STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

For reporting on
FFY 2024

Florida

PART B DUE February 2, 2026

U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202

Introduction

Instructions

Provide sufficient detail to ensure that the Secretary and the public are informed of and understand the State's systems designed to drive improved results for students with disabilities and to ensure that the State Educational Agency (SEA) and Local Educational Agencies (LEAs) meet the requirements of IDEA Part B. This introduction must include descriptions of the State's General Supervision System, Technical Assistance System, Professional Development System, Stakeholder Involvement, and Reporting to the Public.

Intro - Indicator Data

Executive Summary

In accordance with Title 20, section 1416(b)(2)(C)(ii)(II), United States Code (U.S.C.) of the Individuals with Disabilities Education Act (IDEA), each February, the Florida Department of Education (FDOE), Bureau of Exceptional Education and Student Services (BEESS) is required to submit an Annual Performance Report (APR) to the Office of Special Education Programs (OSEP) in Washington, D.C., regarding the state's overall performance in relation to the 18 State Performance Plan (SPP) Indicators. The SPP includes both results indicators and compliance indicators. Each SPP Indicator incorporates a measurable and rigorous target for each year of the SPP. Results targets are established by FDOE/BEESS and its stakeholders while compliance targets are established by OSEP. These targets were used as a basis for analyzing the state's data, and each LEA's data, for students with disabilities (SWDs).

Additional information related to data collection and reporting

FDOE Information Database: Section (s.) 1008.385(2), Florida Statutes (F.S.), mandated that each LEA and the FDOE develop and implement a comprehensive management information system made up of compatible components and links all levels of the state education system. The automated student information system was the instrument LEAs used to electronically transfer student records using state-defined elements and formats. In contrast, the automated staff information system served the same purpose for LEA personnel.

FDOE used the student information system. There were over 300 data elements. A complete list of the student database formats and data elements, can be viewed at https://www.fldoe.org/accountability/data-sys/database-manuals-updates/.

Surveys 1-4 were concurrent with the full-time equivalent survey weeks specified by the Commissioner of Education. Surveys 1-4 collected data on students in membership and attendance. Survey 5 was used to collect data about all students who were in membership at any time during the school year. Data sets used for purposes of the SPP/APR were gathered at the conclusion of each survey period.

OTHER DATA SOURCES

Additional sources of data were used to determine that Florida has met SPP goals. These data sources included:

• Bureau of Accountability Reporting and Measurement assessment results

• Parent involvement survey results

• Early childhood outcome results

• 60-day timeline data submitted by LEAs to BEESS

• Florida Education Training and Placement Information files

• Florida Department of Health Early Steps program data files

Number of Districts in your State/Territory during reporting year

83

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.

FDOE/BEESS exercised its general supervision responsibilities, including monitoring, for all LEAs and other public agencies involved in the provision of exceptional student education (ESE) and related services. To meet this requirement, FDOE/BEESS conducted on-site visits and desktop monitoring activities to identify and correct noncompliance at the individual student level and the systems level in accordance with guidance from State General Supervision Responsibilities Under Parts B and C of the IDEA (OSEP 23-01 July 24, 2023). FDOE also ensured compliance with IDEA Part B fiscal requirements through IDEA grant management and fiscal oversight processes, which are integrated into the FDOE's general supervision system.

Monitoring System

FDOE implemented a tiered system of compliance monitoring. All LEAs participated in annual desktop monitoring for the compliance processes. LEAs participated in on-site monitoring and technical assistance visits based on data gathered through this process. For more information visit: https://www.fldoe.org/academics/exceptional-student-edu/data/dms.stml

Desktop Monitoring for Compliance (Tiers 2 and 3)

The desktop monitoring process comprised universal, targeted and focused (Tier 1, Tier 2 and Tier 3) components to ensure that LEAs comply with all applicable laws while focusing on student outcomes. FDOE developed compliance protocols to align with IDEA Part B SPP/APR indicators. Desktop monitoring was a process where LEAs review components of their ESE programs. LEAs were responsible for completing protocols, identifying noncompliance and reporting required corrective actions. The ESE General Supervision Website (GSW) provided information and guidance for these protocols. Corrective action plans and noncompliance findings were reported and tracked at https://BEESSgsw.org.

On-Site Monitoring and Technical Assistance (Tier 3)

The purposes of the on-site monitoring and technical assistance were to improve outcomes for SWDs and to support LEAs in correcting identified noncompliance and strengthening implementation of IDEA Part B requirements.

Dispute Resolution

FDOE was responsible for the coordination, review and approval of the LEAs' policies and procedures, which aligned with state and federal regulations related to compliance. FDOE provided facilitated individual educational plan (IEP) meetings, mediation, investigations of formal state complaints, and oversight of the IDEA related due process hearing system.

For more information visit: https://www.fldoe.org/academics/exceptional-student-edu/data/dms.stml.

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

Student files were selected for review based on the specific IDEA Part B compliance indicator under review and the identification of potential noncompliance through monitoring activities and data analysis. File selection focused on student records associated with identified compliance concerns and was designated to verify both individual child-specific correction and systemic compliance. The number of student files selected varied by indicator and LEA size, and followed established, indicator-specific review protocols.

FDOE was correctly implementing the specific regulatory requirements (i.e., achieved 100 percent compliance with the relevant IDEA requirements) based on a review of updated data and information, such as data and information subsequently collected through integrated monitoring activities or the FDOE's data system (systemic compliance); and if applicable, had corrected each individual case of child-specific noncompliance, unless the child was no longer within the jurisdiction of the LEA, and no outstanding corrective action existed under a state complaint or due process hearing decision for the child (child-specific compliance).

FDOE maintained documentation and evidence demonstrating that the LEA had corrected each individual case of the previously noncompliant files, records, data files, or whatever data source was used to identify the original noncompliance (child-specific compliance), if applicable, and the review of updated data and information did not reveal any continued noncompliance (systemic compliance).

For Indicator 11, FDOE verified the correction of each individual case of noncompliance by requiring the LEAs identified to (1) submit the evaluation completion date for each student whose assessment was incomplete at the time of this indicator data submission or (2) explain why the evaluation of record is to be exempt from the dataset (e.g., the student left the LEA's authority prior to completion of the evaluation) starting in February 2024. Each of the tracked cases now had evaluation completion dates or had their exemptions explained, thus correcting all identified cases of individual noncompliance.

For Indicator 12, once noncompliance was identified, the LEA was required—beginning in March—to submit records for up to five children who reached age three during that month to determine whether required actions were completed in a timely manner. If fewer than five children reached age three in a given month, records for all applicable children (one through four) were reviewed. Record submission continued until the LEA demonstrated 100 percent compliance, at which point no additional records were required. After the bureau verified the LEA's findings, the noncompliance was considered corrected.

For Indicator 13, LEAs must submit student files based on the size of the LEA (small, medium, large, very large). Once they submit the files in the GSW, FDOE reviewed and requested the files for each LEA and if the LEA had identified noncompliance in addition to the other files. Once the bureau had verified the LEA findings, the correction of noncompliance was completed.

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

FDOE developed a web-based application for Indicator 11, which was accessed through the FDOE Single Sign-On platform. LEAs entered the number of parental consents obtained and the number of evaluations completed within and beyond the evaluation time. The application auto-calculated totals and percentages of evaluations completed within the 60-day timeline. When the number of consents and completed evaluations did not match, each LEA had to provide a brief explanation for each student and the anticipated completion date in a pop-up dialogue box (November-February).

FDOE used the GSW for Indicator 13, which was accessed by the LEAs for submitting student record information. If noncompliance is applicable, LEAs must upload student records for review in a secure ShareFile for FDOE to review.

For all other indicators, FDOE reviewed the data that was submitted by the LEAs through the survey data and GSW, and by self-reporting by the LEA.

Records reviewed for monitoring and SPP/APR reporting reflected the applicable reporting period for each indicator and were aligned with established survey windows and indicator-specific timelines. For more information, visit: https://www.fldoe.org/academics/exceptional-student-edu/data/dms.stml

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

FDOE issued findings by number of instances for Indicators 11, 12, and 13, and by LEA for Indicators 4, 9, and 10.

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).

FDOE does not use pre-finding correction.

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

FDOE utilized a differentiated approach that emphasized early intervention through targeted technical assistance and monitoring. When noncompliance was identified, FDOE, in collaboration with IDEA-funded state projects, provided technical assistance to LEAs to clarify regulatory requirements, conduct root cause analysis, and support the development and implementation of prescribed corrective action plans.

LEAs were required to demonstrate correction of each individual instance of noncompliance and evidence of correct implementation of applicable regulatory requirements at 100 percent compliance, as verified by the FDOE. FDOE monitored LEA progress and verified correction prior to closing findings.

Although not necessary during the 2024-25 school year, FDOE maintained the authority to apply more intensive enforcement actions, including the placement of conditions on IDEA Part B entitlement awards, if warranted by ongoing or repeated noncompliance.

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.

FDOE made annual determinations of LEA performance in accordance with section 616(d) of the IDEA and applicable federal guidance. Determinations were based on a comprehensive review of each LEA's performance and compliance data across multiple indicators, using a standardized scoring methodology.

FDOE evaluated LEAs using both compliance and performance criteria, including, but not limited to: SPP compliance indicators (e.g., Indicators 4, 9, 10, 11, 12 and 13), performance indicators (e.g., graduation, assessment participation and proficiency, and least restrictive environment), the timeliness and accuracy of IDEA sections 616 and 618 data submissions, correction of identified noncompliance, and the presence or absence of unresolved audit or monitoring findings. Each component was assigned weighted point values, and points earned were aggregated to generate overall compliance, performance and total scores.

Based on total points earned, LEAs were assigned one of the following determinations: Meets Requirements, Needs Assistance, Needs Intervention, or Needs Substantial Intervention, consistent with IDEA requirements. Determination thresholds were applied uniformly statewide to ensure consistency and transparency.

FDOE issued written notifications of determinations to LEAs on an annual basis between the months of July and August following final validation of data and completion of the FDOE's review process. Notifications included the LEA's determination status, summary scores and information regarding required follow-up actions, as applicable. Determinations informed the level of technical assistance, monitoring and enforcement applied through the FDOE's general supervision system.

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

https://www.fldoe.org/academics/exceptional-student-edu/data/

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.

FDOE implemented a coordinated, statewide technical assistance system to ensure the timely delivery of high-quality, evidence-based support to LEAs. The system was differentiated and data-driven, using SPP/APR results, monitoring findings and other general supervision data to align the intensity of support with LEA needs.

Universal supports were provided to all LEAs and included statewide guidance, technical assistance resources and professional learning disseminated through FDOE and IDEA-funded state projects' websites; ESE policies and procedures; FDOE-hosted presentations; web-based professional learning; annual LEA performance reports; family and community engagement activities; and use of the GSW for data submission and documentation. FDOE also collaborated with national technical assistance centers (e.g., the IDEA Data Center and the National Association of State Directors of Special Education) to support evidence-based implementation.

Supplemental supports were provided to LEAs with targeted needs and included focused technical assistance aligned to specific SPP/APR indicators; participation in size-alike problem-solving teams; targeted professional learning delivered by IDEA-funded state projects; increased communication and outreach; and structured LEA contact meetings.

Intensive supports were implemented for LEAs with the most significant or persistent needs and included individualized technical assistance and professional learning provided by IDEA-funded state projects; Level 3 on-site monitoring visits with required corrective actions; and state complaint procedures, including required corrective actions, as applicable.

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.

FDOE maintained a statewide professional development system to ensure service providers had the knowledge and skills necessary to effectively implement IDEA requirements and improve outcomes for children with disabilities. Professional development priorities were informed by SPP/APR data, monitoring results, and identified statewide and LEA-level needs.

FDOE delivered professional learning through in-person and virtual formats, including statewide and targeted trainings aligned to compliance and performance priorities. IDEA-funded state projects supported this system by providing evidence-based professional learning and technical assistance through virtual platforms and other delivery methods, ensuring consistency, accessibility and alignment across LEAs.

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.

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

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

YES

Number of Parent Members:

8

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.

FDOE engaged members of the State Advisory Panel for the Education of Exceptional Students, parent center staff, parents from local and statewide advocacy and advisory committees, parents from private schools, and individual parents in setting targets, analyzing data, developing improvement strategies, and evaluating progress through BEESS weekly memos, emails and scheduled meetings.

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.

FDOE shared the publicly posted proposed targets with parent center staff and LEAs. FDOE held meetings to plan, with their assistance, in widely disseminating the information as well as in reviewing interim data specific to representativeness for stakeholder responses to increase the feedback from groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities. BEESS also

supports an integrated stakeholder response system in collaboration with its IDEA-funded state projects, which aims to increase the opportunity for feedback in developing implementation activities designed to improve outcomes for children with disabilities.

Soliciting Public Input:

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

FDOE shared the publicly posted proposed targets with parent center staff and LEAs. FDOE held meetings to plan, with their assistance, in widely disseminating the information as well as in reviewing interim data specific to representativeness for stakeholder responses to increase the feedback from groups of parents to support the development of implementation activities designed to improve outcomes for children with disabilities. BEESS also supports an integrated stakeholder response system in collaboration with its IDEA-funded state projects, which aims to increase the opportunity for feedback in developing implementation activities designed to improve outcomes for children with disabilities.

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.

FDOE ensured that results of target setting, data analysis and improvement strategies were publicly posted on the FDOE website and open for public comment for 30 calendar days.

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.

Within 120 days following Florida's submission of the APR, LEA performance reports will be produced and posted on the FDOE website. The LEA Performance Reports are intended to be used as a tool for planning systemic improvement in exceptional education programs. The profiles contain information about state-level targets from Florida's SPP/APR, LEA performance on the indicators and whether the LEA met each state's targets. The reports are listed under the SEA/LEA Profiles and LEA Performance Reports heading. An example can be found here: https://www.fldoe.org/academics/exceptional-student-edu/data/ A complete copy of Florida's SPP/APR is also made publicly available on the FDOE website, https://www.fldoe.org/academics/exceptional-student-edu/.

Intro - Prior FFY Required Actions

OSEP notes that the State submitted verification that the attachments comply with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the attachments included in the State's FFY 2023 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachments available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

Response to actions required in FFY 2023 SPP/APR

FDOE corrected the compliance with Section 508 of the Rehabilitation Act of 1973, and the documents have been made publicly available. FDOE has one attachment for FFY 2024 SPP/APR and it is compliant with Section 508.

Intro - OSEP Response

Intro - Required Actions

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of youth with Individualized Education Programs (IEPs) exiting special education due to graduating with a regular high school diploma. (20 U.S.C. 1416 (a)(3)(A))

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in ED*Facts* file specification FS009.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to graduating with a regular high school diploma in the numerator and the number of all youth with IEPs who exited high school (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2024 SPP/APR, use data from 2023-2024), and compare the results to the target.

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

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

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma. If the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma are different, please explain.

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	85.89%

FFY	2019	2020	2021	2022	2023
Target >=	70.00%	82.30%	82.30%	86.75%	87.00%
Data	81.00%	88.96%	87.62%	87.51%	90.90%

Targets

FFY	2024	2025
Target >=	87.25%	87.50%

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

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)	27,339
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)	

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 receiving a certificate (c)	136
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)	
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)	2,143

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
27,339	29,618	90.90%	87.25%	92.31%	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.

FFY 2024: As outlined in s. 1003.4282, F.S., the Florida standard diploma graduation requirements for the cohort of students who graduated during the 2023-24 school year included the following courses, credits and assessments:

(a) Four credits in English Language Arts (ELA). — The four credits were in ELA I, II, III and IV. A student had to pass the statewide, standardized grade 10 ELA assessment, or earn a concordant score, in order to earn a standard high school diploma.

(b) Four credits in mathematics. —

1. A student had to earn one credit in Algebra I and one credit in Geometry. A student's performance on the statewide, standardized Algebra I end-of-course (EOC) assessment constituted 30 percent of the student's final course grade. A student had to pass the statewide, standardized Algebra I EOC assessment, or earn a comparative score, in order to earn a standard high school diploma. A student's performance on the statewide, standardized Geometry EOC assessment constituted 30 percent of the student's final course grade.

2. A student who earned an industry certification for which there was a statewide college credit articulation agreement approved by the State Board of Education could substitute the certification for one mathematics credit. Substitution could occur for up to two mathematics credits, except for Algebra I and Geometry. A student could earn two mathematics credits by successfully completing Algebra I through two full-year courses. A certified school counselor or the principal's designee had to advise the student that admission to a state university might require the student to earn three additional mathematics credits that were at least as rigorous as Algebra I.

3. A student who earned a computer science credit could substitute the credit for up to one credit of the mathematics requirement, with the exception of Algebra I and Geometry, if the commissioner identified the computer science credit as being equivalent in rigor to the mathematics credit. An identified computer science credit could not be used to substitute for both a mathematics and a science credit. A student who earned an industry certification in 3D rapid prototype printing could satisfy up to two credits of the mathematics requirement, with the exception of Algebra I, if the commissioner identified the certification as being equivalent in rigor to the mathematics credit or credits.

(c) Three credits in science. —

1. Two of the three required credits had a laboratory component. A student had to earn one credit in Biology I and two credits in equally rigorous courses. The statewide, standardized Biology I EOC assessment constituted 30 percent of the student's final course grade.

2. A student who earned an industry certification for which the State Board of Education approved a statewide college credit articulation agreement could substitute the certification for one science credit, except for Biology I.

3. A student who earned a computer science credit could substitute the credit for up to one credit of the science requirement, except for Biology I, if the commissioner identified the computer science credit as being equivalent in rigor to the science credit. An identified computer science credit could not be used to substitute for both a mathematics and a science credit.

(d) Three credits in social studies. — A student had to earn one credit in United States History; one credit in World History; one-half credit in economics; and one-half credit in United States Government, which included a comparative discussion of political ideologies, such as communism and totalitarianism, that conflicted with the principles of freedom and democracy essential to the founding principles of the United States. The United States History EOC assessment constituted 30 percent of the student's final course grade. Beginning with the 2021–22 school year, students taking the United States Government course were required to take the assessment of civic literacy identified by the State Board of Education pursuant to s. 1007.25(5). Students earning a passing score on the assessment were exempt from the postsecondary civic literacy assessment required by s. 1007.25(5).

(e) One credit in fine or performing arts, speech and debate, or career and technical education. — A practical arts course that incorporated artistic content and techniques of creativity, interpretation, and imagination satisfied the one-credit requirement in fine or performing arts, speech and debate, or career and technical education. Eligible practical arts courses were identified in the Course Code Directory.

(f) One credit in physical education. — Physical education included the integration of health. Participation in an interscholastic sport at the junior varsity or varsity level for two full seasons satisfied the one-credit requirement in physical education. A district school board could not require that the one credit in physical education be taken during the 9th grade year. Completion of two years of marching band satisfied the one-credit requirement in physical education or the one-credit requirement in performing arts. This credit could not be used to satisfy the personal fitness requirement or the requirement for adaptive physical education under an IEP or Section 504 Plan. Completion of one semester with a grade of "C" or better in a marching band class, a

physical activity class that required participation in marching band activities as an extracurricular activity, or a dance class satisfied one-half credit in physical education or one-half credit in performing arts.

(g) Credits in electives. — LEAs had to develop and offer coordinated electives so that a student could develop knowledge and skills in his or her area of interest, such as electives with a STEM or liberal arts focus. Such electives included opportunities for students to earn college credit, including industry-certified career education programs or series of career-themed courses that resulted in industry certification or articulated into the award of college credit, or career education courses for which there was a statewide or local articulation agreement and which led to college credit. A student entering grade 9 before the 2023-24 school year had to earn eight credits in electives. A student entering grade 9 in the 2023-24 school year or thereafter had to earn seven and one-half credits in electives.

(h) One-half credit in personal financial literacy. — Beginning with students entering grade 9 in the 2023-24 school year, each student had to earn one-half credit in personal financial literacy and money management.

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)

YES

If yes, explain the difference in conditions that youth with IEPs must meet.

FFY 2024: As outlined in s. 1008.22, F.S., Florida SWDs were required to meet the statutory requirements of all students to graduate. However, for SWDs who had taken the statewide, standardized assessment with allowable accommodations at least once and had not earned the required score necessary for graduation, the assessment results could have been waived. A waiver of standardized assessment results could have been granted by the IEP team to an SWD as provided by s. 1008.22(3)(d), F.S. For a student to have been considered for a statewide, standardized assessment results waiver, the results had to meet the following criteria:

1. The student had to be identified as an SWD, as defined in s. 1007.02, F.S.: The term “student with a disability” meant a student who was documented as having an intellectual disability; a hearing impairment, including deafness; a speech or language impairment; a visual impairment, including blindness; an emotional or behavioral disability; an orthopedic or other health impairment; an autism spectrum disorder; a traumatic brain injury; or a specific learning disability, including, but not limited to, dyslexia, dyscalculia, or developmental aphasia.

2. The student had to have an IEP.

3. The student had to have taken the statewide, standardized assessment with appropriate allowable accommodations at least once.

Per s. 1008.22(3)(d)2., F.S., the IEP team had to decide whether a statewide, standardized assessment accurately measured the student’s abilities, considering all allowable accommodations for SWDs.

Provide additional information about this indicator (optional)

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

Same data as used for reporting to the Department under section 618 of the Individuals with Disabilities Education Act (IDEA), using the definitions in ED*Facts* file specification FS009.

Measurement

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to dropping out in the numerator and the number of all youth with IEPs who exited special education (ages 14-21) in the denominator.

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the section 618 exiting data for the year before the reporting year (e.g., for the FFY 2024 SPP/APR, use data from 2023-2024), and compare the results to the target.

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

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	9.90%

FFY	2019	2020	2021	2022	2023
Target <=	9.50%	11.90%	11.90%	9.25%	9.00%
Data	9.86%	9.45%	11.95%	11.86%	8.68%

Targets

FFY	2024	2025
Target <=	8.75%	8.25%

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

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)	27,339
SY 2023-24 Children with Disabilities (IDEA) Exiting Special Education	03/05/2025	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a state-defined alternate diploma (b)	

Source	Date	Description	Data
(EDFacts file spec FS009; Data group 85)			
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)	136
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)	
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)	2,143

FFY 2024 SPP/APR Data

Number of youth with IEPs (ages 14-21) who exited special education due to dropping out	Number of all youth with IEPs who exited special education (ages 14-21)	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
2,143	29,618	8.68%	8.75%	7.24%	Met target	No Slippage

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

The following scenarios detail the specific situations where a student would have been identified as dropping out of school during the 2023-24 school year:

The student was expected to attend school but did not enter as expected for unknown reasons, and documented efforts to locate the student were maintained as required by s. 1003.26, F.S.

The student was age 16 or older, left school voluntarily with no intention of returning, and had filed a formal declaration of intent to terminate school enrollment per s. 1003.21, F.S.

The student was withdrawn from school due to court action (excluding Department of Juvenile Justice students).

The student was withdrawn from school due to nonattendance after all procedures outlined in ss. 1003.26 and 1003.27, F.S., had been followed.

The student was withdrawn from school due to medical reasons and was unable to receive educational services, including those provided through the hospital/homebound program.

The student was withdrawn from school due to being expelled and was not provided any educational services.

The student's whereabouts were unknown, and documented efforts to locate the student were maintained as required by s. 1003.26, F.S.

The student was withdrawn from school for any other reason not listed above.

Is there a difference in what counts as dropping out for youth with IEPs? (yes/no)

NO

If yes, explain the difference in what counts as dropping out for youth with IEPs.

Provide additional information about this indicator (optional).

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3A. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* file specifications FS185 and 188.

Measurement

A. Participation rate percent = [(# of children with IEPs participating in an assessment) divided by the (total # of children with IEPs enrolled during the testing window)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The participation rate is based on all children with IEPs, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 C.F.R. §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3A: Provide separate reading/language arts and mathematics participation rates for children with IEPs for each of the following grades: 4, 8, & high school. Account for ALL children with IEPs, in grades 4, 8, and high school, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	92.76%
Reading	B	Grade 8	2020	85.58%
Reading	C	Grade HS	2020	81.64%
Math	A	Grade 4	2020	93.77%
Math	B	Grade 8	2020	86.49%
Math	C	Grade HS	2020	80.71%

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

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

FFY 2024 Data Disaggregation from ED*Facts*

Data Source:

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

Date:

01/07/2026

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	36,157	34,520	61,661
b. Children with IEPs in regular assessment with no accommodations (3)	31,307	29,173	51,434
c. Children with IEPs in regular assessment with accommodations (3)	1,700	789	697
d. Children with IEPs in alternate assessment against alternate standards	2,581	3,297	6,240

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)	35,775	37,519	57,517
b. Children with IEPs in regular assessment with no accommodations (3)	8,036	12,007	47,541
c. Children with IEPs in regular assessment with accommodations (3)	24,521	20,618	0
d. Children with IEPs in alternate assessment against alternate standards	2,569	3,295	6,305

(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	35,588	36,157	Not Valid and Reliable	95.00%	98.43%	Met target	N/A
B	Grade 8	33,259	34,520	Not Valid and Reliable	95.00%	96.35%	Met target	N/A
C	Grade HS	58,371	61,661	Not Valid and Reliable	95.00%	94.66%	Did not meet target	N/A

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	35,126	35,775	Not Valid and Reliable	95.00%	98.19%	Met target	N/A
B	Grade 8	35,920	37,519	Not Valid and Reliable	95.00%	95.74%	Met target	N/A
C	Grade HS	53,846	57,517	Not Valid and Reliable	95.00%	Not Valid and Reliable	N/A	N/A

Regulatory Information

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

Public Reporting Information

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

https://www.fldoe.org/file/7672/databook25.xlsx

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

None

3A - OSEP Response

OSEP cannot determine if the data are valid and reliable. Due to data quality concerns with the State's assessment data, the FFY 2024 data for High School Math are being suppressed. Therefore, OSEP cannot determine whether the State met its target.

3A - Required Actions

Indicator 3B: Proficiency for Children with IEPs Against Grade Level Academic Achievement Standards

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3B. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* file specifications FS175 and 178.

Measurement

B. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the regular assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3B: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the regular assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	22.82%
Reading	B	Grade 8	2020	16.15%
Reading	C	Grade HS	2020	15.10%
Math	A	Grade 4	2020	28.08%
Math	B	Grade 8	2020	22.01%
Math	C	Grade HS	2020	14.03%

Targets

Subject	Group	Group Name	2024	2025
Reading	A >=	Grade 4	27.00%	27.00%
Reading	B >=	Grade 8	22.00%	22.00%
Reading	C >=	Grade HS	21.50%	21.50%
Math	A >=	Grade 4	31.00%	31.50%
Math	B >=	Grade 8	27.00%	27.50%
Math	C >=	Grade HS	20.00%	21.00%

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

FFY 2024 Data Disaggregation from ED*Facts*

Data Source:

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

Date:

01/07/2026

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	33,007	29,962	52,131
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	9,798	7,143	13,858
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	358	136	151

Data Source:

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

Date:

01/07/2026

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the regular assessment	32,557	32,625	47,541
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	5,167	6,667	12,317
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	7,438	5,906	0

(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	10,156	33,007	Not Valid and Reliable	27.00%	30.77%	Met target	N/A
B	Grade 8	7,279	29,962	Not Valid and Reliable	22.00%	24.29%	Met target	N/A

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient Against Grade Level Academic Achievement Standards	Number of Children with IEPs who Received a Valid Score and for whom a Proficiency Level was Assigned for the Regular Assessment	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
C	Grade HS	14,009	52,131	Not Valid and Reliable	21.50%	26.87%	Met target	N/A

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	12,605	32,557	Not Valid and Reliable	31.00%	38.72%	Met target	N/A
B	Grade 8	12,573	32,625	Not Valid and Reliable	27.00%	38.54%	Met target	N/A
C	Grade HS	12,317	47,541	Not Valid and Reliable	20.00%	Not Valid and Reliable	N/A	N/A

Regulatory Information

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

Public Reporting Information

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

https://www.fldoe.org/academics/exceptional-student-edu/data/

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

None

3B - OSEP Response

OSEP cannot determine if the data are valid and reliable. Due to data quality concerns with the State's assessment data, the FFY 2024 data for High School Math are being suppressed. Therefore, OSEP cannot determine whether the State met its target.

3B - Required Actions

Indicator 3C: Proficiency for Children with IEPs Against Alternate Academic Achievement Standards

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3C. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* file specifications FS175 and 178.

Measurement

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against alternate academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned for the alternate assessment)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3C: Proficiency calculations in this SPP/APR must result in proficiency rates for children with IEPs on the alternate assessment in reading/language arts and mathematics assessments (separately) in each of the following grades: 4, 8, and high school, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	56.53%
Reading	B	Grade 8	2020	58.33%
Reading	C	Grade HS	2020	60.98%
Math	A	Grade 4	2020	55.96%
Math	B	Grade 8	2020	62.05%
Math	C	Grade HS	2020	62.46%

Targets

Subject	Group	Group Name	2024	2025
Reading	A >=	Grade 4	57.50%	57.50%
Reading	B >=	Grade 8	59.00%	59.00%
Reading	C >=	Grade HS	62.00%	62.00%
Math	A >=	Grade 4	57.00%	57.00%
Math	B >=	Grade 8	63.00%	63.00%
Math	C >=	Grade HS	63.50%	63.50%

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students.

Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

FFY 2024 Data Disaggregation from ED*Facts*

Data Source:

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

Date:

01/07/2026

Reading Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	2,581	3,297	6,240
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	1,200	1,734	3,384

Data Source:

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

Date:

01/07/2026

Math Assessment Proficiency Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs who received a valid score and a proficiency level was assigned for the alternate assessment	2,569	3,295	6,305
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	1,290	1,857	3,345

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	1,200	2,581	Not Valid and Reliable	57.50%	46.49%	Did not meet target	N/A
B	Grade 8	1,734	3,297	Not Valid and Reliable	59.00%	52.59%	Did not meet target	N/A
C	Grade HS	3,384	6,240	Not Valid and Reliable	62.00%	54.23%	Did not meet target	N/A

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	1,290	2,569	Not Valid and Reliable	57.00%	50.21%	Did not meet target	N/A
B	Grade 8	1,857	3,295	Not Valid and Reliable	63.00%	56.36%	Did not meet target	N/A
C	Grade HS	3,345	6,305	Not Valid and Reliable	63.50%	53.05%	Did not meet target	N/A

Regulatory Information

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

Public Reporting Information

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

https://www.fldoe.org/academics/exceptional-student-edu/data/

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

None

3C - OSEP Response

3C - Required Actions

Indicator 3D: Gap in Proficiency Rates For Children with IEPs and All Students Against Grade Level Academic Achievement Standards

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

A. Participation rate for children with IEPs.

B. Proficiency rate for children with IEPs against grade level academic achievement standards.

C. Proficiency rate for children with IEPs against alternate academic achievement standards.

D. Gap in proficiency rates for children with IEPs and all students against grade level academic achievement standards.

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

Data Source

3D. Same data as used for reporting to the Department under Title I of the ESEA, using ED*Facts* file specifications FS175 and 178.

Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2024-2025 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2024-2025 school year)]. Calculate separately for reading and math. Calculate separately for grades 4, 8, and high school. The proficiency rate includes all children enrolled for a full academic year and those not enrolled for a full academic year.

Instructions

Describe the results of the calculations and compare the results to the targets. Provide the actual numbers used in the calculation.

Include information regarding where to find public reports of assessment participation and performance results, as required by 34 CFR §300.160(f), i.e., a link to the Web site where these data are reported.

Indicator 3D: Gap calculations in this SPP/APR must result in the proficiency rate for children with IEPs were proficient against grade level academic achievement standards for the 2024-2025 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2024-2025 school year. Calculate separately for reading/language arts and math in each of the following grades: 4, 8, and high school, including both children enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

3D - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	29.57
Reading	B	Grade 8	2020	36.43
Reading	C	Grade HS	2020	35.23
Math	A	Grade 4	2020	25.04
Math	B	Grade 8	2020	31.81
Math	C	Grade HS	2020	20.01

Targets

Subject	Group	Group Name	2024	2025
Reading	A <=	Grade 4	27.00	26.00
Reading	B <=	Grade 8	32.00	31.00
Reading	C <=	Grade HS	32.00	30.00
Math	A <=	Grade 4	24.00	22.00
Math	B <=	Grade 8	30.00	27.00
Math	C <=	Grade HS	16.00	14.00

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

FFY 2024 Data Disaggregation from ED*Facts*

Data Source:

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

Date:

01/07/2026

Reading Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	201,365	212,890	420,433
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	33,007	29,962	52,131
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	113,682	117,232	238,441
d. All students in regular assessment with accommodations scored at or above proficient against grade level	591	250	269
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	9,798	7,143	13,858
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	358	136	151

Data Source:

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

Date:

01/07/2026

Math Assessment Proficiency Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. All Students who received a valid score and a proficiency was assigned for the regular assessment	195,062	266,805	312,865
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	32,557	32,625	47,541
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	112,038	172,910	145,425
d. All students in regular assessment with accommodations scored at or above proficient against grade level	9,851	7,625	0
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	5,167	6,667	12,317
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	7,438	5,906	0

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

FFY 2024 SPP/APR Data: Reading Assessment

Group	Group Name	Proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards	Proficiency rate for all students scoring at or above proficient against grade level academic achievement standards	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A	Grade 4	30.77%	56.75%	Not Valid and Reliable	27.00	25.98	Met target	N/A
B	Grade 8	24.29%	55.18%	Not Valid and Reliable	32.00	30.89	Met target	N/A
C	Grade HS	26.87%	56.78%	Not Valid and Reliable	32.00	29.90	Met target	N/A

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	38.72%	62.49%	Not Valid and Reliable	24.00	23.77	Met target	N/A
B	Grade 8	38.54%	67.67%	Not Valid and Reliable	30.00	29.13	Met target	N/A
C	Grade HS	25.91%	46.48%	Not Valid and Reliable	16.00	Not Valid and Reliable	N/A	N/A

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

OSEP cannot determine if the data are valid and reliable. Due to data quality concerns with the State's assessment data, the FFY 2024 data for High School Math are being suppressed. Therefore, OSEP cannot determine whether the State met its target.

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

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

The State may only include, in both the numerator and the denominator, LEAs that met that State established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2024 SPP/APR, use data from 2023-2024), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

-- Option 2: The rates of suspensions and expulsions for children with IEPs to rates of suspensions and expulsions for nondisabled children within the LEAs.

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

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

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

Because the Measurement Table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2023-2024 school year, those 100 LEAs would have reported section 618 data in 2023-2024 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2024-2025, suspension/expulsion data from those 15 new LEAs would not be in the 2023-2024 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2024 SPP/APR submission, States must use the number of LEAs reported in 2023-2024 (which can be found in the FFY 2023 SPP/APR introduction).

Indicator 4A: Provide the actual numbers used in the calculation (based upon LEAs that met the minimum n and/or cell size requirement, if applicable). If significant discrepancies occurred, describe how the State educational agency reviewed and, if appropriate, revised (or required the affected local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with applicable requirements.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 23-01, dated July 24, 2023.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

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

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	19.40%

FFY	2019	2020	2021	2022	2023
Target <=	4.00%	12.90%	10.00%	9.00%	9.00%
Data	9.30%	12.90%	0.00%	5.13%	2.38%

Targets

FFY	2024	2025
Target <=	8.50%	8.30%

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

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).

Florida used a minimum nsize of 10 for Indicator 4A. The minimum n-size represents the number of SWDs within an LEA who received 10 or more days of in-school or out-of-school suspension or expulsion during the reporting year. LEAs were included in Indicator 4A calculations only when they had at least 10 students meeting this criterion. If an LEA did not meet this threshold, the LEA was not included in the calculation and its data were reported as "N/R – Data suppressed to protect confidentiality."

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.

Florida's minimum cell size of 10 was selected to ensure compliance regarding data validity, reliability and protection of personally identifiable information. A threshold of 10 provided sufficient suspension events to generate stable, interpretable rates and prevented unintended disclosure of student identities in smaller LEAs where suspension events occurred infrequently.

This definition was deemed reasonable based on state analyses indicating that lower thresholds yielded unstable rates that could misidentify LEAs and align with current data practices in Florida. The minimum cell size was established with stakeholder input, including feedback from LEA representatives, the State Advisory Panel and IDEA-funded state project partners.

By applying the minimum cell size of 10, Florida ensured that only LEAs with a sufficient number of suspension events were included, allowing the State to appropriately analyze trend patterns regarding students with and without disabilities, and accurately identify LEAs with significant discrepancies without false positives driven by small numbers.

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

The minimum cell size of 10 did not differ from the prior SPP/APR reporting period.

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

Since the minimum cell size did not change from the prior reporting period, no explanation for a change is required.

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.

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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
2	40	2.38%	8.50%	5.00%	Met target	No Slippage

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

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

State's definition of "significant discrepancy" and methodology

For the reporting year, Florida measured whether each LEA had a significant discrepancy in the rates of out-of-school suspensions and expulsions of 10 or more cumulative days for SWDs. An LEA was identified as having a significant discrepancy if its rate ratio was 3.0 or greater.

The calculation used the following methodology: The numerator was the number of SWDs who were suspended out of school or expelled for more than 10 cumulative days, divided by the total-year enrollment of SWDs, multiplied by 100. The denominator was the number of students without disabilities who were suspended out-of-school or expelled for more than 10 cumulative days, divided by the total-year enrollment of students without disabilities, multiplied by 100.

The rate ratio was derived by dividing the SWD rate by the nondisabled student rate. LEAs that met or exceeded the established threshold of 3.0 were considered to have demonstrated significant discrepancy for Indicator 4A.

Provide additional information about this indicator (optional)

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.

FDOE reviewed LEA policies, procedures and practices related to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and the provision of procedural safeguards. This review was completed in accordance with s. 1003.57(1)(b)1., F.S., which required LEAs to submit proposed procedures for the provision of special instruction and services for exceptional students once every three years, and FDOE approved these documents pursuant to Rule 6A-6.03411, F.A.C., as approval was necessary for each LEA's use of weighted cost factors under the Florida Education Finance Program. The procedures submitted by LEAs served as the foundation for the identification, evaluation, eligibility determination and placement of students receiving ESE services. They were required components of each LEA's application for funds under IDEA. Through this process, FDOE ensured that LEA policies and procedures were aligned with federal and state requirements and were designed to support appropriate access, supports and protections for SWDs.

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.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

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

4A - Prior FFY Required Actions

None

4A - OSEP Response

4A - Required Actions

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

A. Percent of local educational agencies (LEA) that have a significant discrepancy, as defined by the State, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and

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

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

Data Source

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

Measurement

Percent = [(# of LEAs that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of suspensions and expulsions of more than 10 days during the school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of LEAs in the State that meet the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State's definition of "significant discrepancy."

Instructions

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

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

The State may only include, in both the numerator and the denominator, LEAs that met that State established n and/or cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

Describe the results of the State's examination of the data for the year before the reporting year (e.g., for the FFY 2024 SPP/APR, use data from 2023-2024), including data disaggregated by race and ethnicity to determine if significant discrepancies, as defined by the State, are occurring in the rates of long-term suspensions and expulsions (more than 10 days during the school year) of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State's examination must include one of the following comparisons:

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

-- Option 2: The rates of suspensions and expulsions for children with IEPs to the rates of suspensions and expulsions for nondisabled children within the LEAs

In the description, specify which method the State used to determine possible discrepancies and explain what constitutes those discrepancies.

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

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

Because the Measurement Table requires that the data examined for this indicator are lag year data, States should examine the section 618 data that was submitted by LEAs that were in operation during the school year before the reporting year. For example, if a State has 100 LEAs operating in the 2023-2024 school year, those 100 LEAs would have reported section 618 data in 2023-2024 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2024-2025, suspension/expulsion data from those 15 new LEAs would not be in the 2023-2024 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2023 SPP/APR submission, States must use the number of LEAs reported in 2023-2024 (which can be found in the FFY 2023 SPP/APR introduction).

Indicator 4B: Provide the following: (a) the number of LEAs that met the State-established n and/or cell size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, as defined by the State, by race or ethnicity, in the rates of long-term suspensions and expulsions (more than 10 days during the school year) for children with IEPs; and (b) the number of those LEAs in which policies, procedures or practices contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Provide detailed information about the timely correction of noncompliance as noted in OSEP's response for the previous SPP/APR. If discrepancies occurred and the LEA with discrepancies had policies, procedures or practices that contributed to the significant discrepancy, as defined by the State, and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 23-01, dated July 24, 2023.

If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

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

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2009	0.00%

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

Targets

FFY	2024	2025
Target	0%	0%

FFY 2024 SPP/APR Data

Has the state established a minimum n/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).

For Indicator 4B, Florida used a minimum cell size of 10. The minimum cell size represented the number of SWDs within a specific racial or ethnic subgroup in an LEA who received 10 or more cumulative days of out-of-school suspension or expulsion during the reporting year. LEAs were included in Indicator 4B calculations only when they had at least 10 SWDs in the identified racial or ethnic subgroup who met this criterion. If an LEA did not meet the minimum cell size, the LEA was not included in the calculation, and its data were reported as "N/R – Data suppressed to protect confidentiality."

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.

Florida's minimum cell size of 10 was selected to ensure compliance regarding data validity, reliability and protection of personally identifiable information. A threshold of 10 provided sufficient suspension events to generate stable, interpretable rates and prevented unintended disclosure of student identities in smaller LEAs where suspension events occurred infrequently.

This definition was deemed reasonable based on state analyses indicating that lower thresholds yielded unstable rates that could misidentify LEAs and align with current data practices in Florida. The minimum cell size was established with stakeholder input, including feedback from LEA representatives, the State Advisory Panel for the Education of Exceptional Students, and IDEA-funded state project partners.

By applying the minimum cell size of 10, Florida ensured that only LEAs with a sufficient number of suspension events were included, allowing the State to appropriately analyze racial and ethnic patterns and accurately identify LEAs with significant discrepancies without false positives driven by small numbers.

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

The minimum cell size of 10 did not differ from the prior SPP/APR reporting period.

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

Since the minimum cell size did not change from the prior reporting period, no explanation for a change is required.

If yes, the State may only include, in both the numerator and the denominator, LEAs that met the State-established n/cell size. If the State used a minimum n and/or cell size requirement, report the number of LEAs totally excluded from the calculation as a result of this requirement.

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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
13	0	34	0.00%	0%	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))

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

For the reporting year, Florida measured whether each LEA had a significant discrepancy in the rates of out-of-school suspensions and expulsions of 10 or more cumulative days for SWDs within a specific racial or ethnic group. An LEA was identified as having a significant discrepancy if its rate ratio was 3.0 or greater.

The calculation used the following methodology. The numerator was the number of SWDs from the selected racial or ethnic group who were suspended out-of-school or expelled for more than 10 cumulative days, divided by the total-year enrollment of SWDs in that racial or ethnic group, multiplied by 100. The denominator was the number of all students without disabilities who were suspended out-of-school or expelled for more than 10 cumulative days, divided by the total-year enrollment of all students without disabilities, multiplied by 100.

Provide additional information about this indicator (optional)

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.

FDOE completed its review in accordance with section 1003.57(1)(b)1., F.S., which required district school boards to submit proposed procedures for the provision of special instruction and services for exceptional students once every three years, and FDOE approved these documents pursuant to Rule 6A-6.03411, F.A.C., as approval was necessary for each LEA's use of weighted cost factors under the Florida Education Finance Program. The procedures submitted by LEAs served as the foundation for the identification, evaluation, eligibility determination and placement of students receiving ESE services. They were required components of each LEA's application for funds under IDEA.

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.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

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

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

4B - Prior FFY Required Actions

None

4B - OSEP Response

4B- Required Actions

Indicator 5: Education Environments (children 5 (Kindergarten) - 21)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served:

A. Inside the regular class 80% or more of the day;

B. Inside the regular class less than 40% of the day; and

C. In separate schools, residential facilities, or homebound/hospital placements.

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

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED*Facts* file specification FS002.

Measurement

A. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class 80% or more of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

B. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served inside the regular class less than 40% of the day) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

C. Percent = [(# of children with IEPs aged 5 who are enrolled in kindergarten and aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 5 who are enrolled in kindergarten and aged 6 through 21 with IEPs)] times 100.

Instructions

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

States must report five-year-old children with disabilities who are enrolled in kindergarten in this indicator. Five-year-old children with disabilities who are enrolled in preschool programs are included in Indicator 6.

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

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

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2019	2020	2021	2022	2023
A	2005	Target >=	85.00%	76.73%	77.69%	77.70%	78.00%
A	54.40%	Data	76.73%	76.98%	78.12%	78.27%	78.41%
B	2005	Target <=	6.00%	13.35%	13.35%	13.20%	12.90%
B	23.20%	Data	13.35%	13.08%	12.60%	13.26%	13.73%
C	2005	Target <=	1.00%	3.23%	3.23%	3.00%	2.90%
C	3.00%	Data	3.23%	3.11%	3.06%	2.95%	2.89%

Targets

FFY	2024	2025
Target A >=	78.50%	78.60%
Target B <=	12.80%	12.70%
Target C <=	2.80%	2.70%

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	Total number of children with IEPs aged 5 (kindergarten) through 21	425,521
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	333,259
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	60,757
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	8,921
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	522
SY 2024-25 Children with Disabilities (IDEA) School Age (EDFacts file spec FS002; Data group 74)	07/30/2025	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	2,223

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

FFY 2024 SPP/APR Data

Education Environments	Number of children with IEPs aged 5 (kindergarten) through 21 served	Total number of children with IEPs aged 5 (kindergarten) through 21	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	333,259	425,521	78.41%	78.50%	78.32%	Did not meet target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	60,757	425,521	13.73%	12.80%	14.28%	Did not meet target	No Slippage
C. Number of children with IEPs aged 5 (kindergarten) through 21 inside separate schools, residential facilities, or homebound/hospital placements *[c1+c2+c3]*	11,666	425,521	2.89%	2.80%	2.74%	Met target	No Slippage

Provide additional information about this indicator (optional)

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results indicator: Percent of children with IEPs aged 3, 4, and aged 5 who are enrolled in a preschool program attending a:

A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and

B. Separate special education class, separate school, or residential facility.

C. Receiving special education and related services in the home.

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

Data Source

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in ED*Facts* file specification FS089.

Measurement

A. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

B. Percent = [(# of children ages 3, 4, and 5 with IEPs attending a separate special education class, separate school, or residential facility) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

C. Percent = [(# of children ages 3, 4, and 5 with IEPs receiving special education and related services in the home) divided by the (total # of children ages 3, 4, and 5 with IEPs)] times 100.

Instructions

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

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

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

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

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

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

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

Part	FFY	2019	2020	2021	2022	2023
A	Target >=	50.50%	25.93%	25.93%	26.00%	26.30%
A	Data	39.25%	25.93%	26.52%	26.48%	26.83%
B	Target <=	44.80%	60.84%	60.84%	60.83%	60.82%
B	Data	47.63%	60.84%	61.50%	61.19%	61.85%
C	Target <=		0.38%	0.38%	0.38%	0.37%
C	Data		0.38%	0.42%	0.31%	0.20%

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

Targets

Please select if the State wants to set baselines and targets based on individual age ranges (i.e., separate baseline and targets for each age), or inclusive of all children ages 3, 4, and 5.

Inclusive Targets

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

Target Range not used

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

Part	Baseline Year	Baseline Data
A	2020	25.93%
B	2020	60.84%
C	2020	0.38%

Inclusive Targets – 6A, 6B

FFY	2024	2025
Target A >=	26.50%	26.50%
Target B <=	60.81%	60.00%

Inclusive Targets – 6C

FFY	2024	2025
Target C <=	0.36%	0.36%

Prepopulated Data

Data Source:

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

Date:

07/30/2025

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	7,578	13,642	2,480	23,700
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	1,252	3,846	800	5,898
b1. Number of children attending separate special education class	5,181	8,037	1,345	14,563
b2. Number of children attending separate school	229	342	84	655
b3. Number of children attending residential facility	0	6	3	9
c1. Number of children receiving special education and related services in the home	11	23	1	35

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

FFY 2024 SPP/APR Data - Aged 3 through 5

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 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	5,898	23,700	26.83%	26.50%	24.89%	Did not meet target	Slippage
B. Separate special education class, separate school, or residential facility	15,227	23,700	61.85%	60.81%	64.25%	Did not meet target	Slippage
C. Home	35	23,700	0.20%	0.36%	0.15%	Met target	No Slippage

Provide reasons for slippage for Group A aged 3 through 5, if applicable

Slippage in Indicator 6A is due to increased student needs requiring more intensive services and fewer typically developing peers enrolled in ESE prekindergarten classrooms. These factors result in more children receiving services in specialized environments rather than regular early childhood programs.

Provide reasons for slippage for Group B aged 3 through 5, if applicable

Slippage in Indicator 6B is due to increased student needs requiring more intensive services and fewer typically developing peers enrolled in ESE prekindergarten classrooms. These factors result in more children receiving services in specialized environments rather than regular early childhood programs.

Provide additional information about this indicator (optional)

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

C. Use of appropriate behaviors to meet their needs.

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

Data Source

State selected data source.

Measurement

Outcomes:

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

Progress categories for A, B and C:

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

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

Sampling of **children for assessment** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 3 for additional instructions on sampling.)

In the measurement include, in the numerator and denominator, only children who received special education and related services for at least six months during the age span of three through five years.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements. States have provided targets for the two Summary Statements for the three Outcomes (six numbers for targets for each FFY).

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three Outcomes.

In presenting results, provide the criteria for defining “comparable to same-aged peers.” If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS), then the criteria for defining “comparable to same-aged peers” has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2019	2020	2021	2022	2023
A1	2008	Target >=	75.10%	75.30%	75.30%	75.50%	75.50%
A1	65.90%	Data	75.34%	69.98%	68.72%	73.76%	79.58%

A2	2008	Target >=	85.40%	69.80%	69.80%	69.90%	75.50%
A2	75.80%	Data	69.76%	73.32%	66.37%	49.37%	36.53%
B1	2008	Target >=	74.40%	60.20%	60.20%	60.50%	60.50%
B1	58.80%	Data	60.19%	63.45%	61.01%	72.75%	83.33%
B2	2008	Target >=	79.40%	51.80%	51.80%	53.00%	53.05%
B2	52.90%	Data	51.80%	59.63%	53.73%	44.46%	36.51%
C1	2008	Target >=	67.40%	64.60%	64.60%	65.00%	65.00%
C1	59.50%	Data	64.61%	60.52%	60.03%	71.73%	80.10%
C2	2008	Target >=	82.50%	68.30%	68.30%	73.40%	73.45%
C2	73.30%	Data	68.28%	72.38%	65.86%	55.77%	45.74%

Targets

FFY	2024	2025
Target A1 >=	75.60%	75.60%
Target A2 >=	76.00%	76.05%
Target B1 >=	61.00%	61.00%
Target B2 >=	53.10%	53.15%
Target C1 >=	65.50%	65.50%
Target C2 >=	73.50%	73.55%

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

FFY 2024 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

10,892

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	86	0.79%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	2,063	18.94%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	4,945	45.40%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	3,001	27.55%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	797	7.32%

Outcome A	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)*	7,946	10,095	79.58%	75.60%	78.71%	Met target	No Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	3,798	10,892	36.53%	76.00%	34.87%	Did not meet target	Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	89	0.82%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,753	16.09%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	5,394	49.52%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	3,206	29.43%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	450	4.13%

Outcome B	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)*	8,600	10,442	83.33%	61.00%	82.36%	Met target	No Slippage
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	3,656	10,892	36.51%	53.10%	33.57%	Did not meet target	Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	71	0.65%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	1,947	17.88%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	4,123	37.85%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	3,748	34.41%

Outcome C Progress Category	Number of Children	Percentage of Children
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,003	9.21%

Outcome C	Numerator	Denominator	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)*	7,871	9,889	80.10%	65.50%	79.59%	Met target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)*	4,751	10,892	45.74%	73.50%	43.62%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
A2	Change from Battelle Developmental Inventory, Second Edition (BDI-2) to COS Process: The recent change in methodology from the BDI-2 to the COS process has introduced differences in how progress is documented and reported. The COS relies on a team-based, qualitative rating system that synthesizes information from multiple sources and settings, providing a comprehensive view of the child's functional abilities in everyday routines. In contrast, the BDI-2 is a standardized assessment that captures performance at a single point in time within a controlled setting. Because the COS integrates observations across environments and situations, the resulting ratings often differ from standardized scores, offering a more accurate representation of the child's developmental progress.
B2	Change from Battelle Developmental Inventory, Second Edition (BDI-2) to COS Process: The recent change in methodology from the BDI-2 to the COS process has introduced differences in how progress is documented and reported. The COS relies on a team-based, qualitative rating system that synthesizes information from multiple sources and settings, providing a comprehensive view of the child's functional abilities in everyday routines. In contrast, the BDI-2 is a standardized assessment that captures performance at a single point in time within a controlled setting. Because the COS integrates observations across environments and situations, the resulting ratings often differ from standardized scores, offering a more accurate representation of the child's developmental progress.
C2	Change from Battelle Developmental Inventory, Second Edition (BDI-2) to COS Process: The recent change in methodology from the BDI-2 to the COS process has introduced differences in how progress is documented and reported. The COS relies on a team-based, qualitative rating system that synthesizes information from multiple sources and settings, providing a comprehensive view of the child's functional abilities in everyday routines. In contrast, the BDI-2 is a standardized assessment that captures performance at a single point in time within a controlled setting. Because the COS integrates observations across environments and situations, the resulting ratings often differ from standardized scores, offering a more accurate representation of the child's developmental progress.

Does the State include in the numerator and denominator only children who received special education and related services for at least six months during the age span of three through five years? (yes/no)

YES

Sampling Question	Yes / No
Was sampling used?	NO

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS) process? (yes/no)

YES

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

LEAs selected the instrument and procedures that were relevant for collecting data pertaining to this indicator. As of July 1, 2022, FDOE had transitioned from the BDI-2 to the COS process. Children were assessed at program entry and exit using various formal and informal assessments to inform the COS. Assessment results were evaluated with other information, such as parent, service provider and teacher observations, to complete the COS. LEAs input each child's COS process results into a web-based program the selected FDOE contractor developed. The FDOE contractor periodically imported records from the web-based program and maintained a secure entry and exit scores database.

Provide additional information about this indicator (optional)

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

*Sampling **of parents from whom response is requested** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 3 for additional instructions on sampling.)*

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

Provide the actual numbers used in the calculation.

If the State is using a separate data collection methodology for preschool children, the State must provide separate baseline data, targets, and actual target data or discuss the procedures used to combine data from school age and preschool data collection methodologies in a manner that is valid and reliable.

While a survey is not required for this indicator, a State using a survey must submit a copy of any new or revised survey with its SPP/APR.

Report the number of parents to whom the surveys were distributed and the number of respondent parents. The survey response rate is automatically calculated using the submitted data.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2024 SPP/APR, compare the FFY 2024 response rate to the FFY 2023 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross-section of parents of children with disabilities.

Include in the State's analysis the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must consider race/ethnicity. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

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

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

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

8 - Indicator Data

Question	Yes / No
Do you use a separate data collection methodology for preschool children?	YES
If yes, will you be providing the data for preschool children separately?	YES

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

Historical Data

Group	Baseline	FFY	2019	2020	2021	2022	2023
Preschool	2008	Target >=	85.00%	82.60%	82.60%	82.70%	82.70%

Preschool	43.00%	Data	82.43%	83.53%	59.80%	64.79%	72.51%
School age	2008	Target >=	85.00%	81.60%	81.60%	82.00%	82.50%
School age	32.00%	Data	81.64%	81.07%	80.50%	59.23%	64.20%

Targets

FFY	2024	2025
Target A >=	82.70%	82.80%
Target B >=	82.50%	82.80%

FFY 2024 SPP/APR Data: Preschool Children Reported Separately

Group	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
Preschool	3,461	4,829	72.51%	82.70%	71.67%	Did not meet target	No Slippage
School age	19,356	28,317	64.20%	82.50%	68.35%	Did not meet target	No Slippage

The number of parents to whom the surveys were distributed.

448,482

Percentage of respondent parents

7.39%

Response Rate

FFY	2023	2024
Response Rate	4.51%	7.39%

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

When at least 10 percent of the responses included information related to representation as part of their responses, a +/-5 percent discrepancy in the proportion of responders compared to the target group was used to determine representation.

Include the State's analyses of the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services. States must include race/ethnicity in their analysis. In addition, the State's analysis must also include at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.

FDOE invited all parents of SWDs to provide input on services through the statewide parent survey. FDOE was committed to offering all parents and guardians the opportunity to provide feedback in order to represent SWDs across the state. Parents were able to participate in multiple ways, including through membership on the State Advisory Panel for the Education of Exceptional Students. Members of the State Advisory Panel for the Education of Exceptional Students were appointed by the Commissioner of Education in accordance with IDEA and provided policy guidance related to ESE and related services. The panel continues to operate under the auspices of BEESS, FDOE. The parent survey was offered through multiple distribution methods and in multiple languages. The survey collected race and ethnicity information using separate questions. For reporting purposes, race and ethnicity were combined in accordance with federal reporting requirements. Respondents who identified as Hispanic or Latino on the ethnicity question were categorized as Hispanic. All other respondents were assigned to the race category they selected on the survey. Representation was determined using a State-defined metric. When at least 10 percent of responses included demographic information, a +/-5 percent discrepancy between the proportion of survey respondents and the proportion of students receiving special education services in the State was used to determine representation. An analysis of survey responses examined the extent to which the demographics of children for whom parents responded were representative of the demographics of children receiving special education services in Florida. The analysis included race, ethnicity and primary exceptionality for both Pre-K and grades K–12. Upon further review of the 2024-25 data, FDOE reanalyzed representativeness using the FDOE's established methodology (minimum 10 percent response rate with a +/- 5 percent discrepancy threshold). This analysis determined that the respondent group is not fully representative of the population of children with disabilities in Florida, as several groups exceeded the allowable +/- 5 percent discrepancy.

Pre-K Analysis

For Pre-K, the following discrepancies were identified: Disability Category:

• Autism Spectrum Disorder (ASD): 15.78% membership vs. 36.85% response rate

• Developmental Delay (DD): 65.31% membership vs. 24.91% response rate

• Speech/Language Impairment (SI/LI): 16.11% membership vs. 26.96% response rate

Race/Ethnicity:

• Black or African American: 26.76% membership vs. 20.64% response rate

• Multiracial: 4.41% membership vs. 14.42% response rate

• White: 33.56% membership vs. 60.63% response rate

K–12 Analysis

For K–12, the following discrepancies were identified: Disability Category:

• Autism Spectrum Disorder (ASD): 14.70% membership vs. 28.71% response rate

• Specific Learning Disability (SLD): 37.72% membership vs. 21.80% response rate

Race/Ethnicity:

• Black or African American: 24.64% membership vs. 18.35% response rate

• Hispanic/Latino: 34.95% membership vs. 27.66% response rate

• Multiracial: 4.36% membership vs. 12.87% response rate

• White: 34.22% membership vs. 65.76% response rate

These data demonstrate that multiple groups are over or beyond the FDOE's +/- 5 percent threshold. Based on this analysis, FDOE has revised its determination and concludes that the response data are not representative of the demographics of children receiving special education services in Florida.

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

YES

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

FDOE updated the ESE Parent Survey by streamlining the questions. Beginning with the 2025-26 school year, the survey will remain open during the school year to allow for two reporting periods. FDOE is sharing this information with ESE Directors through ESE Director Webinars and BEESS Weekly announcements. Strategies expected to increase parent access, response rates and participation include the following:

• Schools within the LEA hosting parent nights for families of SWD, with staff available to assist with completing the survey and providing access to computers and the WIFI.

• General education teachers contacting parents of SWD and sharing the QR code and paper-based version.

• During ESE Director Webinars, requesting LEAs with higher response rates to share effective strategies they used to make the survey more accessible and increase participation.

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.

FDOE's analysis indicates that respondents from groups with lower participation reported levels of satisfaction comparable to, and in some cases higher than, those from groups with higher participation across multiple survey items. FDOE will continue to analyze response data annually and refine strategies to improve results for this indicator. FDOE will implement strategies to increase parent response rates by:

• Promoting participation across a broad cross-section of parents, including offering the survey in multiple languages and through multiple statewide distribution methods; and

• Ensuring all parents have the opportunity to provide input on services and involvement in decision-making for students with disabilities.

Sampling Question	Yes / No
Was sampling used?	NO

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	YES
If yes, provide a copy of the survey.	Part B SPP-APR FFY 2024 Parent Involvement Attachment ADA (1)

Provide additional information about this indicator (optional)

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

FDOE and a contracted vendor worked together to create an online, public-facing dashboard that displayed results from the prior year and provided a live count of survey responses for the 2023-24 and 2024-25 school years. FDOE assigned response-rate targets for each LEA, which were displayed on the dashboard to allow LEAs and the public to access live data. FDOE conducted webinars in collaboration with its vendor to support LEAs in interpreting survey data and implementing strategies to increase response rates. Monthly email reminders were sent to ESE Directors to promote survey participation. FDOE's IDEA-funded state projects were provided with marketing materials to advertise the survey through social media and other outreach methods to reach a broader audience. School systems were encouraged to provide the survey at the conclusion of IEP team meetings by sharing the QR code on a flyer developed by FDOE. FDOE also collaborated with Florida's Family Network on Disabilities (FND). FND provided assistance and support to parents, educators, community organizations and faith-based groups to promote parental involvement and engagement. These efforts supported the development of partnerships between home and school to strengthen student outcomes. FDOE included FND on the Indicator 8 team to incorporate parental involvement expertise.

FDOE held regular meetings with ESE Directors statewide and provided survey updates during the survey window.

8 - OSEP Response

The State reported that the response data for this indicator were representative of the demographics of children receiving special education services in the State. However, in its narrative, the State reported "Based on this analysis, FDOE has revised its determination and concludes that the response data are not representative of the demographics of children receiving special education services in Florida." Therefore, it is unclear whether the response data was representative. OSEP notes that the State did not describe the strategies to address this issue in the future.

8 - Required Actions

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

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2024 reporting period (i.e., after June 30, 2025).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA, aggregated across all disability categories. Provide the actual numbers used in the calculation.

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

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

Targets

FFY	2024	2025

Target	0%	0%

FFY 2024 SPP/APR Data

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

YES

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

4

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
0	0	79	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).

FDOE defined the representation criteria for this indicator as a risk ratio of 3.0 or greater. The calculation required a minimum cell size of 10 and a minimum comparison group size ("n") of 30. The analysis was based on a single year of data.

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.

The process used to determine whether the identification of a particular subgroup was appropriate encompassed several components: an analysis of the LEA's risk ratio relative to the state risk ratio for that subgroup; an evaluation of patterns and trends in the risk ratio over time; a review of ESE policies and procedures submitted electronically to FDOE; and an assessment of findings from both on-site and desktop monitoring conducted for all identified LEAs.

Provide additional information about this indicator (optional)

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.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

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

9 - Prior FFY Required Actions

None

9 - OSEP Response

9 - Required Actions

Indicator 10: Disproportionate Representation in Specific Disability Categories

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

Based on its review of the section 618 data for the reporting year, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), (e.g., using monitoring data; reviewing policies, practices and procedures). In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2024 reporting period (i.e., after June 30, 2025).

Instructions

Provide racial/ethnic disproportionality data for all children aged 5 who are enrolled in kindergarten and aged 6 through 21 served under IDEA. Provide these data at a minimum for children in the following six disability categories: intellectual disability, specific learning disabilities, emotional disturbance, speech or language impairments, other health impairments, and autism. If a State has identified disproportionate representation of racial and ethnic groups in specific disability categories other than these six disability categories, the State must include these data and report on whether the State determined that the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification. Provide the actual numbers used in the calculation.

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

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

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2020	0.00%

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

Targets

FFY	2024	2025
Target	0%	0%

FFY 2024 SPP/APR Data

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

YES

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

5

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
17	0	78	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).

FDOE defined the representation for this indicator as a risk ratio of 3.0 or higher. The minimum cell size was 10 and the minimum "n" size was 30. Only one year of data was used for this calculation.

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.

The process used to determine whether the identification of a particular subgroup included analysis of the LEA's risk ratio in comparison to the state risk ratio for that group, patterns and trends in the risk ratio over time, review of ESE policies and procedures submitted to FDOE electronically, and the results of on-site and desktop monitoring of all identified LEAs.

Provide additional information about this indicator (optional)

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.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

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

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Data Source

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

Measurement

a. # of children for whom parental consent to evaluate was received.
b. # of children whose evaluations were completed within 60 days (or State-established timeline).
Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

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

Instructions

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

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

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

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	92.00%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	95.43%	97.64%	97.23%	Not Valid and Reliable	97.49%

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
74,061	71,819	97.49%	100%	96.97%	Did not meet target	No Slippage

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

2,242

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.

729 evaluations were completed 1-10 days beyond the timeline; 389 evaluations were completed 11-20 days beyond the timeline; 1065 evaluations were completed 21 days beyond the timeline (total 2,183) and 59 evaluations were still pending completion at the time of data submission.

The reasons for delays include procedural delays, evaluator delays and reasons initially reported as unknown. Procedural errors included, but were not limited to, data entry inaccuracies, miscoding of evaluation dates, missing evaluation components, and instances in which parental consent was provided to the evaluator after the start of the 60 day timeline. Evaluator delays included missed appointments, delays in securing interpreters, and staff shortages. For instances initially categorized as “unknown,” FDOE required LEAs to review student-level records and provide verification that each evaluation had been completed.

Indicate the evaluation timeline used:

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

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

State 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.

To ensure compliance with Indicator 11 under IDEA, FDOE implemented a secure, web-based application accessible through the state’s Single Sign-On platform. LEAs reported the number of parental consents for initial evaluations and the number of evaluations completed within the 60-day timeline. The system automatically calculated compliance rates. When discrepancies occurred, LEAs were required to provide an explanation and anticipated completion date within the application. In addition, LEAs identified as noncompliant (i.e., less than 100%) submitted qualitative data explaining the reasons for each instance of noncompliance, corrective actions were completed and provided documentation verifying correction. These data were uploaded to a secure ShareFile managed by FDOE, ensuring accurate monitoring and compliance with federal and state requirements.

Provide additional information about this indicator (optional)

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
2,015	2,015	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*

FDOE identified findings and issued noncompliance notifications to LEAs based on a total of 2,015 child-specific cases of noncompliance for initial evaluations of eligible and ineligible students who were evaluated beyond 60 days of receiving parental consent for initial evaluation.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the FDOE reviewed updated data on each of the affected LEAs and verified that each LEA was at 100% compliance with the regulatory requirements within one year of notification.

After the FDOE verified each individual instance of noncompliance was corrected within one year, as well as ensured the correct implementation of the regulatory requirements within one year with 100% compliance through a review of updated data, FDOE notified the LEAs that each finding of noncompliance was closed.

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

FDOE verified that 1,948 individual cases of noncompliance were corrected prior to the FFY 2023 SPP/APR submission.

In addition FDOE verified that the 67 reported cases of individual noncompliance were corrected by requiring the identified LEAs to either (1) submit the evaluation completion date for each student whose evaluation had been incomplete when the indicator data were submitted or (2) provide a justification for why the evaluation of record was exempt from the database (e.g., the student had exited the LEA’s jurisdiction before the evaluation was completed). Each tracked case was either evaluated or had its exemption properly documented. As a result, all 2,015 identified instances of noncompliance were fully corrected in accordance with OSEP QA 23-01.

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.

FDOE does not use pre-finding correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2022	2,028	2,028	0
FFY 2021	1,854	1,854	0

FFY 2022

Findings of Noncompliance Verified as Corrected

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

For FFY 2022, FDOE identified findings and issued noncompliance notifications to LEAs based on a total of 2,028 child-specific cases of noncompliance for initial evaluations of eligible and ineligible students who were evaluated beyond 60 days of receiving parental consent for initial evaluation.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the FDOE reviewed updated data on each of the affected LEAs and verified that each LEA was at 100% compliance with the regulatory requirements.

After the FDOE verified each individual instance of noncompliance was corrected, as well as ensured the correct implementation of the regulatory requirements with 100% compliance through a review of updated data, FDOE notified the LEAs that each finding of noncompliance was closed.

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

For FFY 2022, FDOE verified that the 2,028 reported cases of individual noncompliance were corrected by requiring the identified LEAs to either (1) submit the evaluation completion date for each student whose evaluation had been incomplete when the indicator data were submitted or (2) provide a justification for why the evaluation of record was exempt from the database (e.g., the student had exited the LEA's jurisdiction before the evaluation was completed). Each tracked case was either evaluated or had its exemption properly documented. As a result, all 2,028 identified individual instances of noncompliance were fully corrected in accordance with OSEP QA 23-01.

FFY 2021

Findings of Noncompliance Verified as Corrected

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

For FFY 2021, FDOE identified findings and issued noncompliance notifications to LEAs based on a total of 1,854 child-specific cases of noncompliance for initial evaluations of eligible and ineligible students who were evaluated beyond 60 days of receiving parental consent for initial evaluation.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the FDOE reviewed updated data on each of the affected LEAs and verified that each LEA was at 100% compliance with the regulatory requirements.

After the FDOE verified each individual instance of noncompliance was corrected, as well as ensured the correct implementation of the regulatory requirements with 100% compliance through a review of updated data, FDOE notified the LEAs that each finding of noncompliance was closed.

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

For FFY 2021, FDOE verified that the 1,854 reported cases of individual noncompliance were corrected by requiring the identified LEAs to either (1) submit the evaluation completion date for each student whose evaluation had been incomplete when the indicator data were submitted or (2) provide a justification for why the evaluation of record was exempt from the database (e.g., the student had exited the LEA's jurisdiction before the evaluation was completed). Each tracked case was either evaluated or had its exemption properly documented. As a result, all 1,854 identified individual instances of noncompliance were fully corrected in accordance with OSEP QA 23-01.

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. In addition, the State must demonstrate, in the FFY 2024 SPP/APR, that the remaining 2,028 uncorrected findings of noncompliance identified in FFY 2022 and the 1,854 findings identified in FFY 2021 were corrected. 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 findings of noncompliance identified in FFY 2023 and each LEA with remaining noncompliance identified in FFY 2022 and 2021: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 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 of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

For FFY 2023, FDOE reported less than 100 percent compliance for this indicator. In accordance with OSEP requirements, the FDOE implemented a comprehensive process to ensure correction of all findings of noncompliance identified in FFY 2023 and to address remaining uncorrected findings from FFY 2022 and FFY 2021.

Correction of FFY 2023 Findings

FDOE verified that each LEA with findings of noncompliance identified in FFY 2023 had correctly implemented the specific regulatory requirements and had achieved 100 percent compliance. Verification was based on a review of updated data collected through the FDOE's data system and targeted monitoring activities. Additionally, the FDOE confirmed that each individual case of noncompliance was corrected unless the child was no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01.

Correction of Remaining Findings from FFY 2022 and FFY 2021

The FDOE addressed the remaining 2,028 findings from FFY 2022 and 1,854 findings from FFY 2021 through a structured follow-up process that included: (1) Review of updated compliance data submitted by LEAs; (2) targeted monitoring meetings; and (3) verification of documentation demonstrating correction of each child-specific case of noncompliance.

All LEAs with outstanding findings have been verified as correctly implementing the regulatory requirements and have corrected each individual case of noncompliance, unless the child is no longer within the LEA's jurisdiction.

Verification Procedures

To ensure accuracy and compliance, FDOE employed multiple verification methods, including: (1) Data Review: Analysis of updated compliance data from FDOE's data system; (2) Monitoring Activities: Integrated monitoring activities for identified LEAs; and (3) Documentation Review: Examination of evidence submitted by LEAs confirming correction of child-specific cases and systemic compliance.

11 - OSEP Response

11 - Required Actions

Because the State reported less than 100% compliance for FFY 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2024 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2025 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

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

Data Source

Data to be taken from State monitoring or State data system.

Measurement

a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.
f. # of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

Percent = [(c) divided by (a - b - d - e - f)] times 100.

Instructions

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

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

Targets must be 100%.

Category f is to be used only by States that have an approved policy for providing parents the option of continuing early intervention services beyond the child's third birthday under 34 CFR §303.211 or a similar State option.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

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

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	32.00%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	99.98%	99.55%	99.99%

Targets

FFY	2024	2025
Target	100%	100%

FFY 2024 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	7,918
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	365
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	6,367
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	710
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	469
f. Number of children whose parents chose to continue early intervention services beyond the child's third birthday through a State's policy under 34 CFR §303.211 or a similar State option.	0

Measure	Numerator (c)	Denominator (a-b-d-e-f)	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	6,367	6,374	99.99%	100%	99.89%	Did not meet target	No Slippage

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

7

Account for children included in (a), but not included in b, c, d, e, or f. Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed, and the reasons for the delays.

The number of late IEPs (after the child's third birthday) with the following time frames:

Within 30 days after third birthday = 4

Within 45 days after third birthday = 3

Within 60 days after third birthday = 0

Within 90 days after third birthday = 0

More than 90 days after third birthday = 0

Total records not in compliance = 7

Total LEAs not in compliance = 1

Noncompliance was identified in seven (7) records within one LEA. The delays were due to the LEA's inability to secure evaluators to complete the evaluations in a timely manner.

Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

Using Survey 5 (all year enrollment) and Survey 2 (October enrollment) from the FDOE student information database, FDOE matched the data file from Florida Department of Health Early Steps with Survey 5 data files. Once Survey 2 was available, the FDOE repeated the matching process. Finally, FDOE removed duplicate records and sent the LEAs the resulting data sets for review and data verification. Specifically, LEAs were asked to verify the child's enrollment in the LEA, dates of eligibility determination, eligibility status and IEP dates. LEAs had to code records for all children who were not located in the FDOE student information database or did not have eligibility of the IEP dates on or before their third birthday. Upon completion of the data review and verification process, LEAs returned the final data sets to FDOE for processing. FDOE used the final data sets to calculate Indicator 12(a), (b), (c), (d) and (e). It calculated a final compliance percentage using the following formula: [c ÷ (a - b - d - e)] × 100.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2023

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

FFY 2023 Findings of Noncompliance Verified as Corrected

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

FDOE identified findings and issued noncompliance notifications to LEAs based on a total of 1 child-specific case of noncompliance for children who were transitioned from Part C to Part B by their third birthday.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the LEA was required to submit to the FDOE updated data for five children who were transitioned from Part C to Part B to determine if the LEA was in compliance. (Note: if there were fewer than five children who transitioned within that month, the records for all the children who transitioned that month were reviewed [one, two, three or four children]). FDOE verified that the LEA was at 100% compliance with the regulatory requirements within one year of notification.

After the FDOE verified each individual instance of noncompliance was corrected within one year, as well as ensured the correct implementation of the regulatory requirements within one year with 100% compliance through a review of updated data, FDOE notified the LEAs that each finding of noncompliance was closed.

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

FDOE verified that the one reported case of individual noncompliance was corrected by contacting the LEA and requesting the student file. The information provided by the LEA allowed FDOE to verify that the identified individual instance of noncompliance was fully corrected in accordance with OSEP QA 23-01.

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.

FDOE does not use pre-finding correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2022	28	28	0
FFY 2021	1	1	0

FFY 2022

Findings of Noncompliance Verified as Corrected

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

For FFY 2022 FDOE identified findings and issued noncompliance notifications to LEAs based on a total of 28 child-specific cases of noncompliance for children who were transitioned from Part C to Part B by their third birthday.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the LEAs were required to submit to the FDOE updated data for five children who were transitioned from Part C to Part B during the month of notification to determine if the LEA was in compliance. (Note: if there were fewer than five children who transitioned within that month, the records for all the children who transitioned that month were reviewed [one, two, three or four children]). LEAs were required to continue to submit data monthly until FDOE verified that each identified LEA was at 100% compliance with the regulatory requirements.

After the FDOE verified each individual instance of noncompliance was corrected, as well as ensured the correct implementation of the regulatory requirements with 100% compliance through a review of updated data, FDOE notified the LEAs that each finding of noncompliance was closed.

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

For FFY 2022 FDOE verified that the 28 reported cases of individual noncompliance were corrected by contacting the LEAs and requesting the 28 student files. The information provided by the LEA allowed FDOE to verify that each of the 28 individual instances of noncompliance were fully corrected in accordance with OSEP QA 23-01.

FFY 2021

Findings of Noncompliance Verified as Corrected

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

For FFY 2021 FDOE identified findings and issued noncompliance notifications to LEAs based on a total of 1 child-specific case of noncompliance for children who were transitioned from Part C to Part B by their third birthday.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEA was correctly implementing regulatory requirements with 100% compliance, the LEA was required to submit to the FDOE updated data for five children who were transitioned from Part C to Part B during the month of notification to determine if the LEA was in compliance. (Note: if there were fewer than five children who transitioned within that month, the records for all the children who transitioned that month were reviewed [one, two, three or four children]). The LEA was required to continue to submit data monthly until FDOE verified that the identified LEA was at 100% compliance with the regulatory requirements.

After the FDOE verified each individual instance of noncompliance was corrected, as well as ensured the correct implementation of the regulatory requirements with 100% compliance through a review of updated data, FDOE notified the LEAs that each finding of noncompliance was closed.

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

For FFY 2021 FDOE verified that the one reported case of individual noncompliance was corrected by contacting the LEA and requesting the student file. The information provided by the LEA allowed FDOE to verify that the identified individual instance of noncompliance was fully corrected in accordance with OSEP QA 23-01.

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. In addition, the State must demonstrate, in the FFY 2024 SPP/APR, that the remaining 28 uncorrected findings of

noncompliance identified in FFY 2022 and the one uncorrected finding identified in FFY 2021were corrected. 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 findings of noncompliance identified in FFY 2023 and each LEA with remaining noncompliance identified in FFY 2022 and FFY 2021: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 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 of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

FDOE verified the correction of all findings of noncompliance in FFY 2022 and FFY 2023, through the provision of support, training and technical assistance, to assist the LEAs to correctly implement the regulatory requirements. The LEAs with findings of noncompliance were required to submit corrective action plans and subsequent student records until FDOE determined that the LEA demonstrated 100 percent compliance. For each individual case of noncompliance, the LEAs submitted the applicable student records, which were reviewed by FDOE to verify the correction.

12 - OSEP Response

12 - Required Actions

Because the State reported less than 100% compliance for FFY 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2024 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2025 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Compliance indicator: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services including courses of study that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

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

Data Source

Data to be taken from State monitoring or State data system.

Measurement

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services including courses of study that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency that is likely to be responsible for providing or paying for transition services, including, if appropriate, pre-employment transition services, was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

If a State's policies and procedures provide that public agencies must meet these requirements at an age younger than 16, the State may, but is not required to, choose to include youth beginning at that younger age in its data for this indicator. If a State chooses to do this, it must state this clearly in its SPP/APR and ensure that its baseline data are based on youth beginning at that younger age.

Instructions

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

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

Targets must be 100%.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2024 SPP/APR, the data for FFY 2023), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

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

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2019	98.96%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data	98.96%	96.93%	97.92%	97.92%	97.60%

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
665	666	97.60%	100%	99.85%	Did not meet target	No Slippage

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

State monitoring

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

FDOE collected data through a statewide desktop monitoring self-assessment process. Participating LEAs submitted an LEA-wide Master Student List of all eligible SWDs ages 16 and older and completed a structured self-assessment in the GSW and a secure ShareFile folder.

FDOE reviewed each submission to verify student eligibility, completeness, and data accuracy. LEAs entered student-level compliance information and supporting documentation into the GSW. FDOE validated the self-reported data through desk reviews of student records to verify implementation of regulatory requirements and identify any instances of noncompliance.

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

Provide additional information about this indicator (optional)

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
16	16	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*

FDOE provided support, training and technical assistance to assist the LEAs in correctly implementing the regulatory requirements. The LEAs with instances of noncompliance were required to submit corrective action plans and updated data that demonstrated 100 percent compliance.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the FDOE reviewed updated data on each of the affected LEAs and verified that each LEA was at 100% compliance with the regulatory requirements within one year of notification.

After the FDOE verified each individual instance of noncompliance was corrected within one year, as well as ensured the correct implementation of the regulatory requirements through a review of updated data within one year, FDOE notified the LEAs that each finding of noncompliance was closed.

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

The 16 cases of noncompliance for FFY 2023 came from two LEAs. FDOE, in collaboration with Project 10, an IDEA-funded state project, required each LEA to correct all student-specific findings of noncompliance. Additionally, the LEAs were required to submit to FDOE verification of the correction of each finding of noncompliance, no later than 60 calendar days from the date the LEA was notified of the noncompliance. FDOE reviewed all verification documentation to ensure that each case was corrected. FDOE conducted regular check-ins with the LEAs. As a result, FDOE verified that all 16 identified individual instances of noncompliance were fully corrected in accordance with OSEP QA 23-01.

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.

FDOE does not use pre-finding correction.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2023 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2022	12	12	0
FFY 2021	1	1	0

FFY 2022

Findings of Noncompliance Verified as Corrected

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

For FFY 2022, FDOE verified that the source of noncompliance was the failure to correctly implement regulatory requirements through its structured compliance monitoring system. All LEAs participated in a multi-tiered process that included Level 1 desktop monitoring, which required submission of online self-assessment protocols used to review Transition IEPs. FDOE staff then validated the IEPs sent against the protocol developed, which addressed basic ESE procedures. When necessary, LEAs completed Level 2 desktop monitoring focused on indicator-specific requirements. For selected LEAs, FDOE conducted on-site monitoring visits to validate compliance and provided targeted technical assistance. These activities ensured that LEAs demonstrated accurate implementation of regulatory requirements and sustained compliance through documented reviews and follow-up monitoring.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the FDOE reviewed updated data on each of the affected LEAs and verified that each LEA was at 100% compliance with the regulatory requirements within one year of notification.

After the FDOE verified each individual instance of noncompliance was corrected, as well as ensured the correct implementation of the regulatory requirements through a review of updated data, FDOE notified the LEAs that each finding of noncompliance was closed.

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

For FFY 2022 FDOE verified that each instance of noncompliance was rectified through ongoing monitoring and the maintenance of documentation on the GSW, managed by BEESS. This system encompassed corrections specific to the 12 individual findings of noncompliance, thereby allowing the FDOE to review and verify that all noncompliant IEPs were amended to meet Indicator 13 standards in accordance with regulations under IDEA Part B. As a result, all 12 identified individual instances of noncompliance were fully corrected in accordance with OSEP QA 23-01.

FFY 2021

Findings of Noncompliance Verified as Corrected

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

For FFY 2021, FDOE verified that the source of noncompliance was the failure to correctly implement regulatory requirements through its structured compliance monitoring system. The LEA participated in a multi-tiered process that included Level 1 desktop monitoring, which required submission of online self-assessment protocols used to review Transition IEPs. FDOE staff then validated the IEPs sent against the protocol developed, which addressed basic ESE procedures. FDOE conducted on-site monitoring visits to validate compliance and provided targeted technical assistance. These activities ensured that the LEA demonstrated accurate implementation of regulatory requirements and sustained compliance through documented reviews and follow-up monitoring.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEA was correctly implementing regulatory requirements with 100% compliance, the FDOE reviewed updated data on the affected LEA and verified that the LEA was at 100% compliance with the regulatory requirements within one year of notification.

After the FDOE verified the individual instance of noncompliance was corrected, as well as ensured the correct implementation of the regulatory requirements through a review of updated data, FDOE notified the LEA that the finding of noncompliance was closed.

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

For FFY 2021, FDOE verified that each instance of noncompliance was rectified through ongoing monitoring and the maintenance of documentation on the GSW, managed by BEESS. This system encompassed corrections specific to the one individual finding of noncompliance, thereby allowing the FDOE to review and verify that the noncompliant IEP was amended to meet Indicator 13 standards in accordance with the regulations under IDEA Part B. As a result, all identified individual instances of noncompliance were fully corrected in accordance with OSEP QA 23-01.

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. In addition, the State must demonstrate, in the FFY 2024 SPP/APR, that the remaining 12 uncorrected findings of noncompliance identified in FFY 2022 and the one finding identified in FFY 2021 were corrected. 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 findings of noncompliance identified in FFY 2023 and each LEA with remaining noncompliance identified in FFY 2022 and FFY 2021: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 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 of noncompliance in FFY 2023. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Response to actions required in FFY 2023 SPP/APR

FDOE verified the correction of all findings of noncompliance in FFY 2023 through the provision of support, training and technical assistance to assist the LEAs in correctly implementing the regulatory requirements. The LEAs with findings of noncompliance were required to submit corrective action plans and subsequent student records until FDOE determined that the LEA demonstrated 100 percent compliance. For each individual case of noncompliance, the LEAs submitted the applicable student records, which were reviewed by FDOE to verify the correction.

13 - OSEP Response

13 - Required Actions

Because the State reported less than 100% compliance for FFY 2024, the State must report on the status of correction of noncompliance identified in FFY 2024 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2025 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2024 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2025 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2024, although its FFY 2024 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings. If the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding, the explanation must

include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

Collect data by September 2025 on students who left school during 2023-2024, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2023-2024 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

I. *Definitions*

Enrolled in higher education as used in measures A, B, and C means youth have been enrolled on a full- or part-time basis in a community college (two-year program) or college/university (four or more year program) for at least one complete term, at any time in the year since leaving high school.

Competitive employment as used in measures B and C: States have two options to report data under "competitive employment":

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

Option 2: States report in alignment with the term "competitive integrated employment" and its definition, in section 7(5) of the Rehabilitation Act of 1973, as amended by Workforce Innovation and Opportunity Act (WIOA). For the purpose of defining the rate of compensation for students working on a "part-time basis" under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

Enrolled in other postsecondary education or training as used in measure C, means youth have been enrolled on a full- or part-time basis for at least 1 complete term at any time in the year since leaving high school in an education or training program (e.g., Job Corps, adult education, workforce development program, vocational technical school which is less than a two-year program).

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

II. *Data Reporting*

States must describe the metric used to determine representativeness (e.g., +/- 3% discrepancy in the proportion of responders compared to target group).
Provide the total number of targeted youth in the sample or census.
Provide the actual numbers for each of the following mutually exclusive categories. The actual number of "leavers" who are:

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

"Leavers" should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, "leavers" who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also

happen to be employed. Likewise, “leavers” who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

States must compare the response rate for the reporting year to the response rate for the previous year (e.g., in the FFY 2024 SPP/APR, compare the FFY 2024 response rate to the FFY 2023 response rate), and describe strategies that will be implemented which are expected to increase the response rate year over year, particularly for those groups that are underrepresented.

The State must also analyze the response rate to identify potential nonresponse bias and take steps to reduce any identified bias and promote response from a broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

III. *Reporting on the Measures/Indicators*
Targets must be established for measures A, B, and C.

Measure A: For purposes of reporting on the measures/indicators, please note that any youth enrolled in an institution of higher education (that meets any definition of this term in the Higher Education Act (HEA)) within one year of leaving high school *must* be reported under measure A. This could include youth who also happen to be competitively employed, or in some other training program; however, the key outcome we are interested in here is enrollment in higher education.

Measure B: All youth reported under measure A should also be reported under measure B, in addition to all youth that obtain competitive employment within one year of leaving high school.

Measure C: All youth reported under measures A and B should also be reported under measure C, in addition to youth that are enrolled in some other postsecondary education or training program, or in some other employment.

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

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

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2019	2020	2021	2022	2023
A	2009	Target >=	41.00%	24.71%	25.00%	27.20%	27.30%
A	27.00%	Data	24.71%	25.23%	29.80%	31.71%	33.27%
B	2009	Target >=	53.00%	52.07%	52.07%	54.00%	55.10%
B	37.00%	Data	52.07%	61.05%	68.17%	68.78%	67.93%
C	2009	Target >=	72.00%	59.34%	59.34%	59.50%	59.50%
C	50.00%	Data	59.34%	68.71%	74.18%	74.74%	73.74%

Targets

FFY	2024	2025
Target A >=	27.40%	27.50%
Target B >=	55.20%	55.20%
Target C >=	60.00%	60.00%

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE’s website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students.

Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

FFY 2024 SPP/APR Data

Total number of targeted youth in the sample or census	18,869
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	18,869
Response Rate	100.00%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	6,325
2. Number of respondent youth who competitively employed within one year of leaving high school	6,121
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)	261
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).	716

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)	6,325	18,869	33.27%	27.40%	33.52%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	12,446	18,869	67.93%	55.20%	65.96%	Met target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	13,423	18,869	73.74%	60.00%	71.14%	Met target	No Slippage

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	100.00%	100.00%

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

FDOE used a range of +5 or –5 percentage points to examine proportionate participation (response) and nonparticipation (nonresponse) in the survey for this reporting period based upon the racial/ethnic representation of the students who exited at the conclusion of the 2022-23 school year.

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

The response rate for this indicator is 100 percent, as data are collected through the Florida Education and Training Placement Information Program (FETPIP), which uses record linkage across administrative data systems rather than a sample or survey.

Because this method captures outcomes for all youth who exited secondary school with IEPs, the data are fully representative of the population. The distributions by race/ethnicity and disability category align with FDOE's exiting student population.

Therefore, FDOE affirms that the data are representative of all required demographics. No additional strategies are needed, as the data reflect the full population; however, FDOE will continue ongoing data validation to ensure accuracy.

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

YES

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

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

The FETPIP was established by s. 1008.39, F.S., to provide follow-up data on all exiter students who exited all public education or training programs in Florida and is used to search for all exiting students in post-school settings. FETPIP does not sample or use a survey procedure to collect these data. It is a data collection and consumer reporting system using a technique called "record linkage," a computerized process that combines individually identifiable data from several administrative databases. The linkage is to develop aggregate statistics describing the experiences of student groups or participants after exiting an education or training program. The aggregates are used to produce outcome performance measures intended to help evaluate the success of educational programs. More information about FETPIP may be found at http://www.fldoe.org/accountability/fl-edu-training-placement-info-program. As this robust data system looks for information on all students, not just a sampling, and is not predicated on surveying and survey responses, the data are representative of the demographics of all youth who are no longer in secondary school.

This section provides specific response rates by ethnicity referenced in the previous section. Response rates are reported based on a total of 18,869 respondents for the survey in FFY 2024

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.

FETPIP collects data for all students, therefore there is no non-response bias. FETPIP data shows that 5,446 or 29% of exiters were not engaged in any postsecondary activity.

Sampling Question	Yes / No
Was sampling used?	NO
Survey Question	**Yes / No**
Was a survey used?	NO

Provide additional information about this indicator (optional)

14 - Prior FFY Required Actions

None

14 - OSEP Response

14 - Required Actions

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

Data Source

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

Measurement

Percent = (3.1(a) divided by 3.1) times 100.

Instructions

Sampling is not allowed.

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

States are not required to establish baselines or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

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

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

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

15 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 IDEA Part B Dispute Resolution - Due Process Complaints (EDFacts file spec FS229; Data group 896)	11/19/2025	3.1 Number of resolution sessions	205
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	145

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

Historical Data

Baseline Year	Baseline Data
2005	57.00%

FFY	2019	2020	2021	2022	2023
Target >=	75.50%	79.07%	79.07%	79.50%	79.50%
Data	61.83%	79.07%	63.07%	64.93%	72.68%

Targets

FFY	2024	2025
Target >=	80.00%	80.00%

FFY 2024 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
145	205	72.68%	80.00%	70.73%	Did not meet target	Slippage

Provide reasons for slippage, if applicable

The slippage occurred due to an increase in the number of due process requests that proceeded to resolution sessions. During 2024-25, there were 11 additional resolution sessions compared to the prior period, which resulted in only four more cases being resolved through settlement agreements. FDOE continues to monitor data trends and provide technical assistance as needed.

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

States are not required to establish baselines or targets if the number of mediations is less than 10. In a reporting period when the number of mediations reaches 10 or greater, develop baseline and targets and report on them in the corresponding SPP/APR.

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

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

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

16 - Indicator Data

Select yes to use target ranges

Target Range not used

Prepopulated Data

Source	Date	Description	Data
SY 2024-25 IDEA Part B Dispute Resolution - Mediation Requests (EDFacts file spec FS228; Data group 895)	11/19/2025	2.1 Mediations held	36
SY 2024-25 IDEA Part B Dispute Resolution - Mediation Requests (EDFacts file spec FS228; Data group 895)	11/19/2025	2.1.a.i Mediations agreements related to due process complaints	3
SY 2024-25 IDEA Part B Dispute Resolution - Mediation Requests (EDFacts file spec FS228; Data group 895)	11/19/2025	2.1.b.i Mediations agreements not related to due process complaints	25

Select yes if the data reported in this indicator are not the same as the State's data reported under section 618 of the IDEA.

NO

Targets: Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

Historical Data

Baseline Year	Baseline Data
2005	79.00%

FFY	2019	2020	2021	2022	2023
Target >=	75.50%	80.65%	83.33%	83.50%	83.50%

Data	79.49%	80.65%	81.82%	82.50%	71.70%

Targets

FFY	2024	2025
Target >=	84.00%	84.00%

FFY 2024 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
3	25	36	71.70%	84.00%	77.78%	Did not meet target	No Slippage

Provide additional information about this indicator (optional)

16 - Prior FFY Required Actions

None

16 - OSEP Response

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

Baseline Data*:* The State must provide baseline data that must be expressed as a percentage, and which is aligned with the State-identified Measurable Result(s) (SiMR) for Children with Disabilities.

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

Updated Data: In its FFYs 2020 through FFY 2025 SPPs/APRs, due February 2022 through February 2027, the State must provide updated data for that specific FFY (expressed as percentages) and that data must be aligned with the State-identified Measurable Result(s) Children with Disabilities. In its FFYs 2020 through FFY 2025 SPPs/APRs, the State must report on whether it met its target.

Overview of the Three Phases of the SSIP

It is of the utmost importance to improve results for children with disabilities by improving educational services, including special education and related services. Stakeholders, including parents of children with disabilities, local educational agencies, the State Advisory Panel, and others, are critical participants in improving results for children with disabilities and should be included in developing, implementing, evaluating, and revising the SSIP and included in establishing the State's targets under Indicator 17. The SSIP should include information about stakeholder involvement in all three phases.

Phase I: Analysis:

- Data Analysis;
- Analysis of State Infrastructure to Support Improvement and Build Capacity;
- State-identified Measurable Result(s) for Children with Disabilities;
- Selection of Coherent Improvement Strategies; and
- Theory of Action.

Phase II: Plan (which, is in addition to the Phase I content (including any updates) outlined above):

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

As required in the Instructions for the Indicator/Measurement, in its FFYs 2020 through 2025 SPPs/APRs, the State must report data for that specific FFY (expressed as actual numbers and percentages) that are aligned with the SiMR. The State must report on whether the State met its target. In addition, the State may report on any additional data (e.g., progress monitoring data) that were collected and analyzed that would suggest progress toward the SiMR. States using a subset of the population from the indicator (e.g., a sample, cohort model) should describe how data are collected and analyzed for the SiMR if that was not described in Phase I or Phase II of the SSIP.

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, (e.g., a logic model) of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2025). The evaluation should align with the theory of action described in Phase I and the evaluation plan described in Phase II. The State must describe any changes to the activities, strategies, or timelines described in Phase II and include a rationale or justification for the changes. If the State intends to continue implementing the SSIP without modifications, the State must describe how the data from the evaluation support this decision.

The State must summarize the infrastructure improvement strategies that were implemented, and the short-term outcomes achieved, including the measures or rationale used by the State and stakeholders to assess and communicate achievement. Relate short-term outcomes to one or more areas of a systems framework (e.g., governance, data, finance, accountability/monitoring, quality standards, professional development and/or technical assistance) and explain how these strategies support system change and are necessary for: (a) achievement of the SiMR; (b) sustainability of systems improvement efforts; and/or (c) scale-up. The State must describe the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next fiscal year (e.g., for the FFY 2024 APR, report on anticipated outcomes to be obtained during FFY 2025, i.e., July 1, 2025-June 30, 2026).

The State must summarize the specific evidence-based practices that were implemented and the strategies or activities that supported their selection and ensured their use with fidelity. Describe how the evidence-based practices, and activities or strategies that support their use, are intended to impact the SiMR by changing program/district policies, procedures, and/or practices, teacher/provider practices (e.g., behaviors), parent/caregiver outcomes,

and/or child outcomes. Describe any additional data (e.g., progress monitoring data) that was collected to support the on-going use of the evidence-based practices and inform decision-making for the next year of SSIP implementation.

C. Stakeholder Engagement

The State must describe the specific strategies implemented to engage stakeholders in key improvement efforts and how the State addressed concerns, if any, raised by stakeholders through its engagement activities.

Additional Implementation Activities

The State should identify any activities not already described that it intends to implement in the next fiscal year (e.g., for the FFY 2024 APR, report on activities it intends to implement in FFY 2025, i.e., July 1, 2025-June 30, 2026) including a timeline, anticipated data collection and measures, and expected outcomes that are related to the SiMR. The State should describe any newly identified barriers and include steps to address these barriers.

17 - Indicator Data

Section A: Data Analysis

What is the State-identified Measurable Result (SiMR)?

FDOE, in collaboration with its internal and external stakeholders, selected increasing the statewide cohort graduation rate for SWDs from 77 percent (2017-18 graduates) to 83 percent (2025-26 graduates) and closing the graduation gap between all students (baseline 10.2 percentage points in 2017-18) and SWDs by half (=5.1 percentage points) as the SiMR. The SiMR is related to the SPP/APR. Indicator #1: Percentage of youth with IEPs graduating from high school with a regular diploma. (20 U.S.C. §1416(b))

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.

FDOE is using four-year cohort data

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

NO

Please provide a link to the current theory of action.

https://www.fldoe.org/file/7567/TheoryofAction.pdf

Progress toward the SiMR

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

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

NO

Historical Data

Baseline Year	Baseline Data
2020	82.32%

Targets

FFY	Current Relationship	2024	2025
Target	Data must be greater than or equal to the target	83.00%	83.50%

FFY 2024 SPP/APR Data

Total number of students with disabilities (SWDs) who graduated with their federal cohort	Total number of SWDs in the graduation cohort	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
26,143	30,117	85.50%	83.00%	86.80%	Met target	No Slippage

Provide the data source for the FFY 2024 data.

Florida's Federal Graduation Rates by Special Category by School and LEA, 2023-24: https://www.fldoe.org/accountability/data-sys/edu-info-accountability-services/pk-12-public-school-data-pubs-reports/students.stml.

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

FDOE conducted surveys of LEA student and staff information at scheduled survey times during the reporting year. Survey 5 was used to collect end-of-year information and secondary career and technical education and industry certification information. More information about the FDOE's survey collection process can be found at https://www.fldoe.org/accountability/data-sys/database-manuals-updates/user-manual.

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

YES

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

FDOE reviewed data for each LEA and determined the level of support needed for each indicator. The SEA provided front-loaded technical assistance aligned to Tier 1, Tier 2 and Tier 3 levels of need to ensure LEAs received comprehensive, proactive support. Technical assistance included targeted professional learning, data-based coaching, and implementation guidance to address gaps, build capacity and support progress toward the SiMR and all applicable indicators.

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

NO

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

NO

Section B: Implementation, Analysis and Evaluation

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

https://www.fldoe.org/academics/exceptional-student-edu/data/

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.

Although the FDOE did not implement new infrastructure improvement strategies during the reporting period, it will continue to refine and expand implementation of existing strategies.

Next steps include:

• Continued implementation and refinement of monitoring activities, including on-site and desktop monitoring;

• Ongoing integration of general education and special education staff in monitoring and support efforts;

• Continued collaboration with IDEA-funded state projects to provide aligned technical assistance; and

• Expansion of supports to strengthen LEA capacity and improve implementation of evidence-based practices.

Anticipated outcomes include:

• Increased consistency in implementation of monitoring processes across LEAs;

• Strengthened LEA capacity to implement required practices with fidelity; and

• Improved outcomes for students with disabilities aligned with the SiMR.

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.

FDOE, in collaboration with its internal and external stakeholders, had selected increasing the statewide four-year cohort graduation rate for SWDs from 77 percent for the 2017-18 cohort to 83 percent for the 2025-26 cohort and reducing the graduation gap between all students and SWDs by half (from 10.2 percentage points in 2017-18 to 5.1 percentage points) as the SiMR.

For the 2023-24 cohort, Florida reported a graduation rate of 85.5 percent for SWDs, which exceeded the long-term SiMR target even though it represented a decrease of 2.9 percentage points from the prior year. The graduation rate outcome continued to align with the intent of the SiMR to improve statewide postsecondary readiness and school completion for SWDs, although it was based solely on the state's four-year cohort graduation methodology and not on SPP/APR Indicator 1.

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.

FDOE did not implement any new infrastructure improvement strategies; therefore, no next steps for each of the infrastructure improvement strategies were required.

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

Six Key Practices:

Beginning in 2012, BEESS engaged stakeholders in conversations to review key evidence-based practices for systems improvement for states, LEAs and schools from What Matters Most: Moving Your Numbers (National Center for Educational Outcomes, 2012). Since then, the key practices guided the relationships between FDOE, the LEAs, and other stakeholders toward continuous improvement in outcomes for SWDs.

Use Data Well: Identified and responded to community needs and created, refined and revised state systems of support.

Focus Goals: Established common goals and provided products and services to facilitate focused goal settings and coherent plans.

Select & Implement Shared Instructional Practices: Served to help LEAs improve the quality of instruction for all students and established a statewide system of support to LEAs.

Implement Deeply: Limited state and LEA requirements and provided products and services that helped LEAs fully implement strategies.

Monitor & Provide Feedback: Helped LEAs understand the relationship between monitoring for improvement and monitoring for compliance.

Inquire & Learn: Evaluated adult and student learning and recognized continuous improvement of all students and specific groups of students.

Provide a summary of each evidence-based practice.

In addition to the Six Key Practices for systems change, FDOE implemented additional evidence-based practices to improve student achievement and increase graduation rates for students with disabilities.

FDOE encouraged all LEAs to implement early warning systems (EWS) to identify students at risk of not graduating on time. Through Project 10: Transition Education Network (Project 10), an IDEA-funded state project focused on secondary transition, FDOE provided training and technical assistance in using a Florida-developed EWS. This system used school-level data, including grade-point average, credits earned, attendance, behavior, and other indicators, to identify students at varying levels of risk. Project 10 also provided training and technical assistance on evidence-based interventions to support students identified through the EWS.

Following the identification of student needs, LEAs implemented a multi-tiered system of supports (MTSS) to provide individualized interventions and support aligned to individual student needs, ensuring that students received the appropriate level of support to remain on track for graduation. At the time of reporting, 73 out of 83 LEAs were utilizing an EWS, including 66 of the 67 (98.5 percent) traditional LEAs. In addition to Project 10 supports, LEA personnel accessed professional learning through the Personnel Learning Alternatives Portal, including the course Using an Early Warning System to Increase Graduation Success, which provided guidance on effective implementation of EWS practices.

Some LEAs implemented these systems across both general education and exceptional student education programs, with integration into local information technology systems to support consistent and efficient use.

These evidence-based practices are intended to directly impact the SiMR by strengthening both system-level and instructional practices across LEAs. Specifically, these practices are expected to result in:

• Improved LEA practices, including more consistent use of data to identify students at risk and provide timely, data-informed interventions;

• Enhanced instructional practices, through increased use of evidence-based strategies aligned to individual student needs;

• Stronger system alignment, ensuring that monitoring, technical assistance and professional learning are coordinated to support implementation with fidelity; and

• Improved student outcomes, including increased student engagement, improved progress toward graduation, and higher graduation rates for students with disabilities.

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.

FDOE's decision to focus on increasing the statewide graduation rate for SWDs as the SiMR reflects a strategic approach to improving outcomes across all LEAs. By implementing the Six Key Practices as a statewide framework, FDOE ensures that improvement efforts are scalable, consistent and aligned across systems.

FDOE's evidence-based practices, including the use of EWS and MTSS, are intended to impact the SiMR through the following changes:

Changes in LEA policies and procedures: LEAs are expected to strengthen and standardize processes for identifying students at risk of not graduating on time through the use of data systems such as EWS, and to implement structured problem-solving processes aligned to MTSS.

Changes in educator and provider practices: Teachers and service providers are expected to increase the use of data to inform instruction, implement individualized interventions and monitor student progress to ensure students remain on track for graduation.

Changes in system-level practices: FDOE aligns monitoring, technical assistance and professional learning to support implementation of evidence-based practices with fidelity, resulting in more consistent and effective support for LEAs.

Changes in student outcomes: These combined efforts are expected to improve student engagement, increase credit accrual, reduce dropout risk and ultimately increase graduation rates for SWDs, consistent with the SiMR.

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

FDOE uses multiple data sources to monitor fidelity of implementation and assess practice change related to the SiMR. These include data collected through on-site and desktop monitoring, as well as student outcome data for SWDs.

On-site and desktop monitoring activities provide information on the extent to which LEAs are implementing evidence-based practices, including the use of EWS and MTSS, with fidelity. These monitoring activities include review of LEA processes, documentation, and implementation practices aligned to the Six Key Practices.

Student outcome data, including graduation rates and other relevant indicators, are used to assess the impact of these practices and to determine whether changes in LEA and educator practices result in improved outcomes for SWDs.

Together, these data sources allow FDOE to evaluate both the fidelity of implementation and the extent to which practice changes are occurring at the LEA and school levels, and to provide specialized support and technical assistance as needed.

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.

FDOE collected additional data through ongoing monitoring activities and student outcome measures to support the continued use of the FDOE's evidence-based practices. This data included information gathered through on-site and desktop monitoring, as well as progress toward improved graduation outcomes for SWDs.

Data collected through monitoring activities provided insight into the extent to which LEAs were implementing key practices, including the use of EWS and MTSS, and whether those practices were being implemented consistently across LEAs.

In addition, student outcome data, including graduation rates and related indicators, were used to assess whether these practices were contributing to improved outcomes for SWDs.

These combined data sources support FDOE's decision to continue implementation of the Six Key Practices framework, as they demonstrate ongoing use of evidence-based practices across LEAs and progress toward improving graduation outcomes aligned with the SiMR.

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

BEESS will continue implementation of the Six Key Practices to support improved educational outcomes for students with disabilities (SWDs).

Next Steps for FFY 2025:

• Continue to support LEAs in the implementation of EWS to identify students at risk of not graduating on time;

• Expand professional learning and technical assistance related to the use of MTSS to ensure individualized interventions are implemented effectively;

• Strengthen the use of data to inform decision-making at FDOE and LEA levels; and

• Continue alignment of monitoring, technical assistance, and professional learning to support implementation of evidence-based practices with fidelity.

Anticipated Outcomes:

• Increased consistency in the implementation of evidence-based practices across LEAs;

• Improved identification and support of students at risk of not graduating on time;

• Strengthened educator practices through increased use of data and evidence-based strategies; and

• Improved student outcomes, including increased engagement, progress toward graduation, and higher graduation rates for SWDs, aligned with the SiMR.

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

YES

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

In collaboration with stakeholders and BEESS IDEA-funded state projects, FDOE reviewed evaluation data, including cohort graduation rates for SWDs and the graduation rate gap between SWDs and students without disabilities. Data indicate an increase in the graduation rate for SWDs from 85.5 percent in 2022-23 school year to 86.8 percent in 2023-24 school year, along with a reduction in the graduation rate gap from 3.7 to 2.9 percentage points.

These data demonstrate continued progress toward the SiMR and support the FDOE's decision to continue implementation of the SSIP without modifications. The evaluation results indicate that the FDOE's current strategies are contributing to improved outcomes for SWDs.

Section C: Stakeholder Engagement

Description of Stakeholder Input

FDOE implemented multiple mechanisms to ensure meaningful and sustained stakeholder engagement. Oversight was provided by BEESS, in collaboration with the State Advisory Panel for the Education of Exceptional Students, through indicator-specific strategic planning teams responsible for reviewing data, setting targets and developing improvement strategies.

Strategic planning teams included FDOE staff, IDEA-funded state project staff with LEA- and school-level representation, representatives from other agencies, and individuals with relevant expertise. Teams analyzed statewide and LEA-level data to inform target setting, and proposed targets were reviewed by FDOE prior to initial approval.

Proposed targets were publicly posted and disseminated through multiple venues, including the Florida Administrative Registry (FAR) and FDOE's website, and were shared with LEA ESE Directors, IDEA-funded state projects, and the State Advisory Panel for the Education of Exceptional Students. Stakeholder input was solicited through a statewide survey and considered in finalizing targets and informing revisions, data analysis, improvement strategies and evaluation of progress.

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

FDOE staff engaged members of the State Advisory Panel for the Education of Exceptional Students, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents in setting targets, analyzing data, developing improvement strategies, and evaluating progress. Florida recognized that stakeholder input was vital to developing and maintaining successful educational programs. Multiple internal and external stakeholders participated in identifying SSIP improvement strategies to ensure that all SWDs graduated from high school with a standard diploma and were college-, career- and life-ready.

FDOE collaborated with stakeholders, including parents, students, educators, administrators from LEAs, state agencies, advocacy groups, higher education institutions, IDEA-funded state projects and federally funded parent support groups. Many of these same stakeholders were also represented on the State Advisory Panel for the Education of Exceptional Students. Stakeholders, including members of the State Advisory Panel, participated in data analysis, provided feedback on areas of concern regarding the performance of SWDs, and assisted in identifying root causes for performance outcomes.

Stakeholder input was also gathered through strategic plan teams, which were responsible for the development and implementation of IDEA-funded state project deliverables. These deliverables included activities completed to support the achievement of the targets noted in the SPP and positive outcomes for SWDs.

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

NO

Additional Implementation Activities

List any activities not already described that the State intends to implement in the next fiscal year that are related to the SiMR.

Florida Differentiated Monitoring System (DMS) 2.0

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

DMS 2.0 will be implemented in a phased approach during FFY 2025, with initial piloting and refinement followed by continued expansion and statewide scale-up.

During FFY 2025, FDOE will collect data aligned with IDEA Part B indicators, LEA determinations, and fiscal risk assessment results to evaluate implementation and inform levels of support for the LEAs. Additional data will include information gathered through on-site and desktop monitoring activities to assess the extent to which LEAs are implementing required practices with fidelity.

These data will be used to determine the level of support and integrated monitoring activities each LEA must participate in during the grant year, ensuring that resources and technical assistance are aligned to identified needs.

Expected outcomes include:

• Increased consistency and accuracy in LEA data collection and reporting;

• Improved identification of areas of noncompliance and need;

• More targeted and effective technical assistance and monitoring support; and

• Improved outcomes for students with disabilities, including progress toward increased graduation rates aligned with the SiMR.

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

As Florida prepares to implement the DMS 2.0, several potential barriers have been forecasted that may impact the successful statewide rollout. First, capacity and resource constraints remain a concern, as implementing DMS 2.0 requires significant staff time, technical expertise, and financial resources. Smaller LEAs may face challenges meeting new monitoring requirements without additional support. Second, data integration and quality present a potential barrier, as aligning DMS 2.0 with existing data systems and ensuring accurate, timely reporting across all LEAs will require robust technology infrastructure and consistent processes.

Another anticipated challenge involves training and implementation of fidelity. Ensuring that all LEA personnel understand and consistently apply DMS 2.0 protocols will necessitate extensive professional learning opportunities, and variability in training uptake could affect fidelity. Stakeholder engagement and buy-in also represent a critical barrier, as some LEAs and stakeholders may perceive increased monitoring as compliance-driven rather than improvement-focused, which could hinder collaboration. Additionally, the timeline for statewide scale-up may pose difficulties, particularly if unexpected delays occur in system development or training. Finally, aligning DMS 2.0 with existing initiatives such as MTSS, EWSs, and the Florida Assessment of Student Thinking will require careful coordination to avoid duplication and confusion.

To address these barriers, the State plans to provide targeted technical assistance and professional development to LEAs, prioritize transparent communication with stakeholders to emphasize the improvement-focused nature of DMS 2.0, and develop a phased implementation plan that allows for adjustments based on feedback and capacity. Florida will also explore leveraging existing data systems and resources to streamline integration and ensure consistency across LEAs. These proactive steps aim to mitigate anticipated challenges and support the successful statewide implementation of DMS 2.0.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

The State did not provide an Evaluation Plan. The State must provide a link to the current Evaluation Plan in the FFY 2024 SPP/APR.

Response to actions required in FFY 2023 SPP/APR

FDOE has provided the link to the evaluation plan for FFY 2024.

17 - OSEP Response

17 - Required Actions

Indicator 18: General Supervision

Instructions and Measurement

Monitoring Priority: General Supervision

Compliance indicator: This SPP/APR indicator focuses on the State's exercise of its general supervision responsibility to monitor its local educational agencies (LEAs) for requirements under Part B of the Individuals with Disabilities Education Act (IDEA) through the State's reporting on timely correction of noncompliance (20 U.S.C. 1412(a)(11) and 1416(a); and 34 C.F.R. §§ 300.149, 300.600). In reporting on findings under this indicator, the State must include findings from data collected through all components of the State's general supervision system that are used to identify noncompliance. This includes, but is not limited to, information collected through State monitoring, State database/data system, dispute resolution, and fiscal management systems as well as other mechanisms through which noncompliance is identified by the State.

Data Source

The State must include findings from data collected through all components of the State's general supervision system that are used to identify noncompliance. This includes, but is not limited to, information collected through State monitoring, State database/data system, dispute resolution, and fiscal management systems as well as other mechanisms through which noncompliance is identified by the State. Provide the actual numbers used in the calculation. Include all findings of noncompliance regardless of the specific type and extent of noncompliance.

Measurement

This SPP/APR indicator requires the reporting on the percent of findings of noncompliance corrected within one year of identification:

a. # of findings of noncompliance issued the prior Federal fiscal year (FFY) (e.g., for the FFY 2024 submission, use FFY 2023, July 1, 2023 – June 30, 2024)

b. # of findings of noncompliance the State verified were corrected no later than one year after the State's written notification of findings of noncompliance.

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

Instructions

Targets must be 100%.

States are required to complete the General Supervision Data Table within the online reporting tool.

Report in Column A, the number of findings of noncompliance made in FFY 2023 (July 1, 2023 – June 30, 2024), as reported in the compliance indicator, and report in Column C1, the number of those findings which were timely corrected, as soon as possible and in no case later than one year after the State's written notification of noncompliance. Report in Column B, the number of additional findings of noncompliance related to the compliance indicator made in FFY 2023 (July 1, 2023-June 30, 2024) and report in Column C2, the number of those additional findings related to the compliance indicator which were timely corrected, as soon as possible and in no case later than one year after the State's written notification of noncompliance.

States may also provide additional information related to other findings of noncompliance that are not specific to the compliance indicators. This row would include reporting on all other findings of noncompliance that were not reported by the State under the compliance indicators listed below (e.g., Results indicators (including related requirements), Fiscal, Dispute Resolution, etc.). In future years (e.g., with the FFY 2026 SPP/APR), States may be required to further disaggregate findings by results indicators (1, 2, 3, 4A, 5, 6, 7, 8, 14, 15, 16, and 17), fiscal and other areas.

Provide detailed information about the timely correction of child-specific and regulatory/systemic noncompliance as noted in OSEP's response for the previous SPP/APR. If the State did not ensure timely correction of the previous findings of noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance and the actions that have been taken or will be taken, to ensure the subsequent correction of the outstanding noncompliance, to address areas in need of improvement, and any sanctions or enforcement actions used, as necessary and consistent with IDEA's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

18 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2020	100.00%

FFY	2019	2020	2021	2022	2023
Target	100%	100%	100%	100%	100%
Data					Not Valid and Reliable

Targets

FFY	2024	2025
Target	100%	100%

Indicator 4B. Percent of LEAs that have: (a) a significant discrepancy, as defined by the State, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy, as defined by the State, and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. (20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
0	0	0	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

FDOE did not have findings.

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*:

FDOE did not have findings.

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

FDOE did not have findings.

Indicator 9. Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification. (20 U.S.C. 1416(a)(3)(C))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
0	0	0	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

FDOE did not have findings.

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*:

FDOE did not have findings.

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

FDOE did not have findings.

Indicator 10. Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. (20 U.S.C. 1416(a)(3)(C))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
0	0	0	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

FDOE did not have findings.

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*:

FDOE did not have findings.

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

FDOE did not have findings.

Indicator 11. Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe. (20 U.S.C. 1416(a)(3)(B))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
2,015	0	2,015	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

FDOE did not have additional findings reported in Column B and C2.

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*:

FDOE did not have additional findings reported in Column B and Column C2.

FDOE identified findings and issued noncompliance notifications to LEAs based on a total of 2,015 child-specific cases of noncompliance for initial evaluations of eligible and ineligible students who were evaluated beyond 60 days of receiving parental consent for initial evaluation.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the FDOE reviewed updated data on each of the affected LEAs and verified that each LEA was at 100% compliance with the regulatory requirements within one year of notification.

After the FDOE verified each individual instance of noncompliance was corrected within one year, as well as ensured the correct implementation of the regulatory requirements within one year with 100% compliance through a review of updated data, FDOE notified the LEAs that each finding of noncompliance was closed.

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

FDOE did not have additional findings reported in Column B and Column C2.

FDOE verified that 1,948 individual cases of noncompliance were corrected prior to the FFY 2023 SPP/APR submission.

In addition, FDOE verified that the 67 reported cases of individual noncompliance were corrected by requiring the identified LEAs to either (1) submit the evaluation completion date for each student whose evaluation had been incomplete when the indicator data were submitted or (2) provide a justification for why the evaluation of record was exempt from the database (e.g., the student had exited the LEA's jurisdiction before the evaluation was completed). Each tracked case was either evaluated or had its exemption properly documented. As a result, all 2,015 identified instances of noncompliance were fully corrected in accordance with OSEP QA 23-01.

Indicator 12. Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. (20 U.S.C. 1416(a)(3)(B))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
1	0	1	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

FDOE did not have additional findings reported in Column B and Column C2.

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*:

FDOE did not have additional findings reported in Column B and Column C2.

FDOE identified findings and issued noncompliance notifications to LEAs based on a total of 1 child-specific case of noncompliance for children who were transitioned from Part C to Part B by their third birthday.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the LEA was required to submit to the FDOE updated data for five children who were transitioned from Part C to Part B to determine if the LEA was in compliance. (Note: if there were fewer than five children who transitioned within that month, the records for all the children who transitioned that month were reviewed [one, two, three or four children]). FDOE verified that the LEA was at 100% compliance with the regulatory requirements within one year of notification.

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

FDOE did not have additional findings reported in Column B and Column C2.

FDOE verified that the one reported case of individual noncompliance was corrected by contacting the LEA and requesting the student file. The information provided by the LEA allowed FDOE to verify that the identified individual instance of noncompliance was fully corrected in accordance with OSEP QA 23-01.

Indicator 13. Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age-appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services and needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority. (20 U.S.C. 1416(a)(3)(B))

Findings of Noncompliance Identified in FFY 2023

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
16	0	16	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any additional findings reported in Column B.

FDOE did not have additional findings reported in Column B and Column C2.

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*:

FDOE did not have additional findings reported in Column B and Column C2.

FDOE provided support, training and technical assistance to assist the LEAs in correctly implementing the regulatory requirements. The LEAs with instances of noncompliance were required to submit corrective action plans and updated data that demonstrated 100 percent compliance.

In keeping with the IDEA requirements and OSEP QA 23-01, to ensure that the LEAs were correctly implementing regulatory requirements with 100% compliance, the FDOE reviewed updated data on each of the affected LEAs and verified that each LEA was at 100% compliance with the regulatory requirements within one year of notification.

After the FDOE verified each individual instance of noncompliance was corrected within one year, as well as ensured the correct implementation of the regulatory requirements through a review of updated data within one year, FDOE notified the LEAs that each finding of noncompliance was closed.

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

The 16 cases of noncompliance for FFY 2023 came from two LEAs. FDOE, in collaboration with Project 10, an IDEA-funded state project, required each LEA to correct all student-specific findings of noncompliance. Additionally, the LEAs were required to submit to FDOE verification of the correction of each finding of noncompliance, no later than 60 calendar days from the date the LEA was notified of the noncompliance. FDOE reviewed all verification documentation to ensure that each case was corrected. FDOE conducted regular check-ins with the LEAs. As a result, FDOE verified that all 16 identified individual instances of noncompliance were fully corrected in accordance with OSEP QA 23-01.

Optional for FFY 2024 and 2025:

Other Areas - All other findings: States may report here on all other findings of noncompliance that were not reported under the compliance indicators listed above (e.g., Results indicators (including related requirements), Fiscal, Dispute Resolution, etc.).

Column B: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Column B for which correction was not completed or timely corrected
0	0	0

Please explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any findings reported in this section:

FDOE did not have additional findings reported in Column B and Column C2.

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*:

FDOE did not have additional findings reported in Column B and Column C2.

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

FDOE did not have additional findings reported in Column B and Column C2.

Total for All Noncompliance Identified (Indicators 4B, 9, 10, 11, 12, 13, and Optional Areas):

Column A: # of written findings of noncompliance identified in FFY 2023 (7/1/23 – 6/30/24)	Column B: # of any other written findings of noncompliance identified in FFY 2023 not reported in Column A (e.g., those issued based on other IDEA requirements), if applicable	Column C1: # of written findings of noncompliance from Column A that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column C2: # of written findings of noncompliance from Column B that were timely corrected (i.e., verified as corrected no later than one year from identification)	Column D: # of written findings of noncompliance from Columns A and B for which correction was not completed or timely corrected
2,032	0	2,032	0	0

FFY 2024 SPP/APR Data

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified FFY 2023	FFY 2023 Data	FFY 2024 Target	FFY 2024 Data	Status	Slippage
2,032	2,032	Not Valid and Reliable	100%	100.00%	Met target	N/A

Percent of findings of noncompliance not corrected or not verified as corrected within one year of identification	0.00%

Provide additional information about this indicator (optional)

Summary of Findings of Noncompliance identified in FFY 2023 Corrected in FFY 2024 (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified during FFY 2023 (the period from July 1, 2023 through June 30, 2024)	2,032
2. Number of findings the State verified as timely corrected (corrected within one year from the date of written notification to the LEA of the finding)	2,032
3. Number of findings not verified as corrected within one year	0

Subsequent Correction: Summary of All Outstanding Findings of Noncompliance Identified in FFY 2023 Not Timely Corrected in FFY 2024 (corrected more than one year from identification of the noncompliance):

4. Number of findings of noncompliance not timely corrected	0
5. Number of findings in Col. A the State has verified as corrected beyond the one-year timeline for Indicator 4B, 9, 10, 11, 12, 13 (“subsequent correction”)	0
6a. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 4B	0
6b. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 9	0
6c. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 10	0
6d. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 11	0
6e. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 12	0
6f. Number of additional written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline (“subsequent correction”) - Indicator 13	0

6g. (optional) Number of written findings of noncompliance (Col. B) the state has verified as corrected beyond the one-year timeline ("subsequent correction") - All other findings	0
7. Number of findings not yet verified as corrected	0

Subsequent correction: If the State did not ensure timely correction of previous findings of noncompliance, provide information on the nature of any continuing noncompliance and the actions that have been taken, or will be taken, to ensure the subsequent correction of the outstanding noncompliance, to address areas in need of improvement, and any sanctions or enforcement actions used, as necessary and consistent with IDEA's enforcement provisions, the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), and State rules.

FDOE did not have additional findings.

Correction of Findings of Noncompliance Identified Prior to FFY 2023

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

18 - Prior FFY Required Actions

The State must provide valid and reliable data for FFY 2024 in the FFY 2024 SPP/APR.

Response to actions required in FFY 2023 SPP/APR

FDOE provided valid and reliable data for FFY 2024.

18 - OSEP Response

The State has established the baseline year for this indicator, using FFY 2020, but OSEP cannot accept that baseline because FFY 2023 is the first reporting year for this indicator and OSEP expects that the State's FFY 2023 data, or the first year of valid and reliable data, for this indicator is the State's baseline data, as indicated in the Measurement Table.

18 - Required Actions

The State must establish baseline for this indicator in the FFY 2025 SPP/APR.

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:

Patricia Bodiford

Title:

Bureau Chief, Bureau of Exceptional Education and Student Services

Email:

Patricia.Bodiford@fldoe.org

Phone:

850-245-9394

Submitted on:

04/23/26 5:04:42 PM

Determination Enclosures

RDA Matrix

Florida
2026 Part B Results-Driven Accountability Matrix

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
97.73%	Meets Requirements

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	20	20	100.00%
Compliance	22	21	95.45%

(1) For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2026: Part B."

2026 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment (2)	Grade 4	98%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	96%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	36%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	94%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	35%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	85%	1

Math Assessment Elements

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 4	98%	1
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 8	96%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	61%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	92%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	27%	2
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	89%	1

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

Exiting Data Elements

Exiting Data Elements	Performance (%)	Score
Percentage of Children with Disabilities who Dropped Out	7	2
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma*	92	2

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

2026 Part B Compliance Matrix

Part B Compliance Indicator (3)	**Performance (%)**	**Full Correction of Findings of Noncompliance Identified in FFY 2023** (4)	**Score**
Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.	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	96.97%	YES	2
Indicator 12: IEP developed and implemented by third birthday	99.89%	YES	2
Indicator 13: Secondary transition	99.85%	YES	2
Indicator 18: General Supervision	100	YES	2
Timely and Accurate State-Reported Data	87.30%		1
Timely State Complaint Decisions	100.00%		2
Timely Due Process Hearing Decisions	100.00%		2
Longstanding Noncompliance			2
Programmatic Specific Conditions	None		
Uncorrected identified noncompliance	None		

(3) The complete language for each indicator is located in the Part B SPP/APR Indicator Measurement Table at: https://sites.ed.gov/idea/files/FFY2024-Part-B-SPP-APR-Reformatted-Measurement-Table.pdf

(4) This column reflects full correction, which is factored into the scoring only when the compliance data are >=5% and <10% for Indicators 4B, 9, and 10, and >=90% and <95% for Indicators 11, 12, 13 and 18.

Data Rubric

Florida

FFY 2024 APR (1)

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

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	0	0
3B	0	0
3C	1	1
3D	0	0
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	19
Timely Submission Points - If the FFY 2024 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	24

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

618 Data (2)

Table	Timely	Complete Data	Passed Edit Check	Total
Child Count/ Ed Envs Due Date: 7/30/25	1	1	1	3
Personnel Due Date: 2/18/26	1	1	1	3
Exiting Due Date: 2/18/26	1	1	1	3
Discipline Due Date: 2/18/26	1	1	1	3
State Assessment Due Date: 1/7/26	1	0	0	1
Dispute Resolution Due Date: 11/19/25	1	1	1	3
MOE/CEIS Due Date: 11/19/25	1	0	1	2

618 Score Calculation

Subtotal	18
Grand Total (Subtotal X 1.28571429) =	23.14

(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	24
B. 618 Grand Total	23.14
C. APR Grand Total (A) + 618 Grand Total (B) =	47.14
Total N/A Points in APR Data Table Subtracted from Denominator	0
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	54.00
D. Subtotal (C divided by Denominator) (3) =	0.8730
E. Indicator Score (Subtotal D x 100) =	87.30

(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.28571429.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2026 Submission

SPP/APR Data

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

Part B 618 Data

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

618 Data Collection	**ED*Facts* Files**	**Due Date**
Part B Child Count and Educational Environments	FS002 & FS089	7/30/2025
Part B Personnel	FS070, FS099, FS112	2/18/2026
Part B Exiting	FS009	2/18/2026
Part B Discipline	FS005, FS006, FS007, FS088, FS143, FS144	2/18/2026
Part B Assessment	FS175, FS178, FS185, FS188	1/7/2026
Part B Dispute Resolution	FS227, FS228, FS229, FS230	11/19/2025
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	FS231, FS232, FS233, FS234, FS235, FS236, FS237, FS238	11/19/2025

2) Complete Data – A State will receive one point if it submits data for all files, permitted values, category sets, subtotals, and totals associated with a specific data collection by the initial due date. No data is reported as missing. No placeholder data is submitted. The data and metadata responses submitted to ED*Facts* align. State-level data include data from all districts or agencies.

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

Dispute Resolution

IDEA Part B

Florida

School Year: 2024-25

Section A: Written, Signed Complaints

(1) Total number of written signed complaints filed.	303
(1.1) Complaints with reports issued.	133
(1.1) (a) Reports with findings of noncompliance	83
(1.1) (b) Reports within timelines	95
(1.1) (c) Reports within extended timelines	38
(1.2) Complaints pending.	0
(1.2) (a) Complaints pending a due process hearing.	0
(1.3) Complaints withdrawn or dismissed.	170

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	77
(2.1) Mediations held.	36
(2.1) (a) Mediations held related to due process complaints.	6
(2.1) (a) (i) Mediation agreements related to due process complaints.	3
(2.1) (b) Mediations held not related to due process complaints.	30
(2.1) (b) (i) Mediation agreements not related to due process complaints.	25
(2.2) Mediations pending.	0
(2.3) Mediations withdrawn or not held.	41

Section C: Due Process Complaints

(3) Total number of due process complaints filed.	305
(3.1) Resolution meetings.	205
(3.1) (a) Written settlement agreements reached through resolution meetings.	145
(3.2) Hearings fully adjudicated.	19
(3.2) (a) Decisions within timeline (include expedited).	3
(3.2) (b) Decisions within extended timeline.	16
(3.3) Due process complaints pending.	7
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing).	279

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

(4) Total number of expedited due process complaints filed.	38
(4.1) Expedited resolution meetings.	28
(4.1) (a) Expedited written settlement agreements.	20
(4.2) Expedited hearings fully adjudicated.	2
(4.2) (a) Change of placement ordered	1
(4.3) Expedited due process complaints pending.	0
(4.4) Expedited due process complaints withdrawn or dismissed.	36

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

These data were extracted on the close date:
11/19/2025

How the Department Made Determinations

Below is the location of How the Department Made Determinations (HTDMD) on OSEP's IDEA Website. How the Department Made Determinations in 2026 will be posted in June 2026. Copy and paste the link below into a browser to view.

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

Final Determination Letter

June 18, 2026

Honorable Anastasios Kamoutsas
Commissioner of Education
Florida Department of Education
325 West Gaines Street
Tallahassee, FL 32399

Dear Commissioner Kamoutsas:

I am writing to advise you of the U.S. Department of Education's (Department) 2026 determination under Section 616 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Florida meets the requirements and purposes of Part B of the IDEA. This determination is based on the totality of Florida's data and information, including the Federal fiscal year (FFY) 2024 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Florida's 2026 determination is based on the data reflected in its "2026 Part B Results-Driven Accountability Matrix" (RDA Matrix). The RDA Matrix is individualized for each State and Entity and consists of:

(1) a Compliance Matrix that includes scoring on Compliance Indicators and other compliance factors;

(2) a Results Matrix that includes scoring on Results Elements;

(3) a Compliance Score and a Results Score;

(4) an RDA Percentage based on both the Compliance Score and the Results Score; and

(5) the State's or Entity's Determination

The RDA Matrix is further explained in a document, entitled "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2026: Part B" (HTDMD).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making determinations in 2026, as it did for Part B determinations in 2015-2025. (The specifics of the determination procedures and criteria are set forth in the HTDMD document and reflected in the RDA Matrix for Florida).

In making Part B determinations in 2026, OSEP continued to use results data related to:

(1) the participation of children with disabilities (CWD) on Statewide assessments (which include the regular assessment and the alternate assessment);

(2) the participation and performance of CWD on the most recently administered (school year 2023-2024) National Assessment of Educational Progress (NAEP), as applicable (For the 2026 determinations, OSEP is using results data on the participation and performance of children with disabilities on the NAEP for the 50 States, the District of Columbia, the Bureau of Indian Education (BIE), and Puerto Rico. OSEP used the available NAEP data for Puerto Rico in making Puerto Rico's 2026 determination as it did for Puerto Rico's 2025 determination. OSEP used the publicly available NAEP data for the BIE that was comparable to the NAEP data available for the 50 States, the District of Columbia and Puerto Rico; specifically OSEP did not use NAEP participation data in making the BIE's 2026 determination because the most recently administered NAEP participation data for the BIE that is publicly available is 2020, whereas the most recently administered NAEP participation data for the 50 States, the District of Columbia, and Puerto Rico that is publicly available is 2024);

(3) the percentage of CWD who graduated with a regular high school diploma; and

(4) the percentage of CWD who dropped out.

You may access the results of OSEP's review of Florida's SPP/APR and other relevant data by accessing the ED*Facts* Metadata and Process System (E*MAPS)* SPP/APR reporting tool using your Florida-specific log-on information at https://emaps.ed.gov/suite/. When you access Florida's SPP/APR on the site, you will find, in applicable Indicators 1 through 18, the OSEP Response to the indicator and any actions that Florida is required to take. The actions that Florida is required to take are in the "Required Actions" section of the indicator.

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

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

(1) Florida's RDA Matrix;

(2) the HTDMD link;

(3) “2026 Data Rubric Part B,” which shows how OSEP calculated Florida's “Timely and Accurate State-Reported Data” score in the Compliance Matrix; and

(4) “Dispute Resolution 2024-2025,” which includes the IDEA Section 618 data that OSEP used to calculate the Florida's “Timely State Complaint Decisions” and “Timely Due Process Hearing Decisions” scores in the Compliance Matrix.

As noted above, Florida's 2026 determination is Meets Requirements. A State’s or Entity’s 2026 RDA Determination is Meets Requirements if the RDA Percentage is at least 80%, unless OSEP has imposed programmatic Specific Conditions on the State’s or Entity’s last three IDEA Part B grant awards (for FFYs 2023, 2024, and 2025), and those Specific Conditions are in effect at the time of the 2026 determination.

The Department is committed to transparency, accountability, strong partnerships with States and stakeholders, high expectations, and improved outcomes for children with disabilities. To support these priorities, the Secretary is considering modifications to the factors the Department uses when making determinations, effective June 2027. Potential additional factors include graduation rates and assessment data, such as graduation rates for students with disabilities compared to all students, and Statewide assessment results of students with disabilities compared to all students. Other potential factors include longstanding noncompliance (such as OSEP-identified noncompliance that remains unresolved) as a factor in determinations.

For the FFY 2025 SPP/APR submission due on February 1, 2027, OSEP is providing the following information about the IDEA Section 618 data. The 2025-26 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2025 SPP/APR and the 2027 IDEA Part B Results Matrix and data submitted during correction opportunities will not be used for these purposes. The 2025-26 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform for Part B SPP/APR Indicators 1, 2, 3, 5, 6, 15, and 16 (as they have in the past). States and Entities are expected to submit high-quality IDEA Section 618 Part B data that can be published and used by the Department as of the due date. States and Entities are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States and Entities to take one of the following actions for all business rules that are triggered in EDPass prior to the applicable due date: 1) revise the uploaded data to address the business rule; or 2) provide a data note addressing why the uploaded data triggered the business rule. States and Entities will be unable to submit the IDEA Section 618 Part B data without taking one of these two actions. There will not be a resubmission period for the IDEA Section 618 Part B data.

As a reminder, Florida must report annually to the public, by posting on the State educational agency’s (SEA’s) website, the performance of each local educational agency (LEA) located in Florida on the targets in the SPP/APR as soon as practicable, but no later than 120 days after Florida's submission of its FFY 2024 SPP/APR. In addition, Florida must:

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

(2) determine if each LEA “meets the requirements” of Part B, or “needs assistance,” “needs intervention,” or “needs substantial intervention” in implementing Part B of the IDEA;

(3) take appropriate enforcement action; and

(4) inform each LEA of its determination.

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

(1) includes Florida's determination letter and SPP/APR, OSEP attachments, and all State or Entity attachments that are accessible in accordance with Section 508 of the Rehabilitation Act of 1973; and

(2) will be accessible to the public via the ed.gov website.

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

Sincerely,

Erin McHugh
Deputy Director
Office of Special Education Programs

cc: Florida Director of Special Education