specific needs, promote inclusionary practices, and enhance social and emotional competence in infants, toddlers, and young children. The WAPM vision is aligned with the commitment to increase opportunities for all children to receive high-quality, early learning services in integrated and inclusive environments. WAPM is not a curriculum package, but a collection of programs and evidence-based classroom practices, selected by experts in early childhood research, to support optimal development and prevent challenging behaviors.

(2) The Learning Experiences: An Alternative Program for Preschoolers and Parents (LEAP Replication) PreK model reflects both a behavioral and developmentally appropriate approach for teaching children with and without disabilities within an inclusive early childhood environment. In LEAP Preschool Models, typically developing peers are provided with resources and instruction on how to communicate and engage in reciprocal social relationships with their classroom peers with autism spectrum disorder (ASD). The LEAP PreK Model also uses an integrated curriculum approach (i.e., designing learning experiences that promote children's skill development across multiple domains) to provide opportunities related to all areas of development (e.g., social/emotional, language, adaptive behavior, cognitive, and physical). OSPI has contracted with the University of Denver (UD) to implement LEAP PreK Models across Washington state and is currently being implemented in 6/9 ESD regions from FFY19-23. During the current SSIP cycle, UD no longer offered training and certification of the LEAP

Replication PreK model. With 6 sites trained, this will remain an essential framework, as will the fidelity metric known as the Quality Program Inventory (QPI). To better align with the efforts of integration of inclusionary practices across the PreK-22 systems, this past year, U Denver shifted from providing LEAP to Building Blocks for Belonging (BB4B), expanding their training and coaching supports from instructional and educational environments to include program infrastructure assessments and systems diagnostics.

2a) Building Blocks for Belonging (BB4B) is a professional development initiative by the University of Denver and the PELE Center to partner with programs to identify and reach their community's inclusion and belonging goals. Professional learning (training, coaching, communities of practices and program support) is based on the ECTA Indicators for Inclusion, the Dimensions of Belonging, and utilizes Implementation Science. DU consultants support leaders and leadership teams to consider the systems level support needed for inclusion, using the ECTA program inclusion indicators. Teaching teams reflect on inclusive practices that lead children to experience belonging, inclusive engagement, and joyful learning by presuming competence, supporting autonomy, and creating caring communities. Training, coaching and communities of practice offer opportunities to reflect on universally designed environments, teaming and collaboration practices, and considerations to plan for individual children's strengths, priorities, preferences, and support needs. OSPI has contracted with UD to implement BB4B across Washington state, providing continued support for 6 of 9 ESD RLs regions within the FFY24 SSIP cycle, expanding support to 8 of 9 ESD statewide since the initiation of this contracted support in 2019.

(3) A Multi-Tiered Systems of Support (MTSS) is a framework for enhancing the adoption and implementation of a continuum of evidence-based practices EBPs through data-based decision making to achieve rigorous, yet achievable outcomes for every student. The MTSS framework builds on a public health approach that is preventative and focuses on organizing the efforts of adults within systems to be more efficient and effective. MTSS helps to ensure students benefit from nurturing environments and equitable access to universal instruction and supports that are culturally and linguistically responsive, universally designed, and differentiated to meet their unique needs. MTSS integration involves coordination of tiered delivery systems, including Academic Response to Intervention (RTI), Positive Behavioral Interventions and Supports (PBIS), Washington Pyramid Model (WAPM), and Social and Emotional Learning (SEL).

(4) The state continues to prioritize implementation science to build organizational commitment, capacity, and systems so that children, families, and communities benefit from implementation practices and improved outcomes sustained over time. Using the Statewide Implementation Guide (SIG) created by ECTA, with NCMPI, OSPI adopted the Stages of Implementation to lay out the necessary steps, stage-by-stage, for full implementation of evidence-based practices, scaling-up practices, and sustaining the effort. Each Implementation stage identifies specific activities, outcomes, and unique challenges associated with the implementation process and help in the planning, communication, resource allocation, and evaluation of SSIP implementation.

The Stages of Implementation are:
Stage 1: Exploration and Planning
Stage 2: Installation
Stage 3: Implementation: Initial to Full
Stage 4: Scale Up

Provide a summary of how each evidence-based practice and activities or strategies that support its use, is intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g., behaviors), parent/caregiver outcomes, and/or child outcomes.

The impact of each Evidence-Based Practice (EBP)—including the Washington Pyramid Model (WAPM), Multi-Tiered Systems of Support (MTSS), Implementation Science, and LEAP/BB4B—extends beyond implementation at the program level to include strengthening Washington's statewide early learning infrastructure. This impact is realized through intentional family and community partner (CP) engagement strategies, synchronous and asynchronous training and coaching, data-based decision making, and coordinated sustainability and scale-up efforts.

Washington State's SSIP advances the State-identified Measurable Result (SiMR) through the coordinated and continuous implementation of these EBPs. Together, they are designed to strengthen the state system while driving sustainable improvements in local district policies, adult practices, family engagement, and child outcomes within high-quality, integrated, and inclusive early learning settings. As districts increasingly contract or subcontract with DCYF ECEAP and Head Start, access to regular early childhood programs (RECPs) for children with disabilities has expanded significantly. The percentage of children with IEPs enrolled in ECEAP increased from 11.7% in 2018 to 19% in 2024. This growth reflects sustained professional learning, technical assistance, and thought partnership with districts and CPs to explore alternative models of specially designed instruction (SDI) delivery and to align services that strengthen wraparound supports for children and families.

Across EBPs, intended SiMR impact is supported through the installation of core system components, including family and CP engagement, facilitated training and coaching, data-based decision making, and sustainability and scale-up planning. Implementation at both state and local levels is informed by multiple data sources, most consistently the Local District Preschool Inclusion Self-Assessment (LDPISA), and, as appropriate, the Teaching Pyramid Observation Tool (TPOT), the Early Childhood Program-Wide Benchmarks of Quality (EC PW-BoQ), and the Behavior Incident Report System (BIRS). These tools provide districts and Program-Wide Leadership Teams (PWLTs) with actionable data to identify strengths and areas for growth, guide targeted interventions, and support ongoing action planning and progress monitoring. Importantly, the data also allows districts to build upon existing strengths, including family partnerships, professional learning systems, and cross-sector collaboration with CPs.

The continuous use of WAPM and MTSS, grounded in Implementation Science, directly influences district-level policies and procedures related to leadership teaming, staff engagement, professional development alignment, and family partnership. Fidelity measures and observational data collected through TPOT, LDPISA, and related tools inform practice-based coaching and provide timely feedback to educators, coaches, and district leaders. These feedback loops allow training and coaching networks to tailor support to district and program needs, ensuring implementation remains responsive and focused on inclusive and trauma-informed practices. Findings submitted through the PIDS platform in FFY24 indicate continued improvement in classroom-level inclusion and social-emotional supports, as reflected in TPOT and LDPISA results.

In FFY24, OSPI ECSE further strengthened statewide communication, coaching, and technical assistance structures that support EBP implementation and SiMR progress. Building on efforts initiated in FFY22, OSPI continued SSIP office hours to create accessible, direct communication

between SSIP leads, ECSE Inclusion Champions, and district teams. SSIP State Leads, in partnership with the University of Washington, also facilitated Communities of Practice for Program and Practitioner Coaches and for CPs engaged in WAPM and BB4B implementation or early systems redesign. These forums provided technical assistance on use of the PIDS data system, IDEA performance indicators, alignment of state and federal PreK programs, and cross-sector strategies to strengthen inclusive early learning systems.

Fidelity data and the newly adopted State Indicators of High-Quality Inclusion inform monthly action planning meetings facilitated by ECTA. Through these meetings, SSIP State Leads and the State Design Team identify statewide priority areas and coordinate targeted responses to low-scoring indicators. Priority areas identified in FFY24 include policy and guidance, family partnership, and cross-sector leadership teaming—areas requiring sustained, multi-year improvement efforts. These targeted strategies are intended to result in measurable changes in district policies and practices that support inclusive service delivery and improved child outcomes aligned with the SiMR.

To support sustainability and scale-up, OSPI has invested in strengthening the ECSE Inclusion Champions Training and Coaching Network through two complementary grant initiatives. The ECSE Inclusion Champions Grant allocates $530,000 annually to local districts and supports a structured scope of work aligned to Stages 1–4 of implementation. This funding builds district capacity in systems analysis and data literacy while supporting the progressive implementation and scaling of inclusionary practices across early learning programs, PreK through third grade. Complementing this effort, the ECSE Implementation Specialists Grant allocates $890,000 annually to Educational Service Districts (ESDs) to expand regional capacity. These funds support ECSE Implementation Specialists in developing expertise in WAPM training and coaching, providing regional professional learning to districts and CPs beyond the Inclusion Champions Network, and facilitating regional PreK Inclusion Champions Communities of Practice. The grant also supports scale-up in partnership with the University of Washington's Haring Center and the University of Denver's PELE Center, with a focus on refining coaching practices using Practice-Based Coaching, WAPM, and BB4B frameworks. Together, these investments increase access to high-quality coaching and inclusive practices across urban and rural settings through both in-person and remote delivery.

Using ECTA's Systemic Improvement Group (SIG) framework, including the Stages of Implementation and Essential Support Structures, the 619 Coordinator established a scaffolded system of support that allows districts to progress at their own pace. Through the ECSE Inclusion Champions Grant, districts leverage technical assistance, professional learning, and coaching in collaboration with regional ECSE Implementation Specialists to expand alternative placement options and increase access to high-quality early learning and elementary programs. These efforts prioritize the relationship between social-emotional development and embedded inclusionary practices and are grounded in EBPs such as WAPM, MTSS, Implementation Science, and LEAP Replication strategies.

Integrating WAPM, MTSS, LEAP Replication/BB4B, and Implementation Science throughout SSIP implementation enables SSIP State Leads to monitor progress toward long-term goals outlined in the SSIP Logic Model using multiple data sources, including anecdotal reporting. Districts submit end-of-year reports reflecting implementation experiences and plans for continued improvement. Districts also share findings from PWLT analyses of B6 PreK Environment data alongside evaluation

metrics such as TPOT, BIRS, EC PW-BoQ, and LDPISA to document system change. These efforts have resulted in improved program structures, more effective delivery of SDI, increased child outcomes—with WaKIDS fall readiness scores rising from 12% to 77%—and expanded availability of regular early childhood programs.

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

Data emerging from SSIP implementation sites continue to demonstrate how purposeful, data-driven decision-making can reshape educational systems and expand access to high-quality learning environments for children who have historically been furthest from opportunity. Using multiple data-collection tools and progress-monitoring measures, the SSIP SDT assessed the impact of each improvement strategy, illustrating how sustained analysis supports meaningful and equitable systems change.

SSIP Cohorts I–IV complete the Local District Preschool Inclusion Self-Assessment (LDPISA) twice annually, providing insight into implementation progress and ongoing needs. Data from Cohorts 1 and 2 reflect more advanced stages of implementation, with the majority of indicators rated "In place/fully implemented." Strength is particularly evident in inclusive IEP decision-making, interdisciplinary teaming, and resource allocation to support inclusive service delivery. These districts show strong alignment among policy, staffing, and service delivery models, indicating that foundational inclusive structures have been institutionalized. As a result, the SSIP focus for Cohorts 1–2 should shift from initiation to quality and sustainability, with emphasis on strengthening data-informed continuous improvement cycles, refining use of multiple fidelity and inclusion measures to guide professional learning, and deepening family partnership from communication toward shared leadership and advocacy. The data suggests these cohorts are well positioned to serve as demonstration and learning sites that support statewide scale and replication.

In contrast, Cohorts 3 and 4 are in earlier stages of systems development. LDPISA data show the greatest movement from "planning" to "in process," particularly in establishing inclusive placement as the first consideration in IEP decision-making and aligning staffing models to support inclusive service delivery. While overall implementation levels remain lower than in earlier cohorts, the data indicates steady progress toward compliance-aligned and inclusive practices. SSIP supports for Cohorts 3–4 should prioritize accelerating foundational implementation by strengthening interdisciplinary teaming, expanding family engagement structures—especially culturally and linguistically responsive access—and supporting districts in using assessment data to inform coaching and professional development. Across all cohorts, family partnership and effective data use remain key leverage points. Differentiated SSIP supports—focused on sustaining and deepening implementation in Cohorts 1–2 and accelerating and stabilizing implementation in Cohorts 3–4—are essential to achieving durable, statewide improvement in inclusive early childhood outcomes.

TPOT data from this year reflect strong engagement with Pyramid Model practices and continued growth in areas tied to intentional instruction, social-emotional support, and family collaboration. Ninety TPOT observations were completed statewide, an increase from the prior year, capturing full implementation cycles across fall and spring. Overall, 78% of key practices were observed, reflecting a notable increase from fall to spring (73% to 83%), particularly in promoting engagement, teaching friendship skills, and implementing interventions for children with persistent

challenging behavior. Practices such as teacher–child supportive conversations (91%), collaborative teaming (89%), and family connection efforts (84%) remain statewide strengths. Growth was especially pronounced in intervention planning and individualized support, which increased from 76% in fall to 94% in spring. Red flags remain low overall, with 68 total instances statewide and only one indicator exceeding 10%. The most common concerns involved extended teacher-directed instruction and transitions that may limit engagement; however, punitive language, isolation or restraint, and discouragement of peer interaction were rarely observed. Overall, TPOT findings indicate increasing intentionality in supportive environment design and instructional interactions, with continued opportunities to strengthen proactive teaching of behavioral expectations, emotional competence, problem-solving skills, and family-embedded practices.

Early Childhood Program-Wide Benchmarks of Quality (EC PW-BoQ) trend data also shows statewide improvement in Pyramid Model implementation between Fall 2024 and Spring 2025. Across both reporting periods, 81 forms were submitted, yielding 3,321 individual indicator ratings. When combined, 53% of indicators were rated "In Place," 36% "Partially in Place," and 11% "Not in Place," reflecting meaningful movement toward full implementation. Comparing time periods shows clear progress: in Fall 2024, 48% of indicators were fully in place, 40% partially implemented, and 12% not yet implemented. By Spring 2025, "In Place" indicators increased to 57%, partially implemented indicators decreased to 33%, and indicators not yet in place declined slightly to 10%. This shift demonstrates ongoing institutionalization of Pyramid-aligned practices and movement from developing structures toward embedded systems.

Trend data by critical elements show strong implementation in Program-Wide Expectations (PWE), Responding to Challenging Behavior (PRCB), and Monitoring Implementation and Outcomes (MIO), each demonstrating higher mean ratings in Spring 2025. Growth was also evident in Professional Development and Staff Support Plans (PDSSP) and Family Engagement (FE), with multiple districts progressing from partial to full implementation. Establishment of Leadership Teams (ELT) remains a foundational strength, with most programs reporting this element as fully operational. Overall, EC PW-BoQ data reflect consistent statewide growth in Pyramid Model fidelity and position Washington well for ongoing coaching, sustainability planning, and deeper alignment with inclusive early learning priorities.

Behavior Incident Report (BIR) Equity Profile data underscore the importance of the state's intentional focus on disproportionality. While Black/African American children represent 7.3% of enrollment, they account for 19.1% of children with at least one incident and experience an average of 4.41 BIRs per child. Children identifying as Two or More Races represent 3.9% of enrollment but 8.0% of children with at least one incident, with an average of more than 3.7 incidents per child. In contrast, Latino/Hispanic children represent 17.1% of enrollment but only 7.6% of children with an incident, and White children represent 59.7% of enrollment and 55.1% of children with an incident. These data are used not to assign blame, but to guide culturally responsive practice, targeted coaching, and professional learning that strengthen relational and instructional supports. The findings reinforce the importance of a statewide approach grounded in data, proactive intervention, and outcome-driven decision-making to ensure safe, inclusive, and developmentally responsive environments for all children.

During the pilot year of Washington's redesigned Parent Survey Instrument, participation rates were high, resulting in more representative family feedback across preschool through early

elementary grades compared to the prior survey. Because the first two measures were part of a limited pilot, engagement is expected to increase further during the upcoming statewide rollout. The survey asked parents whether their child's school made efforts to partner with them to improve outcomes, a measure used to determine whether the state's "met target" standard was achieved. Among 1,090 respondents, 76% reported that their school met this standard, establishing a strong baseline for future implementation. Families of preschool children reported the highest rate of partnership at 85%, with families of children in transitional kindergarten through grade 2 reporting similarly strong results at 81%.

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.
Additional data metrics have been reviewed by the SSIP SLs and are believed to support further movement towards scale up and sustainability of the SSIP Implementation project to meet the SiMR target. What's more, with the recent partnership of OSPI and the SSIP SDT with ECTA to continue the drafting of a Memo of Understanding (MOU) to support the implementation of IDEA across Washington's mixed delivery system, the SSIP SLs have considered collecting supplementary WaKIDS data, Head Start performance indicator (PIR), school aged IDEA performance indicator, to elevate the value of shared data collection and aligned program policies and procedures. Examples of this data include:

1) Federal and State preschool data management annual reports pinpoint the number of children enrolled into program with an IEP, and the program type children with disabilities are enrolled in. For children enrolled in WA state's Head Start programs, the Program Information Report (PIR) will be a reliable source of information for the SSIP SDT. The PIR is an annual report providing comprehensive data relating to services and staff, children and families participating in Head Start programs (and Early Head Start) was first reviewed at the August SSIP SDT meeting. Of the children enrolled in this program, 152 were referred to for a special education evaluation, with 112 receiving an evaluation for special education services and 40 not receiving an evaluation. Of the 40 children who did not receive an evaluation, 16 of the evaluations did not take place due to parent refusal. Of additional interest is the referral and evaluation trends of children enrolled in the Migrant/Seasonal Programs (39 children were referred, 37 children did not receive an evaluation).

2) The number of kindergarteners/TK with IEPs on the November 2024 child count was 10,439, with 94.5% of students with IEPs taking the WaKIDS assessment. Based upon the state summary, 24.4% of children with disabilities met criteria for all six domains in the WaKIDS assessment. Of that percentage, only 23.5 % of children with disabilities demonstrated skills of a kindergarten aged child for SEL. The total number of children with disabilities demonstrated proficiency in SEL was 43.4%. This was an increase in 1,351 students who were tested in social emotional learning, which is an overall increase of 14.3%.

3) Other essential data metrics targets that will be considered for review for the 2025 SSIP cycle include:
    - B4 Suspension and Expulsion
    - B5 Educational Environment
    - B11 Child Find
    - B12 Early Childhood Transition
    - C8 Early childhood Transitions data

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

During the next reporting period, OSPI Special Education, in partnership with internal and external experts, will continue to strengthen Washington's PreK–22 educational systems by building on the infrastructure improvement strategies outlined in this report. This work will be advanced through targeted and intensive technical assistance, professional learning and coaching, and intentional sustainability and scale-up strategies. SSIP State Leads remain committed to fostering belonging and strengthening the systems that support children with disabilities and their families in accessing inclusive schools and communities.

Decades of research affirm that high-quality, inclusive early learning in the least restrictive environment (LRE) leads to positive long-term social, emotional, and academic outcomes. While Washington's mixed-delivery system of public and private early learning programs provides a solid foundation, ongoing variability in access, quality, and coordination continues to create barriers for families. In response, the Governor and Legislature have directed DCYF and OSPI to align services for children ages 3–5 so families can access inclusive supports when and where they are needed. This work reflects evidence-based systems practices emphasizing interagency collaboration, coordinated recruitment and enrollment (CRE), and family-centered service delivery.

New OSPI Early Childhood Special Education Program Supervisors, co-located across early learning and special education teams, will continue to prioritize cross-sector collaboration between DCYF and OSPI. This work supports the co-creation of aligned state, regional, and local systems alongside families and community providers. Expected outcomes include expanded recruitment and engagement strategies to increase inclusive placements, improved cross-agency policy alignment, and more integrated programming for districts partnering with DCYF through ECEAP and related funding streams. EBPs supporting this work include coordinated enrollment systems, community-based inclusion models, and implementation science–driven approaches to scaling inclusive practices across diverse settings.

To strengthen inclusive practice locally, OSPI will continue expanding the ECSE Inclusion Champions Training and Coaching Network in collaboration with LEAs, ESDs, the OSPI Early Learning Division, the Inclusionary Practices Technical Assistance Network (IPTN), and the University of Denver's PELE Center. This work is grounded in EBPs such as practice-based coaching, professional learning communities, co-created guidance resources, and fidelity-based coaching models that build educator capacity and promote consistent implementation of inclusive practices across early learning and preschool environments.

In parallel, OSPI Executive Leadership is advancing foundational infrastructure to support inclusion from PreK through age 22. Building on a legislatively funded feasibility study completed in the prior year, OSPI is in the pre-implementation phase of establishing a statewide Individualized Education Program (IEP) system. During this reporting period, activities include establishing governance and project management structures, engaging partners to refine system requirements, and selecting an IEP platform vendor and associated services. This work reflects EBPs related to results-driven accountability, meaningful family engagement in IEP development, and integrated data systems that support instructional planning and improved outcomes.

OSPI's leadership in IPTN continues to provide a coordinated statewide framework for addressing persistent inequities and improving outcomes for students with disabilities, particularly those most

excluded from opportunity. IPTN efforts are grounded in EBPs associated with MTSS, data-based decision-making, root cause analysis, and cross-disciplinary collaboration among general educators, special educators, and school leaders. Together, these strategies strengthen statewide capacity, reduce silos, and embed inclusive practices across Washington's educational systems.

Key elements of this work include:

- Family-Centered Practices: Integrating family voice into leadership teams and local decision-making to ensure family engagement is central to educational planning.
- Professional Learning and Technical Assistance: Supporting districts to reduce exclusionary practices and improve outcomes, particularly for students with intellectual and developmental disabilities (IDD) and Black students with disabilities.
- Cross-System Collaboration: Aligning general and special education within MTSS to support early intervention, integrated instruction, equitable environments, and reduced overidentification.

Implementation of EBPs across Washington's SSIP is expected to result in measurable improvements in access, quality, and outcomes for children with disabilities, directly supporting progress toward the SiMR. As Universal Design for Learning (UDL), inclusive instructional practices, and MTSS are implemented with fidelity, OSPI anticipates increased access to inclusive placements in the LRE. Progress will be measured using IDEA Part B Indicator 6 (LRE) data, local placement data, and inclusion indicators within the Local District PreK Inclusion Self-Assessment (LDPISA).

Quality and fidelity of inclusive practices are expected to improve through continued implementation of the Washington Pyramid Model (WAPM), Pyramid Model practices, and practice-based coaching. Fidelity will be monitored using the EC Program-Wide Benchmarks of Quality (PW BoQ), Teaching Pyramid Observation Tool (TPOT), coaching documentation, and WAPM fidelity measures. Improved fidelity is expected to strengthen instructional and behavioral supports and improve child outcomes, including social-emotional competence and engagement. Progress will be measured through LDPISA social-emotional indicators, Behavior Incident Reporting System (BIRS) data, TPOT observations, and program-level child outcome data.

Family engagement is expected to increase through implementation of family-centered, culturally responsive EBPs and coordinated recruitment and enrollment practices. Progress will be measured using LDPISA family engagement indicators, ECSE Inclusion Champions end-of-year reports, and participation data from family training and leadership teams. Stronger family partnerships are anticipated to support sustained engagement in inclusive environments and improved outcomes for children.

Educator and leader capacity to implement EBPs with fidelity is expected to increase through sustained professional development, coaching, and communities of practice. Progress will be monitored through training participation data, coaching logs, fidelity self-assessments, and Program-Wide Leadership Team documentation. Increased use of MTSS and implementation science practices is expected to strengthen data-based decision-making and system coherence across districts.

Finally, alignment of instruction, services, and individualized planning is expected to improve as EBPs are embedded within IEP development and implementation. Progress will be monitored through IEP review data, instructional alignment checks, and family feedback. Embedding EBPs

within statewide training, coaching, policy, and data systems is expected to strengthen sustainability and scalability, measured through expanded implementation sites, sustainability planning artifacts, and documentation of cross-agency alignment.

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

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

The testimony of the ECSE Inclusion Champions, paired with submitted data of these local districts, is showing that the current methodology outlined above is effective in offering districts the opportunity to assess current practices, create viable improvement strategies, and increase access to high-quality learning environments for all children when they are provided with intensive professional learning and technical assistance related to inclusion, inclusionary practices, and social emotional learning. Local districts that paired this technical assistance with system level and instructional coaching found greater buy-in from program staff, community partners, and families, as well as positive outcomes for children engaged in integrated learning environments.

Local districts shared that:

The implementation of the ECSE Inclusionary Practices Initiatives has yielded significant positive outcomes, particularly in the social emotional areas for children transitioning from preschool through kindergarten. The main result is the establishment of stronger collaborative teamwork across various settings. This initiative has fostered inclusionary practices where a larger, multidisciplinary team contributes input across different platforms, connecting the home, school, and community to support the child. This ensures a more holistic and consistent approach to early learning

These initiatives, which supported the creation of inclusive environments, have strengthened instructional quality, and improved system-wide coherence, resulting in measurable improvements for children with disabilities across the district. One of the most impactful outcomes was the successful launch of full-day preschool programs. These classrooms were intentionally designed to serve as general education environments, with room for both children with and without IEPs. The guiding philosophy was to maintain general education ratios in all classrooms, ensuring that inclusive placements were not only available but of high quality.

Students with disabilities are demonstrating increased engagement with their surroundings and peers. They are referencing and following the visual cues of peer models within their settings, which has led to greater independence. Additionally, they are forming meaningful friendships with other students. While longitudinal data are not yet available, plans are in place to begin collecting these data. As this is year two of implementation, we believe a solid foundation has been established to support continued growth.

In the spring of 2021, OSPI contracted with the Pyramid Model Consortium to purchase licenses for all local districts engaged in the ECSE Inclusion Champions activities to access the Pyramid Model Implementation Database (PIDS) system. This data system is designed to capture fidelity metrics (EC PW BoQ, TPOT, BIRS) aligned with the infrastructure improvement strategies and EBPs

described in this report. The PIDS platform has supported the increase in statewide data submission and created a seamless data collection and submission plan that would allow immediate access to student and program level data to partners across WA state at all levels of access. Initial access to the PIDS platform was paired with state level training to build proficiency of the tool input and report features with SSIP RLs then taking the lead to train and supporting their local districts. Beginning in FFY23 and continuing in FFY24, data submission was required within the PIDS system. This shift of expectation yielded an 88% usage rate by the SSIP local districts, which was an increase from the previous submission periods. As a collective, 84% of the ECSE Inclusion Champions were able to successfully submit and interact with the data platform within the assessment window.

According to the Annual Federal Child Count and Least Restrictive Environment (LRE) data, for the 2024 school year, it was reported that 12,475 children placed in PreK programs were found eligible for IDEA, Part B. This is an increase of 49 children enrolled in preschool placements from FFY 2023. Additionally, 597 4-year-olds and 186 5-year-olds were placed in Transition to Kindergarten (TK), a general education placement.

In the winter of 2021, Special Education SDT proposed that the B6 baseline and corresponding targets for 6A and 6B would increase annually within the implementation cycle by 1.5%. It was in the APR 2024 that the 6A data improved from 33.17% to 34.54% (+1.37%) and 6B data decreased from 40.95% to 39.92% (-1.03%). These data illustrate the impact of the SSIP Regional Leads' efforts to provide intensive technical assistance, systems-level and instructional coaching, and professional development to support IDEA implementation across programs statewide, including those not directly participating in the SSIP. Among districts in the 2024 reporting period for the SSIP cohort, performance outcomes were 47.2% for Indicator 6A and 32.9% for Indicator 6B. In the 2024 Annual Performance Report (APR), the state met the target for Indicator 7A1, improving from 85.86% to 88.73%. The target was not met for Indicator 7A2; however, performance increased slightly to 38.11% in 2024, representing a 0.38% gain. While the target was not achieved, there was no slippage.

Additional testimony from the SSIP RLs and coaches about the SSIP Implementation project were:

The analysis of Indicator B6 and B7, when examined alongside fidelity metrics from the Benchmarks of Quality (BOQ) and Local District Preschool Inclusion Self-Assessment (LDISPA), helped districts identify concrete areas for system improvement. One of the most impactful changes was the development and strengthening of leadership teams. These teams progressed from "not in place" to "in place" by establishing clear missions, actionable implementation plans, and mechanisms for reviewing progress. This foundational shift created the structure necessary to monitor and support the implementation of inclusive practices aligned with the goals of B6 (placement in least restrictive environments) and B7 (improved child outcomes).

Professional development during the year was intentionally offered across the early learning system, not solely within district-administered programs. Head Start and ECEAP instructional staff, private childcare providers, Children's Home Society family navigators, Walla Walla Valley Disability Network staff, and Transitional Kindergarten teachers and administrators participated in training and coaching sessions. Major shared learning experiences included the Conscious Discipline

training, the Northwest Pyramid Model Summit, classroom coaching cycles, and multiple Dinner & Dialogue sessions hosted through the Early Learning Coalition at the Center for Children & Families. This inclusive professional learning approach strengthened alignment across home, school, and community environments supporting young children.

Fidelity metrics prompted meaningful changes to our original action plan. TPOT and Conscious Discipline findings led us to increase classroom coaching on emotional regulation and peer problem-solving strategies. ECERS results revealed areas for growth in inclusive physical environments, prompting investment in adaptive furniture, visual support, and curriculum materials. Additionally, LDISPA feedback highlighted a need for deeper family engagement, leading us to expand our family education nights to include inclusion-focused sessions for the following school year.

Section C: Stakeholder Engagement

Description of Stakeholder Input
See Broad Stakeholder Input above in the Introduction for a detailed description.

Describe the specific strategies implemented to engage stakeholders in key improvement efforts.
Washington strengthened early childhood programming through intentional partner engagement strategies that supported cross-sector collaboration and shared accountability. OSPI designated representatives across partner groups and relied on standing workgroups, regular convenings, and structured feedback processes to ensure equitable participation and co-creation throughout planning, implementation, and decision-making. This approach is reflected in the State Design Team (SDT), which includes parent advocacy organizations; state and federal PreK programs; Part C agencies; higher education; Educational Service Districts (ESDs); local districts; Tribal partners; and Child Care Aware of Washington.

Guided by the SSIP Logic Model, State Leads (SLs) used joint planning, aligned professional learning, and coordinated communication to advance implementation priorities for 2024. OSPI Special Education, Early Learning, and the Office of Native Education partnered with DCYF ECEAP and Head Start to align training content, timelines, and messaging related to inclusionary practices, trauma-informed care, the Washington Pyramid Model (WAPM), Multi-Tiered Systems of Support (MTSS), LEAP replication, and race and equity. This alignment increased consistency of implementation and reduced duplication across systems.

DCYF ECEAP and Head Start used data-driven engagement strategies to expand integrated and inclusive early learning programs. Findings from the ECEAP and Head Start Saturation Study informed targeted outreach, district–community provider planning, and technical assistance. Since the 2021–22 study, enrollment in ECEAP and Head Start has increased by 4 percent, reflecting improved access to inclusive placement options for children with disabilities.

OSPI refined priority-setting to focus on districts with the lowest Indicator 6A data, increasing access to funding and technical assistance for districts with the greatest need. This targeted approach supported collaborative program design between districts and community ECEAP providers and contributed to a 2.1 percent increase in 6A data in the most recent cycle and a total increase of 7.5 percent since 2021.

At the systems level, Washington leveraged ECTA intensive technical assistance to support authentic co-creation with local partners. Six community inclusion teams were established across six ESD regions and engaged in facilitated development of policies and procedures to support sustainable inclusion. Although the ECTA grant has concluded, OSPI continues to contract with the University of Denver to sustain systems-level improvement.

The OSPI Special Education Division continues its commitment to improving relational assessment and progress monitoring for children with disabilities in Indigenous communities. This work prioritizes developing a deeper understanding of historical trauma experienced by Tribal Nations through partnerships with organizations with lived experience, OSPI's Office of Native Education (ONE), and the DCYF Tribal Relations Office.

Additional engagement occurred through formal advisory structures and practitioner networks, including the ECSE Coordination Team, Special Education Advisory Council (SEAC), ECSE Inclusion Champions Network, AESD Special Education Directors, OSPI divisions, UW IPP PreK Demonstration Sites, and the Inclusionary Practices Technical Assistance Network (IPTN). These partners engaged in recurring meetings and coordinated technical assistance, supporting regional scale-up and sustainability of inclusionary practices and MTSS frameworks.

To strengthen family and community engagement locally, OSPI used Federal Part B, Section 619 funds to incentivize districts to establish permanent family and community partner roles on Program-Wide Leadership Teams (PWLTs) and include these partners in professional learning and technical assistance. Embedding families and community partners in leadership structures supports sustained implementation of WAPM, inclusionary practices, and high-quality instructional systems.

Results by early childhood least restrictive environment (LRE) category were encouraging. Families whose children received services in regular early childhood programs reported strong partnerships, with 87% meeting target when services were delivered within the classroom and 95% when children were periodically pulled out. Families of children served in separate special education programs reported an 80% target-met rate. Among 187 respondents with preschool, transitional kindergarten, and kindergarten students, 79% agreed or strongly agreed they participated in discussions about their child's inclusion with typically developing peers. These findings demonstrate growing family–school partnerships and statewide momentum, with anticipation of richer data as the survey moves into full implementation.

District partners participating in the Washington State PreK Inclusion Champions (PICs) Initiative reported significant outcomes. Integration of Tier 1 and Tier 2 social-emotional behavior frameworks strengthened preschool programs, addressing gaps in comprehensive Tier 1 implementation while maintaining fidelity to specially designed instruction. Intentional behavior procedures ensured consistent, universal support for all students.

Investments in professional development and instructional coaching were central to these gains. All preschool staff received training in the Pyramid Model, developmentally appropriate practices (DAP), and inclusive instructional strategies. Embedded instructional coaches modeled effective practices, built staff capacity, and supported fidelity, contributing to improvements in classroom quality, student engagement, and social-emotional growth. Fidelity data showed strong use of visual support and routines (TPOT/QPI strengths), and districts established peer mentorship structures to sustain implementation.

The coordinated ECSE technical assistance model piloted through the ECSE Coordination Team has shaped Washington's approach to a sustainable statewide infrastructure. Outcomes from the ECSE Inclusion Champions reflect collective efforts to align professional learning, develop technical assistance materials, and support federal indicators B6, B7, B11, and B12. With support from national partners (ECTA, NCSI, IDC, and DaSy), the team created tools and guidance to strengthen Child Find, clarify high-quality practices, and address exclusionary practices.

This model also elevated regional expertise. Nearly all ECSE Coordination Team members now meet criteria to serve as WAPM Implementation Specialists and SSIP Regional Leads, providing master-level coaching and training statewide. Lessons learned, including variability in regional capacity, have informed the next SSIP phase. Beginning next year, OSPI will transition from reliance on ESD-based ECSE Coordinators to in-house ECSE/ECE Program Supervisors assigned regionally to ensure consistent guidance, stronger fidelity, and alignment with statewide improvement strategies.

By building this in-house infrastructure and continuing collaboration with ESDs, early learning partners, and national technical assistance centers, Washington is positioned to scale inclusive practices, reduce regional disparities, and advance the long-term outcomes of the SSIP Logic Model.

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

Describe how the State addressed the concerns expressed by stakeholders.
With the engagement of community partners, local districts, Regional Leads (RLs), and families, the SSIP State Leads (SLs) continue to advance the implementation of inclusion, inclusionary practices, and MTSS frameworks across early childhood programs serving children ages 0–5. This work spans Washington's complex mixed-delivery early learning system and reflects a shared commitment to ensuring all young learners—especially those with disabilities—have access to high-quality, inclusive early learning environments.

Advisory groups have remained actively engaged throughout the reporting period, working collaboratively to identify challenges, problem-solve, and align efforts across state, regional, and local levels. Engagement opportunities have been intentionally varied to meet partner needs and have included monthly network meetings, bi-weekly OSPI ECSE updates on priority topics, collaborative writing and editing sessions for emerging guidance, and active participation in cross-agency advisory councils and workgroups. These efforts span multiple state agencies, including DCYF, the Department of Health, the Office of Financial Management, and the Health Care Authority.

Decades of research demonstrate that high-quality early learning environments that include children with and without disabilities support children's lifelong learning and social development. Washington's diverse early learning landscape provides a solid foundation for this work; however, significant variation in resources and program quality remains. Analysis of community partner input identified several priority areas requiring focused attention:

1. Strengthening understanding of inclusion and inclusionary practices and how to meet the unique needs of children with disabilities across the mixed-delivery system.
2. Advancing equity for Tribal children, children with disabilities, children impacted by

intergenerational trauma, Black children, and the practitioners within these communities.
3. Leveraging existing data sources in ways that prevent the weaponization of data, particularly for the state's most marginalized communities.
4. Addressing the number of children referred to special education through ECEAP and Head Start who are not evaluated, with particular concern for Tribal and Seasonal and Migrant Head Start programs.
5. Examining Child Find practices across the mixed-delivery system to address disproportionality in referrals and eligibility determinations under IDEA Parts C and B.
6. Investigating the impact of childcare deserts, which can lead families to enroll children with IEPs across district boundaries and may result in families declining or limiting IDEA services.
7. Responding to reports of increased social-emotional incidents in early learning settings, which correlate with higher rates of exclusionary discipline for children with disabilities in kindergarten.

To build systems of support and strengthen infrastructure, local districts must first examine current practices to understand the implications of disproportionate representation by race, equity, and disability category (Indicators B9 and B10). While referrals for special education are often the result of well-intended adult decisions, those decisions can unintentionally cause harm when they do not address root causes or are not culturally affirming. Disproportionality reflects the cumulative impact of these decisions on students lived experiences. Addressing this requires both a deep understanding of the communities served and an awareness of the effects of intergenerational trauma.

To better support SSIP implementation districts, the SLs have continued to collaborate with experts who are successfully advancing equitable outcomes for children and families experiencing disproportionate impacts. During this reporting cycle, several key actions were completed:

- **Professional Development on Inclusionary Practices:** SSIP Regional Leads, in partnership with OSPI and the University of Washington Inclusionary Practices Project (IPP) PreK Demonstration Team, developed and delivered professional development on Myths & Facts about Inclusionary Practices in ECSE. This training addressed seven common misconceptions, including assumptions about cost, the role of special education teachers, and perceived readiness requirements for children with disabilities.
- **Guidance Development and Release:** At the start of the 2024–25 school year, OSPI finalized and released the Myths & Facts about Inclusionary Practices in ECSE document, along with the Extended Myths & Facts about Inclusionary Practices in Washington State guidance, to support reflection and implementation across early learning settings.
- **Tribal Review and Adaptation of the Pyramid Model:** OSPI contracted with Swan Innovations to expand work initiated in FFY21 with Dr. Martina Whelshula and Cree Whelshula. This work focused on adapting professional development materials to better support both Native and non-Native educators. Findings from a Tribal review of the Washington State Pyramid Model were shared with the SSIP State Design Team (SDT).

  Reviewers identified strong alignment between the Pyramid Model and many Indigenous values, particularly its emphasis on trauma-informed care, supportive adult–child relationships, culturally responsive reflection, and holistic well-being. At the same time, reviewers highlighted the need for deeper adaptation, noting limited representation of Indigenous histories, languages, cultural practices, and experiences with intergenerational trauma. Recommendations emphasized direct collaboration with Tribes, integration of Native languages and teachings,

explicit attention to the impacts of colonization, and relationship-based implementation grounded in humility, respect, and Tribal sovereignty.
- **Systemic Equity Review and SiMR Alignment:** Within this reporting cycle, OSPI finalized a memo resulting from a systemic equity review co-designed with the National Center for Systemic Improvement (NCSI). This review strengthens alignment with the SiMR by informing beliefs, processes, and practices related to disproportionality, transparent data use, and authentic family and community engagement. The partnership with NCSI positions Washington to address systemic barriers in early childhood special education and reinforces the importance of equitable access and strong family relationships as the foundation for long-term outcomes.

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.

Washington continues to embrace the opportunity to reimagine a stronger, more aligned early learning and education system that prioritizes quality, inclusion, and family choice. High-quality early learning programs promote children's development, learning, health, and safety. It is the hope of the SSIP SLs that with the support from ECTA and our existing SDT, Washington will be positioned to increase cross agency policy and procedures to expand access to students with disabilities across early learning programs — a vision reflected within the SSIP Logic Model.

Washington's next phase of our State Systemic Improvement Plan (SSIP) is focused on building a coordinated, statewide infrastructure that makes inclusive, high-quality early learning the norm for young children with disabilities. We are proposing a jointly funded ECSE and Early Learning coordinated services model, in partnership with OSPI's Early Learning Division, to better align early learning and K–12 systems and to ensure continuity of services from PreK through 3rd grade. This approach is designed to strengthen inclusive practices, improve transitions, and use data more effectively to inform where and how we support children and families.

A central next step is the creation of five full-time ECSE/ECE Program Supervisor positions that will hold positions at our state education agency. These positions will be co-located through special education and early learning. These supervisors will lead statewide technical assistance and coaching, help districts and ESDs connect with IPTN partners, and support professional learning and family engagement efforts centered on inclusive, high-quality early childhood settings. They will align their work with SSIP goals, Washington's preschool inclusion activities, School Improvement early learning priorities, and frameworks such as Building Blocks for Belonging and the WA Pyramid Model. A new Program Specialist will also support cross-system coordination, WaKIDS data analysis, shared reporting, and logistics to ensure fidelity of implementation and continuous improvement across both divisions.

As we move into the next phase of the SSIP, Washington remains committed to the core infrastructure and implementation of science frameworks that have grounded our improvement efforts, including a focus on stages of implementation, fidelity measures, and aligned coaching and training structures. At the same time, we are intentionally strengthening how we gather and act on feedback from regions, local districts, Tribal partners, and community early learning programs. This includes using multiple data sources, reviewing contextual factors that influence implementation readiness and sustainability, and adapting supports to meet local needs. The goal is to be a more responsive system that maintains a strong statewide structure while allowing local flexibility,

continuous learning, and shared decision-making that honors community voice.

We are also expanding our work with key technical assistance partners. The University of Denver will continue to build the capacity of ECSE Program Supervisors through communities of practice, facilitator training (e.g., Prevent-Teach-Reinforce, Practice-Based Coaching), and individualized coaching, all aligned with Washington's Comprehensive Inclusive Education guidance, the SSIP, and IPTN. DU will also support a 10-week ECHO series and ongoing communities of practice for local teams to strengthen adaptive leadership, high-quality coaching, and collaborative problem-solving. In addition, the Pyramid Model Consortium will help Washington refine and use the Pyramid Model data system to track fidelity, child outcomes, and behavior incidents to drive data-based decision-making and continuous quality improvement across early childhood programs.

Looking ahead, our coordinated ECSE/Early Learning services will focus on four main outcome areas:

A. System alignment and collaboration across districts, early learning providers, and community partners to bridge gaps between early learning and K–12.
B. Strengthening inclusionary practices in PreK–3rd grade through targeted guidance, professional development, and monitoring of implementation.
C. Robust data analysis and statewide learning, including a P–3 network that uses WaKIDS and other data to identify priorities, highlight success stories, and inform reporting.
D. Improved kindergarten transition supports that ensure continuity of services and provide families with clear tools and resources.

Together, these strategies represent where we are going next as a state: building a coherent, data-informed, early childhood system rooted in educational benefit that continues to use implementation science while becoming more responsive to local context. This balanced approach allows Washington to improve outcomes and expand access to inclusive, high-quality learning environments for young children with disabilities—ensuring that systems adapt as we learn, and that every region has the support it needs to implement with fidelity and sustainability.

Within the 2021 legislative session, the WA state Governor requested a technical report of agency actions and legislative recommendations for programs regulated by the state and/or government-to-government responsibilities that must be met for children aged 3–5. As described in the Advancing Integrated and Inclusive Programs for Preschool-Aged Children report released in November 2022, DCYF and OSPI have listened carefully and learned from Tribes, families, and providers about what it will take to improve services and reduce the barriers and disincentives necessary to realizing our goal of a highly integrated and inclusive PreK system. Both agencies plan to further expand opportunities to engage, gather, and implement community-based feedback and human-centered design principles moving forward. Utilizing the ECTA grant team, the agencies are continuing to work on the groundwork to create a MOU that outlines the roles and responsibilities of OSPI, DCYF, and Child Care Aware of WA. The state agencies are also working together to create a shared definition of high-quality early learning so there is a clear and unified understanding about the programmatic experiences that will be required to best promote children's learning and development.

DCYF is making plans for ECEAP expansion and bolstering the childcare market. To further expand these efforts, DCYF in partnership with Child Care Aware of Washington, established a pilot project amongst licensed care facilities overseeing children 0–3 years of age. As the project moves into its

third year of implementation, it is anticipated that the DCYF leads will work towards scale out of WAPM practices within their current program structure before expanding outside the region's boundaries, further aligning instructional practices across systems with the local districts and community-based programs.

Per the directives found within HB 1550, OSPI engaged in permanent rulemaking activities and finalized WA Administrative Codes (WACs) to clarify the requirements for school districts implementing TK (effective July 29, 2024). Additional guidance was offered relating to the implementation of TK including the: Transition to Kindergarten: Minimum Standards and Requirements, CRE Planning Worksheet, TK Readiness Considerations, and Funding Early Learning Activities in WA state with Title I, Part A.

Taken together, these actions will help our state advance our goals of effectively serving PreK-aged children and their families. DCYF and OSPI are committed to building an aligned inclusive early learning system and to the long-term work of shifting systems, creating momentum and support, and organizing communities towards high-quality inclusive preschool settings for all children. Now is a critical time to assure communities that we are working together to accomplish what both we and they know: inclusive settings are best for all children.

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

During the next reporting year, Washington will implement several new, SiMR-aligned activities to strengthen statewide early childhood infrastructure and advance inclusive, high-quality learning environments for young children with disabilities. These activities build on existing SSIP strategies and represent the next phase of coordinated system development across early learning and K–12.

Beginning in FY 2026, OSPI will launch a jointly funded ECSE and Early Learning coordinated services model in partnership with OSPI's Early Learning Division. Central to this effort is the creation of five full-time ECSE/ECE Program Supervisor positions, co-located across special education and early learning, along with one Program Specialist dedicated to coordination, data analysis, and shared reporting. Hiring and onboarding are anticipated to occur in the first half of the fiscal year, followed by full implementation of statewide technical assistance, coaching, and coordination activities in the second half of the year.

Data collection for this activity will include documentation of technical assistance and coaching delivery, participation in professional learning and communities of practice, fidelity data from Pyramid Model tools (PW BoQ, TPOT), and implementation tracking aligned to SSIP stages of implementation. Expected outcomes include improved alignment between ECSE and early learning systems, increased fidelity of inclusive practices, and strengthened statewide capacity to support inclusive PreK–3 implementation. These outcomes support the SiMR by improving the quality and consistency of social-emotional supports in inclusive early learning environments.

Throughout the fiscal year, Washington will also deepen its partnership with national technical assistance providers, including the University of Denver (DU) and the Pyramid Model Consortium (PMC). DU will support ECSE Program Supervisors through communities of practice, facilitator training, individualized coaching, and a 10-week ECHO series focused on adaptive leadership, practice-based coaching, and collaborative problem-solving. PMC will support refinement and expanded use of the Pyramid Model data system to strengthen fidelity monitoring and child

outcome analysis.

Measures for these activities include participation and completion data for training and ECHO sessions, coaching logs, fidelity scores from Pyramid Model measures, behavior incident and child outcome data captured through the Pyramid Model data system. Expected outcomes include increased educator and leader capacity, improved implementation fidelity of evidence-based social-emotional practices, and reductions in challenging behavior, all of which directly contribute to progress toward the SiMR.

In parallel, OSPI and DCYF will continue cross-agency policy and systems alignment work throughout the fiscal year, including development of a formal Memorandum of Understanding with Child Care Aware of Washington, refinement of a shared definition of high-quality early learning, and expanded use of community-based feedback and human-centered design. Data sources for this work include documentation of interagency agreements, stakeholder engagement records, and alignment of policy guidance. Expected outcomes include clearer, more consistent expectations for inclusive practice across systems and improved access to inclusive early learning options for children with disabilities.

DCYF will continue ECEAP expansion and childcare market-strengthening efforts, including scale-out of Washington Pyramid Model practices within licensed childcare pilots serving children ages 0–3. Alignment with local districts and community programs will be monitored through participation data, coaching and training records, and fidelity measures. These activities are expected to strengthen continuity of inclusive practices across early learning settings, supporting early social-emotional development linked to the SiMR.

Describe any newly identified barriers and include steps to address these barriers.
It was shared during numerous community forums (PWLT, SSIP SDT, and PIC Networking meetings) that the greatest challenges when creating a high quality integrated and inclusive early learning program are related two factors; braiding funds to cover program costs and navigating competing policy and procedural requirements tied to the different funding sources. Furthermore, it was shared by the CPs that:

1) Intentional connections and leveraging of current K–12 practices and initiatives with early childhood to harness district level support must require the offering of shared professional learning amongst general and special education practitioners.
2) A continued emphasis on Washington state's public school system as an inclusive 3–22 system is needed to ensure scale up and sustainability of EBPs systemwide,
3) The distribution of funding to support the alignment for early childhood programs must occur across the early learning landscape, including childcare, state and federal PreK, and district run programs (PreK, TK, K), to counter exclusionary enrollment practices for children with disabilities.
4) Data across cohorts indicate that ongoing staff turnover and persistent recruitment and retention challenges in early childhood programs make it difficult to sustain implementation fidelity over time, requiring repeated onboarding, training, and coaching to maintain inclusive practices.
5) Finally, data access must be streamlined to reflect the experiences of local districts, community programs, and children and families. Proposed data sources include K-12 discipline data, WaKIDS data for children enrolled in TK and kindergarten, and IDEA performance indicators B3, B4, B5, B9, and B10.

Current efforts to address these concerns include the following:

(1) As cited in Section C of this report, the expansion of MTSS through WAPM welcome partners representing WAMTSS to continue to support the development of the SSIP Logic Model, Evaluation Plan, and Theory of Action to further enhance alignment. The goals of this project include leveraging current K–12 practices to harness district level support to ensure sustainability. As a key strategy notated in the SSIP Logic Model, alignment to WA ECSE initiatives and cross-sector partners is essential to sustainability and scale-up practices. The SSIP SLs understand that these efforts are actualized when systems to support are developed with the use of fidelity metrics and data-based decision making.

(2) OSPI supports and empowers students, educators, families, and communities through equitable access to high-quality curriculum, instruction, and support. OSPI's shared focus is supporting all of Washington's learners by providing coordinated, data-driven resources and support to school districts and programs. OSPI is committed to providing access to strong foundations. OSPI's strategic goals are deliberately aspirational, and leaders understand that progress will require continued, effective collaboration and advocacy with CPs. OSPI has identified their first strategic goal to focus on increasing student access to and participation in high-quality early learning and elementary by amplifying and building on inclusive, asset-based policies and practices. Initial objectives for this goal include providing universal access to PreK, New K–3 literacy focus, and universal access to dual language learning by elementary. Activities to support this practice include the utilization of implementation science to increase knowledge of system change and leadership practices as cited in the SSIP Logic Model: Sustainability and Scale-Up.

(3) Under state and federal law, all public-school students who qualify for special education services are entitled to those services at no cost to their families. School districts receive a combination of federal and state special education dollars to support students with Individualized Education Programs (IEPs). This past legislative session, Washington State has recently taken a significant step toward strengthening its special education system through full funding of special education, as enacted in 2SSB 5263. This legislation removed long-standing funding caps and increased the state special education multiplier, resulting in more predictable, adequate, and equitable funding for districts serving students with disabilities. The impacts of full funding are already evident in districts' increased capacity to invest in staffing, professional learning, and inclusive service delivery models, reducing reliance on local levy funds and mitigating structural disincentives to inclusion. Importantly, this investment supports the sustainability of inclusive practices by enabling districts to better recruit and retain qualified staff, align resources to student need, and strengthen systems that improve outcomes for students with disabilities across Washington.

(4) Washington State also leverages state set-aside funds for special education improvement efforts to provide stable, ongoing support for advancing inclusive practices statewide. These funds are intentionally aligned to support system-level improvement, including technical assistance, professional learning, coaching, and infrastructure development that districts need to improve inclusionary outcomes for students with disabilities. By investing set-aside resources in sustained, multi-year initiatives—rather than one-time or short-term projects—the state can build local capacity, support districts at various stages of implementation, and ensure continuous improvement efforts are responsive to data. This stable funding stream plays a critical role in strengthening inclusive early learning and school-age systems and advancing equitable outcomes

across Washington.

Washington's commitment to inclusion has ignited systemic change by partnering across systems to build educator capacity, and will continue to integrate HQI practices, and champion policies that empower young children with disabilities (and their families) to thrive. To do this, Washington will amplify their existing coaching networks, support community-led inclusion, honor Tribal traditions through culturally responsive-sustaining HQI, and support local districts and communities towards inclusive environments via collaborative state partnerships and policies. Moreover, OSPI with the support of ECTA will continue its efforts to develop an MOU and corresponding state guidance on interagency collaboration at the state level with recommendations for LEAs and community partners to implement inclusion in a mixed delivery system.

Provide additional information about this indicator (optional).
To further align PreK through age 22 system supports, OSPI used IDEA data (Indicators 4, 5, 6, 9, 10, and Significant Disproportionality) to identify local districts in need of intensive technical assistance across WA state, building upon the initial efforts of the IPTN.

The Inclusionary Practices (IP) and Reducing Restraint and Eliminating Isolation (RREI) Demonstration Sites are a key component of the Inclusionary Practices Technical Assistance Network (IPTN), funded by OSPI. These sites serve as learning hubs where educators and school leaders can observe and implement effective inclusionary practices tailored to different districts and school contexts across Washington State.

The IP Demonstration Sites showcase best practices in inclusive education at various school levels, from preschool to high school. The goal is to provide an action-oriented, transformational learning experience for visitors so they can bring inclusive practices back to their own schools and districts. The IP Demo Sites emphasize strengthening inclusive practices to improve student outcomes, reducing reliance on exclusionary practices, and improving equitable social and academic opportunities for all students.

The RREI Demonstration Sites focus on strategies to minimize the use of restraint and eliminate isolation practices in schools. These districts and schools' model proactive, supportive approaches that prioritize student well-being, social-emotional learning, and positive behavior supports.

Both IP and RREI Demonstration Sites are designed to provide real-world examples of how schools can implement effective inclusionary practices, improve student outcomes, and create safe, supportive learning environments. Through these demonstration sites, Washington State is making considerable progress toward ensuring all students, particularly those with disabilities, receive a high-quality education in inclusive settings.

To further support local districts across WA state not yet engaged in the ECSE Inclusion Champions Network, the University of Denver (UD) has been participating in the Inclusionary Practices Technical Assistance Network (IPTN). Through a series of ten 90-minute professional development sessions provided to early childhood program staff, UD uses the Comprehensive Inclusive Education in Washington: Connecting General Education and Individualized Education Programs (IEPs) to develop early childhood guidance for collaborative service delivery in inclusive, general education settings. The goal of this guidance is to support educators and leaders to create settings in which children and families experience belonging as members of their communities and children

are inclusively engaged and joyfully learning in their communities. These training and technical assistance opportunities have bolstered accountability and monitoring practice, as recorded through ongoing bi-monthly ECSE check-ins and the creation of multiple technical assistance modules.

It is the continued belief of the SSIP SDT that statewide trainings, aligned across the early learning landscape, paired with intensive data analyses, will result in an increase to inclusive settings, improved academic student outcomes, and a decrease in reported suspensions and expulsion rates of children as they enter the larger K-12 system.

17—Prior FFY Required Actions

None

17—Office Of Special Education Programs (OSEP) Response

None

17—Required Actions

None

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

Baseline Year	Baseline Data
2023	100%

Historical Data

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	*n/a*	*n/a*	*n/a*	*n/a*	100%

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)	0
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	9
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)	0
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)	9
Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected	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. Of the nine discipline-related findings issued during the reporting period, three were identified through a dispute resolution investigation, and six were identified through an intensive monitoring review, which included either an onsite visit or a virtual review.

All findings were related to requirements under the Individuals with Disabilities Education Act (IDEA) pertaining to discipline. However, these findings were identified in districts that did not meet the criteria for a significant discrepancy as defined for Indicator 4. As a result, the findings did not affect the districts' determinations or status under Indicator 4 and were therefore reported separately in Column B rather than under Indicator 4 of this report.

These findings reflect compliance issues identified through monitoring and enforcement activities outside of the Indicator 4 measurement methodology and demonstrate the State's ongoing oversight through multiple mechanisms, including dispute resolution and intensive monitoring processes.

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*:

Dispute Resolution:

For the three findings issued as part of a dispute resolution decision, the State verified that the local educational agency (LEA) was correctly implementing the applicable regulatory requirements based on updated data provided through a corrective action plan, which includes a multi-step verification process.

Verification activities were conducted by OSPI's Assistant Director of Dispute Resolution and

included a comprehensive review of documentation submitted by the LEA to demonstrate both correction of the individual instance(s) of noncompliance and appropriate implementation going forward. Required documentation varied depending on the nature of the noncompliance but typically included updated evaluations and/or individualized education programs (IEPs), revised policies, or procedures where applicable, evidence of the provision and completion of compensatory services, and other records demonstrating compliance with IDEA discipline requirements.

When corrective actions included staff training or professional development, the LEA was required to submit draft training materials to OSPI for review, feedback, and approval prior to implementation. Following approval, the LEA submitted evidence of staff participation, such as attendance records and agendas, along with further learning activities and evidence of ongoing implementation of learning done at trainings. This process allowed the State to verify that training content aligned with IDEA requirements and that staff responsible for implementation received the necessary instructions to support ongoing compliance for all students.

OSPI conducted follow-up with the LEA as needed until the Assistant Director of Dispute Resolution determined that the submitted documentation was sufficient to demonstrate correct implementation of the applicable regulatory requirements based on updated data. This included verification that corrective actions addressed the root cause of the noncompliance and were not limited to the individual student involved in the dispute.

In addition, OSPI confirmed through consultation with the Program Improvement Coordinator that the LEA did not have any outstanding corrective actions related to special education monitoring. This cross-program coordination further ensured that the LEA's compliance status was accurately assessed and that the identified noncompliance had been fully corrected.

State Monitoring:

For the six findings issued as part of a monitoring review, the following steps were taken to verify that the LEA was correctly implementing the regulatory requirements based on updated data.

Verification activities were conducted by special education administrators from the LEA's regional Educational Service District (ESD), under the direction of OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, observations, etc. The verification included a review of updated documentation, including student-level discipline documentation, functional behavioral assessments (FBAs), behavioral intervention plans (BIPs), and IEPs developed during the 2023-24 school year (i.e., after the original finding was issued), showing evidence that the LEA was correctly implementing the specific regulatory requirements for discipline.

The LEA and ESD provided a detailed summary and assurances of the actions taken to correct the identified non-compliance and the activities completed to verify the correction of the non-compliance, including verifying the LEA's compliance with IDEA requirements. These were submitted by LEA and ESD administrators through the IDEA Compliance Package (due from LEAs as soon as possible but no later than March 3, 2025, and from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed the LEA and ESD summaries to ensure:

- all identified areas of non-compliance within each individual student record had been

corrected.
- the dates of correction and verification were included, were in alignment with each other, and were for the current school year (i.e., after the finding was issued).
- the LEA described the identified root cause(s) for any system-level non-compliance, and the actions taken to correct the system directly correlated to the identified root cause(s).
- the sampling of updated documentation/data reports verified the LEA's 100 percent compliance with IDEA discipline requirements.
- the ESD verified all actions taken by the LEA; and
- The LEA and ESD administrator provided assurances that the information contained in the summaries was valid and accurate.

If any information was missing or concerns were noted, the OSPI program supervisor contacted the ESD director to let them know what was needed. The ESD director then worked with the LEA to address the OSPI reviewer's concerns.

OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the LEA through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI Assistant Director of Dispute Resolution.

Summary:

The results of these verification activities showed 100% compliance; all 9 LEAs were correctly implementing the identified disciplinary requirements.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:

Dispute Resolution:

For the three findings issued as part of a dispute resolution decision, the State implemented the following procedures to verify that each individual case of noncompliance was corrected, consistent with OSEP QA 23-01.

When corrective actions are ordered as a result of a dispute resolution investigation, the local educational agency (LEA) is required to complete all corrective actions identified in the Corrective Action Plan (CAP) issued with the decision and to submit documentation demonstrating completion to OSPI within the established timelines. While LEAs may use the CAP matrix provided by OSPI to organize and submit documentation, use of the matrix is optional; however, all required evidence must be submitted in a manner that clearly demonstrates correction of the noncompliance.

To verify correction at the individual student level and, where applicable, at the system level, LEAs must submit the specific documentation outlined in the CAP. Required documentation varies based on the nature of the noncompliance but typically includes updated evaluations and/or individualized education programs (IEPs), revised student records, evidence of the provision and completion of compensatory services, documentation of policy or procedure revisions, and records of staff training or professional development. When training or professional development is required as part of the corrective action, the LEA must first submit draft training materials to OSPI for review, feedback, and approval. Following implementation, the LEA must submit evidence of

staff participation, such as agendas and attendance records, to demonstrate completion.

Upon receipt of the required documentation, the OSPI Assistant Director of Dispute Resolution conducts a detailed review to determine whether the documentation satisfies the requirements outlined in the CAP and demonstrates that each individual instance of noncompliance has been corrected. This review includes verification that the corrective action addressed the specific regulatory requirement cited in the finding and that the correction was completed within the required timelines. OSPI engages in follow-up with the LEA as necessary to request additional documentation, clarification, or revisions until sufficient evidence is provided to demonstrate full correction of the noncompliance.

The Assistant Director documents the LEA's progress and completion of corrective actions using the CAP matrix, including a record of the actions taken, the dates documentation was received, and the date on which OSPI determined that the corrective action was completed and approved. Corrective actions are not considered closed until OSPI has verified, through review of updated documentation, that each individual case of noncompliance has been fully corrected.

State Monitoring:

For the six findings issued as part of a monitoring review, the following steps were taken to verify that each individual case of noncompliance was corrected.

The LEAs provided a summary of the actions taken to correct each individual instance of non-compliance to the Office of Superintendent of Public Instruction (OSPI) through the IDEA Compliance Package (due from LEAs as soon as possible but no later than March 3, 2025).

In order to verify that the LEAs corrected the identified non-compliance, verification activities were conducted by special education administrators from the LEA's regional Educational Service District (ESD), under the direction of OSPI. Verification activities included on-site visits and/or virtual meetings; staff interviews; data reviews; student record reviews (including discipline documentation, FBAs, BIPs, current IEPs/IEP amendments, etc.); observations; guidance documents provided to staff; professional development materials and attendee rosters; updated/revised policies, procedures, and practices manuals; staff meeting agendas; and more.

A detailed description of the specific actions taken to correct the child-specific non-compliance, and the documentation and activities completed to verify the corrections, were submitted by LEAs and ESDs administrators through the IDEA Compliance Package (due from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed the LEA and ESD summaries to ensure:

- all identified areas of non-compliance within each individual student record had been corrected.
- the dates of correction and verification were included, were in alignment with each other, and were for the current school year (i.e., after the finding was issued).
- the LEA described the identified root cause(s) for any system-level non-compliance, and the actions taken to correct the system directly correlated to the identified root cause(s).
- the sampling of documentation/data reports verified the LEA's compliance with IDEA requirements.
- the ESD verified all actions taken by the LEA; and
- The LEA and ESD administrator provided assurances that the information contained in the

summaries was valid and accurate, and that all individual instances of non-compliance had been corrected.

If any information was missing or concerns were noted in the LEA's summary of correction or the ESD's verification, the OSPI program supervisor contacted the ESD director to let them know what was needed. The ESD director then worked with the LEA to address the OSPI reviewer's concerns.

Summary:

The results of these verification activities showed 100% compliance; each individual case of noncompliance was corrected by the identified LEA.

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)	0
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	0
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)	0
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)	0
Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 9 due to various factors (e.g., additional findings related to other IDEA requirements). Not applicable.

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*: Not applicable.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected: Not applicable.

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)	0
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	0
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)	0
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)	0
Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 10 due to various factors (e.g., additional findings related to other IDEA requirements). Not applicable.

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*: Not applicable.

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected: Not applicable.

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)	52
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	0
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)	52
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)	0
Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected	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.
Not applicable.

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*:
As described under Indicator B-11 of this APR, OSPI issued a written notification of non-compliance in September 2024 to 52 districts that were determined to not meet the IDEA implementation requirements for Indicator B-11 (i.e., all districts that were not at 100% for this indicator) for the 2023-24 school year per the Indicator B-11 report submitted by districts on July 15, 2024.

Districts identified with non-compliance under Indicator B-11 conducted a root cause analysis to identify the cause(s) for the non-compliance, which included a review of policies, procedures, and/or practices that contributed to the noncompliance. Actions were taken by each district to address the specific, identified root cause(s) and were reported to the Office of Superintendent of Public Instruction (OSPI) through the IDEA Compliance Package (an Education Grants Management System (EGMS) application, due from districts as soon as possible but no later than March 3, 2025).

Actions taken by districts were specific to the identified root cause(s) and included activities like:
- providing professional development to district staff, including individuals responsible for data reporting, related to the timelines for initial evaluations and allowable exceptions.
- providing written guidance to staff related to the timelines and allowable exceptions.
- updating the district's procedures manual/standard operating procedures.
- implementing a new district practice or form to timely document an agreement to extend the evaluation timeline.
- implementing additional internal controls (i.e., supervision and oversight) to ensure the accuracy of data reporting for Indicator B-11 prior to submission of the data to OSPI; etc.

In order to verify that the districts corrected the identified non-compliance with the specific regulatory requirement(s) (systemic compliance) related to C.F.R. §300.301(c)(1), verification activities were conducted by special education administrators from the district's regional Educational Service District (ESD), in partnership with OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and observations. The verification also included a review of documentation, including updated data reports for the 2024-25 school year showing evidence of timely initial evaluations; student records; information from the district's student information system; guidance documents provided to staff; professional development materials and attendee rosters; updated/revised policies, procedures, and practices manuals; staff meeting agendas; and more.

A detailed description of the identified root cause(s), the specific actions taken to correct the systemic non-compliance, and the documentation and activities completed to verify the systemic correction, were submitted by district's and ESD administrators through the IDEA Compliance Package (due from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative if any additional documentation, information, or evidence was needed to validate the correction of the identified non-compliance. The results of these validations showed 100% compliance; all 52 districts were correctly implementing the specific regulatory requirements found in 34 C.F.R. §300.301(c)(1).

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:
As described under Indicator B-11 of this APR, the identified districts corrected and accounted for each individual, child-specific instance of noncompliance identified in the notification of findings. Special education representatives from the district's regional ESD, in partnership with OSPI, verified that the 52 districts' corrections, as summarized in the IDEA Compliance Package, were made. Verification activities included on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and/or observations.

The verification also included a review of documentation, including student records, information from the district's student information system, guidance documents provided to staff, professional development materials and attendee rosters, updated procedures manuals, staff meeting agendas, and more.

A detailed description of the identified root cause(s) for each individual, child-specific case of non-compliance, the specific actions taken to correct the child-specific non-compliance, and the documentation and activities completed to verify the corrections, were submitted by districts and ESD administrators through the IDEA Compliance Package. OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative to obtain any supplementary documentation, information, or evidence necessary to validate the correction of identified child-specific non-compliance instances.

In addition, OSPI's Special Education Data Team confirmed each individual student's status within the CEDARS system to ensure that each evaluation had been completed, although late.

The outcomes of these verifications demonstrated that all 52 districts successfully completed the initial evaluation, albeit late with delays, for every student for whom the initial evaluation was not

timely, unless the child was no longer under the district's jurisdiction. OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the child through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI special education complaint investigators.

All identified noncompliance from FFY 2023 for Indicator B-11 was corrected within one year of identification.

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)	41
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	0
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)	41
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)	0
Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected	0

As described under Indicator B-12 of this APR, OSPI issued a written notification of non-compliance in September 2024 to 41 LEAs that were determined to not meet the IDEA implementation requirements for Indicator B-12 (i.e., all LEAs that were not at 100% for this indicator) for the 2023-24 school year per the Indicator B-12 report submitted by LEAs on July 15, 2024.

In order to verify that the LEAs were correctly implementing the identified regulatory requirements related to C.F.R. §300.124(b), verification activities were conducted by special education administrators from the LEA's regional Educational Service District (ESD), under the direction of OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and observations. The verification included a review of documentation, such as updated data reports for the 2024-25 school year showing evidence of timely Part C to Part B transitions, student records including transition planning meetings, information from the district's student information system, and more.

The LEA and ESD provided a detailed summary and assurances of the actions taken to correct the identified non-compliance and the activities completed to verify the correction of the non-compliance, including verifying the LEA's compliance with IDEA requirements. These were submitted by LEA and ESD administrators through the IDEA Compliance Package (an Education Grants Management (EGMS) application due from LEAs as soon as possible but no later than March 3, 2025, and from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each LEA and ESD summary to ensure:

- all identified areas of non-compliance within each individual student record had been corrected.
- the dates of correction and verification were included, were in alignment with each other, and were for the current school year (i.e., after the finding was issued).
- the LEA described the identified root cause(s) for any system-level non-compliance, and the actions taken to correct the system directly correlated to the identified root cause(s).
- the sampling of documentation/data reports verified the LEA's compliance with IDEA requirements.

- the ESD verified all actions taken by the LEA; and
- the LEA and ESD administrator provided assurances that the information contained in the summaries was valid and accurate.

If any information was missing or concerns were noted, the OSPI program supervisor contacted the ESD director to let them know what was needed. The ESD director then worked with the LEA to address the OSPI reviewer's concerns.

The results of these validations showed 100% compliance; all 41 LEAs were correctly implementing the specific regulatory requirements found in 34 C.F.R. §300.124(b).

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:
As described under Indicator B-12 of this APR, the identified LEAs corrected and accounted for each individual, child-specific instance of noncompliance identified in the notification of findings.

LEAs identified with non-compliance under Indicator B-12 conducted a root cause analysis to identify the cause(s) for the non-compliance, which included a review of policies, procedures, and/or practices that contributed to the noncompliance. Actions were taken by each LEA to address the specific, identified root cause(s) and were reported to the Office of Superintendent of Public Instruction (OSPI) through the IDEA Compliance Package (due from LEAs as soon as possible but no later than March 3, 2025). Actions taken by LEAs were specific to the identified root cause(s) and included activities such as:

- partnering with Part C lead agency staff to develop and implement new timelines, procedures, and/or practices for timely notification and transition planning for identified children.
- providing professional development to LEA staff, including individuals responsible for data reporting, related to the timelines for the transition of Part C to Part B and allowable exceptions.
- providing written guidance to staff related to the Part C to Part B transition and allowable exceptions.
- updating the LEA's procedures manual/standard operating procedures.
- implementing a new LEA practice or form for documenting late Part C to Part B transitions and the reason for the late transition.
- implementing additional internal controls (i.e., supervision and oversight) to ensure the accuracy of data reporting for Indicator B-12 prior to submission of the data to OSPI; etc.

In order to verify that the LEAs corrected the identified non-compliance, verification activities were conducted by special education administrators from the LEA's regional Educational Service District (ESD), under the direction of OSPI. Verification activities included on-site visits and/or virtual meetings; staff interviews; data reviews; student record reviews; observations; guidance documents provided to staff; professional development materials and attendee rosters; updated/revised policies, procedures, and practices manuals; staff meeting agendas; and more. The documents reviewed as part of the verification depended on what actions the LEA took to correct. For example, if the LEA conducted a staff training, the ESD verifier reviewed the participant roster, along with the PowerPoint agenda, and/or other training materials, to confirm that the training took place as described in the LEA's correction summary (including date).

A detailed description of the identified root cause(s), the specific actions taken to correct the

systemic non-compliance, and the documentation and activities completed to verify the systemic correction, were submitted by LEAs and ESDs administrators through the IDEA Compliance Package (due from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each LEA and ESD summary to ensure:

- all identified areas of non-compliance within each individual student record had been corrected.
- the dates of correction and verification were included, were in alignment with each other, and were for the current school year (i.e., after the finding was issued).
- the LEA described the identified root cause(s) for any system-level non-compliance, and the actions taken to correct the system directly correlated to the identified root cause(s).
- the sampling of documentation/data reports verified the LEA's compliance with IDEA requirements.
- the ESD verified all actions taken by the LEA; and
- the LEA and ESD administrator provided assurances that the information contained in the summaries was valid and accurate.

If any information was missing or concerns were noted, the OSPI program supervisor contacted the ESD director to let them know what was needed. The ESD director then worked with the LEA to address the OSPI reviewer's concerns.

In addition, OSPI's Special Education Data Team confirmed each individual student's status within the CEDARS system to ensure that the C to B transition process had been completed, although late.

The outcomes of these verifications demonstrated that all 41 LEAs successfully completed the transition to Part B, albeit with delays, for every student for whom the transition was not executed promptly, unless the child was no longer under the LEA's jurisdiction. OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the child through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI special education complaint investigators.

All identified noncompliance from FFY 2023 for Indicator B-12 was corrected within one year of identification.

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, which 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)	6
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	0
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)	6
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)	0
Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected	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.
Not applicable.

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*:
As described under Indicator B-13 of this APR, OSPI issued a written notification of non-compliance in September 2024 to six districts that were determined to not meet the IDEA implementation requirements for Indicator B-13 (i.e., all districts that were not at 100% for this indicator) for the 2023-24 school year, as identified through monitoring reviews completed in spring/summer 2024.

Districts identified with non-compliance under Indicator B-13 were required to report on the correction of the non-compliance to the Office of Superintendent of Public Instruction (OSPI) through the IDEA Compliance Package (an Education Grants Management System (EGMS) application, due from districts as soon as possible but no later than March 3, 2025).

In order to verify that the districts corrected the identified non-compliance with the specific regulatory requirement(s) (systemic compliance) related to C.F.R. §300.320(b) and 300.321(b), verification activities were conducted by special education administrators from the district's regional Educational Service District (ESD), in partnership with OSPI. Verification activities included, but were not limited to, on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, observations, etc. The verification also included a review of updated

documentation, including IEPs developed during the 2024-25 school year, showing evidence that the district was correctly implementing the applicable regulatory requirements for secondary transition.

A detailed description of the specific actions taken to correct the non-compliance, and the documentation and activities completed to verify the systemic correction, were submitted by districts and ESD administrators through the IDEA Compliance Package (due from ESDs as soon as possible but no later than June 2, 2025). OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative if any additional documentation, information, or evidence was needed to validate the correction of the identified non-compliance. The results of these validations showed 100% compliance; all six districts were correctly implementing the specific regulatory requirements found in 34 C.F.R. §300.320(b) and 300.321(b).

Please describe, consistent with OSEP QA 23-01, how the State verified that each *individual case* of noncompliance was corrected:
As described under Indicator B-13 of this APR, the identified districts corrected and accounted for each individual, child-specific instance of noncompliance identified in the notification of findings. Special education representatives from the district's regional ESD, in partnership with OSPI, verified that the six districts' corrections, as summarized in the IDEA Compliance Package, were made. Verification activities included on-site visits and/or virtual meetings, staff interviews, data reviews, student record reviews, and/or observations.

The verification also included a review of documentation, including each student's current IEP and/or IEP amendment, information from the district's student information system, professional development and/or guidance documents provided to staff, etc.

A detailed description of the specific actions taken to correct each individual, child-specific case of non-compliance, and the documentation and activities completed to verify the corrections, were submitted by districts and ESD administrators through the IDEA Compliance Package. OSPI special education program supervisors reviewed each IDEA Compliance Package and worked with the ESD representative to obtain additional documentation, information, or evidence necessary to validate the correction of the identified child-specific non-compliance.

The outcomes of these verifications demonstrated that all six districts corrected each individual case of non-compliance unless the student was no longer under the district's jurisdiction. OSPI also confirmed that there were no existing, outstanding corrective actions under a State complaint or due process hearing decision for the child through review of due process actions submitted as part of the IDEA Compliance Package and consultation with the OSPI special education complaint investigators.

All identified noncompliance from FFY 2023 for Indicator B-13 was corrected within one year of identification.

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)	99
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	9
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)	99
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)	9
Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected	0

FFY 2024 SPP/APR Data

Number of findings of Noncompliance that were timely corrected (C1+C2)	Number of findings of Noncompliance that were identified FFY 2022 (A+B)	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
108	108	100%	100%	100%	Met Target	No Slippage

Percent of findings of noncompliance not corrected or not verified as corrected within one year of identification: 0.00%

Summary of Findings of Noncompliance identified in FFY 2023 Corrected in FFY 2024 (corrected within one year from identification of the noncompliance):

Number of findings of noncompliance the State identified during FFY 2023 (the period from July 1, 2023 through June 30, 2024)	108
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)	108
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

18 – Prior FFY Required Actions

None

18 - OSEP Response

None

18 - Required Actions

None

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:
Dr. Tania May

Title:
Assistant Superintendent Special Education

Email:
tania.may@k12.wa.us

Phone:
253-245-9541

Submitted on:
04/22/26 7:55:38 PM

DETERMINATION ENCLOSURES

RDA Matrix

2025 Part B Results-Driven Accountability Matrix

Percentage (%)	Determination
75.45%	Needs Assistance

Results and Compliance Overall Scoring

	Total Points Available	Points Earned	Score (%)
Results	20	12	60.00%
Compliance	22	20	90.91%

2025 Part B Results Matrix

Reading Assessment

Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment (2)	Grade 4	94%	0
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	90%	0
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	33%	2
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	28%	1
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	83%	1

Math Assessment

Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4	94%	0
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	90%	0
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	46%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	88%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	23%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	89%	1

Exiting Data

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	24	0
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma **	75	1

** 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."

2025 Part B Compliance Matrix

Part B Compliance Indicator	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2022	Score
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	0.00%	N/A	2
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	0.00%	N/A	2
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	0.00%	N/A	2
Indicator 11: Timely initial evaluation	99.47%	YES	2
Indicator 12: IEP developed and implemented by third birthday	96.97%	YES	2
Indicator 13: Secondary transition	66.47%	YES	0
Indicator 18: General Supervision	100.00%	YES	2
Timely and Accurate State-Reported Data	95.24%		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		

Data Rubric - FFY 2024 APR

Part B Timely and Accurate Data -- SPP/APR Data *(1)*

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1
18	1	1

APR Score Calculation

Subtotal	22
Timely Submission Points - If the FFY 2023 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) =	27

(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	0	1	2
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	19
Grand Total (Subtotal X 1.28571429) =	24.43

(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	27
B. 618 Grand Total	24.43
C. APR Grand Total (A) + 618 Grand Total (B) =	51.43
Total N/A Points in APR Data Table Subtracted from Denominator *(3)*	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	54.00
D. Subtotal (C divided by Denominator*) =	0. 9524
E. Indicator Score (Subtotal D x 100) =	95.24

** Due to privacy concerns the Department has chosen to suppress this calculation.*

(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

Submission Date: February 2026

SPP/APR Data

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

Part B 618 Data

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

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part B Child Count and Educational Environments	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 submitted to EDFacts aligns with the metadata survey responses provided by the state in the State Supplemental Survey IDEA (SSS IDEA) and Assessment Metadata survey in EMAPS. State-level data includes 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

Washington

School Year: 2024-25

Section A: Written, Signed Complaints

1	**Total number of written signed complaints filed.**	**199**
1.1	Complaints with reports issued.	145
1.1 (a)	Reports with findings of noncompliance	85
1.1 (b)	Reports within timelines	137
1.1 (c)	Reports within extended timelines	8
1.2	Complaints pending.	0
1.2 (a)	Complaints pending a due process hearing.	0
1.3	Complaints withdrawn or dismissed.	54

Section B: Mediation Requests

2	**Total number of mediation requests received through all dispute resolution processes.**	**96**
2.1	Mediations held.	43
2.1 (a)	Mediations held related to due process complaints.	6
2.1 (a) (i)	Mediation agreements related to due process complaints.	6
2.1 (b)	Mediations held not related to due process complaints.	37
2.1 (b) (i)	Mediation agreements not related to due process complaints.	28
2.2	Mediations pending.	0
2.3	Mediations withdrawn or not held.	53

Section C: Due Process Complaints

3	**Total number of due process complaints filed.**	**201**
3.1	Resolution meetings.	47
3.1 (a)	Written settlement agreements reached through resolution meetings.	8
3.2	Hearings fully adjudicated.	11
3.2 (a)	Decisions within timeline (includes expedited).	1
3.2 (b)	Decisions within extended timeline.	10
3.3	Due process complaints pending.	31
3.4	Due process complaints withdrawn or dismissed (including resolved without a hearing).	159

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

4	**Total number of expedited due process complaints filed.**	12
4.1	Expedited resolution meetings.	3
4.1 (a)	Expedited written settlement agreements.	2
4.2	Expedited hearings fully adjudicated.	1
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.	11

How The Department Made Determinations

How the Department Made Determinations (HTDMD) is on OSEP's IDEA Website. How the Department Made Determinations in 2026 will be posted in June 2026.

LEGAL NOTICE

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PUBLIC INSTRUCTION

Chris Reykdal | State Superintendent

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