

STATE PERFORMANCE PLAN / ANNUAL PERFORMANCE REPORT: PART B

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

**For reporting on
FFY 2023**

Northern Mariana Islands



PART B DUE February 3, 2025

**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

This Executive Summary includes a description of CNMI's IDEA Part B FFY 2020 - FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). A description of the CNMI's General Supervision System, Technical Assistance System, Professional Development System and Stakeholder Involvement in the development and review of the SPP and APR and how the CNMI will report the SPP and APR to the Public are provided separately within this Introduction section of CNMI's SPP/APR.

The Special Education Program with technical assistance provided by the University of Guam Center for Excellence in Developmental Disabilities Education, Research, and Service (Guam CEDDERS), facilitated a process to determine targets for results indicators for the CNMI IDEA Part B FFY 2020-FFY 2025 SPP. The stakeholders reviewed the performance data, national data for each indicator, and engaged in a discussion of each indicator. Stakeholders included Special Education State Advisory Panel (SESAP), State Systemic Improvement Plan Core Team, PSS Key Management Team, and the Board of Education.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9, and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2023 SPP/APR is also provided within the related indicators.

Additional information related to data collection and reporting

Number of Districts in your State/Territory during reporting year

1

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.

CNMI Public School System (PSS) serves as the state educational agency and does not have local educational agencies (LEAs). CNMI PSS is a unitary educational system responsible for the implementation and supervision of special education and related services for children 3 through 21 years old in preschool programs and 20 public schools on three populated islands. The CNMI PSS general supervision system includes a monitoring system of programs and schools which allows for the identification and correction of non-compliance in a timely manner and is focused on improved educational results and functional outcomes for students with disabilities.

The Monitoring Procedures, includes procedures for timely correction of noncompliance, a definition of a "Finding", a description of sanctions that are in line with the PSS Disciplinary Procedures, the timelines and responsible party for the issuance of "Notice of Findings and/or Notice of Failure to Correct" from the Commissioner of Education, the monitoring responsibilities of the external and internal monitors, and the IEP file record review checklist that covers the IDEA regulatory related requirements aligned to the SPP indicators.

Currently, the CNMI PSS monitoring procedures are being updated to align with the July 2023 OSEP QA 23-01 guidance. The monitoring schedule for programs and schools includes an annual off-site review for all programs and schools. The schedule for the comprehensive on-site monitoring review of programs and schools has been updated to a six-year cycle. All programs and schools will have comprehensive on-site monitoring conducted at least once in the six-year cycle.

In addition, CNMI PSS also has in place policies and procedures, consistent with IDEA 2004 regulations, to resolve complaints including procedures to resolve complaints through dispute resolution session settlements and mediation agreements.

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 compliance.

The Special Education Compliance Monitor, the Internal Monitor, conducts a comprehensive school based on-site monitoring of schools on a cyclical basis. At least 10% or not less than 5 IEP files are randomly selected and are reviewed using the Compliance Monitoring IEP Record Review Checklist. The IEP Record Review Checklist includes the IDEA statutory and regulatory citations, with the related requirements aligned to the SPP indicators for reporting compliance data in the annual performance reports. The file review also serves as a "verification" mechanism to verify the accuracy and reliability of the database. The On-Site Comprehensive School-Based Monitoring process also includes classroom observations and/or school personnel and parent/guardian interviews to verify the data and information, including services provided, as documented in the IEP files reviewed.

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

The Special Education Program maintains the Special Education Database used to collect all required IDEA 618, monitoring, and SPP/APR data for reporting. The data inputted into the system is from the actual IEP documents submitted to the Special Education Program for each student with a disability. On a monthly basis, the Data Manager provides each program and school a google sheet with the timeline requirements for each student with an IEP and data for SPP Indicator 11: 60-Day timeline. The off-site and on-site monitoring utilizes the data from the Special Education Database to identify potential noncompliance. Verification of the data is done through a review of the actual IEP files maintained by the Special Education Program.

The comprehensive school-based on-site monitoring verifies both the actual IEP files maintained by the Special Education Program and the copy maintained by the school being monitored.

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

CNMI PSS issues findings based on the number of individual instances of noncompliance. A finding, the identification of noncompliance, is a Written Notification of Findings, from the Commissioner of Education to the School Principal that contains the conclusion that the school is in noncompliance of a specific regulatory requirement and the number of individual instances of noncompliance. The Written Notification of Findings includes: a. Area of Noncompliance: The IDEA statute or regulation citation. b. Data and Evidence: A description of the quantitative and/or qualitative data supporting the monitor's conclusion that there is noncompliance with that statute or regulation. c. Actions Required for Verification of Correction: A statement that requires correction as soon as possible, but in no case later than one year from the written notification. The actions specified are the required correction for child-specific instances and verification of updated data at 100% for demonstration of correctly implementing the regulations specific to the citation. d. Additional Corrective Actions and Improvement Activities: Activities and timelines to support needed improvements.

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).

Not applicable. CNMI PSS monitoring procedures do not include 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.

CNMI PSS reserves the right to use any appropriate enforcement actions to correct deficiencies related to compliance with IDEA requirements. Deficiencies are defined as failure to correct findings of noncompliance identified by the PSS and documented in the Written Notice of Failure to Correct based on the results of implementing the integrated monitoring activities. The Special Education Program will work closely with the school to correct the noncompliance, however, if the school does not correct the noncompliance within the specified timeline, with verified correction no later than one year of identification, the Special Education Program will notify the Commissioner of Education to take appropriate actions as per Board of Education Policy Part 400-Employee Discipline, Subpart A- Forms of Discipline: Appendix L. 60-30.2-401 Formal Reprimand, 60-30.2-402 Reduction in Rank or Pay, 60-30.2-404 Suspension, 60-30.2-406 Dismissal.

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.

Not applicable. CNMI PSS does not have LEAs.

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

As discussed earlier, the CNMI PSS monitoring procedures are being updated to align with the July 2023 OSEP QA 23-01 guidance. As the procedures are being updated, CNMI PSS ensures compliance with all IDEA regulations. The last General Supervision Monitoring Procedures was updated in December 2014 and can be found on: <https://cnmipss.org/special-education-program>.

Technical Assistance System:

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

The CNMI PSS has a technical assistance system and mechanisms in place to ensure timely delivery of high quality, evidence-based support is provided to improve results for children with disabilities. Over the past few years, the PSS has implemented several system wide initiatives intended to improve results for all students. PSS also accesses and benefits from universal technical assistance provided by OSEP and OSEP-funded TA Centers and Resources, either through publications, guidance tools, resource materials, monthly conference calls and webinars, or in person on site assistance through Pacific Learning Collaboratives or other venues. TA Centers such as NCSI for work on the SIMR, IDEA Data Center for evaluating the SSIP plans and high-quality data use, the DaSy Center and ECTA for the collection and analysis of the Early Intervention and Special Education preschool outcomes data, NCEO for inclusion in instruction and assessments, AIR/Progress Center for IEP development and delivery of services, and CIFR for IDEA fiscal requirements related to the maintenance of state financial support. PSS also contracts with Guam CEDDERS for targeted onsite and offsite technical assistance.

Professional Development System:

The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities.

The CNMI has in place a system for professional development to ensure that service providers, teachers, administrators and school level personnel have the knowledge and skills to effectively provide Special Education services that will result in improved outcomes for children with disabilities and their families. The PSS mechanism requires that all personnel participate in 10 professional development events. Two of the 10 days are statewide professional development, specific to PSS statewide changes and initiatives. The program also provides targeted training and professional learning sessions for school-level staff requesting to address specific needs of students including autism programming, functional behavior, safety planning, transition for early childhood and secondary.

The special education program continues to provide ongoing PD on the evaluation and IEP processes, procedural safeguards, transition requirements, behavior interventions and strategies, specially-designed instruction and appropriate accommodations. In 2023, the CNMI was awarded a State Personnel Development Grant (SPDG), that aims at incorporating evidence-based professional development components through an authentic engagement approach in developing high quality professional development through the use of technology. This SPDG, entitled "Project Higai", is supported by AIR/Progress Center, NASDSE, and Guam CEDDERS.

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.

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and

18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

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

YES

Number of Parent Members:

25

Parent Members Engagement:

Describe how the parent members of the State Advisory Panel, parent center staff, parents from local and statewide advocacy and advisory committees, and individual parents were engaged in setting targets, analyzing data, developing improvement strategies, and evaluating progress.

The parents in the State Advisory Panel are also members of other community or government agency councils that work in partnership with the CNMI PSS and share information to these agencies regarding the delivery of services and outcomes of students with disabilities. These agencies include the Northern Marianas Protection & Advocacy, the Council on Developmental Disabilities, the Council for Living Independently, the Department of Labor-Workforce Investment Agency, and the State Rehabilitative Council. Because of their involvement in these various councils, the parent members were able to contribute input, suggest improvement strategies, and understand how to evaluate progress- all of which allowed for active engagement in target setting and reviewing improvement strategies to evaluate progress. Although the number of parent members slightly decreased from last year, the quality of engagement remained due to the active partnership with CNMI PSS.

The November 2024 and January 2025 Special Education State Advisory Panel (SESAP) meetings provided an opportunity to gather input from SESAP members during the review of the FFY 2023 APR indicator performance, including explanation of slippage where applicable.

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.

In school year 2023-2024, the public school system conducted a parent summit to share the PSS strategic Performance Management goals, state wide assessment data and other topics of interest focused on building their knowledge and skills around mental health. School level parent nights were held at three schools for parents of students with disabilities to share resources and gather input and concerns regarding the services being provided. Each school hosts quarterly Parent Teacher advisory meetings to share school level data, information, activities and services being provided. Presentations were conducted at the Division of Youth Services annual Parent Development workshop in September, as well as training on functional behavior for parents of students with behavioral needs. An informational session on Autism in Early Childhood and school-aged children was conducted, by request, to the hospital's Pediatricians and their parent invitees. PSS also partners with the CNMI Family to Family Health Information Center under the Maternal, Infant, Child and Adolescent Health Program, Division of Public Health Programs and presents both virtually and in-person on various topics relating to services for children with disabilities, as requested.

Soliciting Public Input:

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

The CNMI PSS has several sources of soliciting public input. As a member of the CNMI Disabilities Network Partners, the CNMI PSS continues to engage these members not only from the disability community but those that serve as advocates as well. In an effort to engage more participation, some meetings continue to be offered virtually. These meetings and informational sessions included, but are not limited to, PSS Parent Advisory Council (10/30/23, 12/27/23, 1/22/24, 4/8/24), PSS Parent Advisory Council & PTA meeting (6/24/24), PSS Youth Advisory Panel monthly meetings, PSS State Board of Education, CNMI Family to Family Health Information Center, CNMI Council on Developmental Disabilities quarterly meetings. The CNMI PSS also has a social media page to help with outreach efforts in providing information to students, families, and the community.

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.

Upon successful submission, the PSS will continue to utilize the above-mentioned sources to make available the EMAPS generated SPP/APR pdf report to the viewing public. Additionally, the report will be available on the CNMI PSS website.

Reporting to the Public

How and where the State reported to the public on the FFY 2022 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 2022 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 2022 APR in 2024, is available.

The CNMI will annually report to the public as soon as practical but no later than 120 days following the submission of the SPP/APR. The CNMI will post the EDEN/EMAPS generated SPP/APR pdf version for public posting and OSEP's Determination Letter and Response Table on the PSS website at <https://www.cnmipss.org/special-education-program>.

Intro - Prior FFY Required Actions

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

Response to actions required in FFY 2022 SPP/APR

Technical assistance sources from which CNMI received assistance:

1. CNMI continues to work with the Department's Risk Management Service (RMS) to address CNMI's Public School System Specific Conditions through onsite and other technical assistance. As a result of the technical assistance, the CNMI PSS is no longer required to maintain and report on a Corrective Action Plan (CAP) but is required to submit a biannual report.
2. CNMI continues to access the support of OSEP-funded national centers: NCSI, IDC, ECTA, and PROGRESS Center to support CNMI's programs and services for improving educational results for children with disabilities. In particular, in partnership with University of Guam CEDDERS, PROGRESS Center provided on-site and off-site technical assistance and training designed for teachers and related service providers to develop high-quality IEPs for accessing the general curriculum and implementing high-quality educational programming for children with disabilities.
3. CNMI has also partnered with the National Association of State Directors of Special Education (NASDSE) to support increasing professional and family engagement for improving opportunities for professional and family learning. In addition, CNMI has accessed technical assistance from REL-Pacific to revisit the MTSS framework of the educational system.

Actions CNMI took as a result of the technical assistance:

1. With the Department's RMS guidance, CNMI submits a biannual report with updates on its administration of Department grant funds, with an emphasis on areas of repeat audit findings. In December 2023, a letter from the CNMI Interim Commissioner of Education was sent to Ms. Christine Jackson, Senior Risk Consultant, RMS, USDOE, for reconsideration of the specific conditions imposed on the CNMI Public School System.
2. In collaboration with Guam CEDDERS, PROGRESS Center, and NASDSE, CNMI applied for and was awarded the OSEP State Personnel Development Grant effective October 1, 2023. The purpose for the grant is to enhance the system's professional development through the use of technology to increase professional and family learning for improving educational results for children with disabilities.
3. In collaboration with REL-Pacific, CNMI has updated its MTSS framework in support of improving programs and services for all children in the system.

Intro - OSEP Response

The Commonwealth of the Northern Mariana Islands (CNMI)'s determinations for both 2023 and 2024 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 21, 2024 determination letter informed CNMI that it must report with its FFY 2023 SPP/APR submission, due February 3, 2025, on: (1) the technical assistance sources from which CNMI received assistance; and (2) the actions CNMI took as a result of that technical assistance. CNMI provided the required information.

OSEP has imposed Specific Conditions on the Commonwealth of the Northern Mariana Islands' IDEA Part B grant awards for the last three or more years. Those conditions are in effect at the time of the Department's 2025 determination.

Intro - Required Actions

CNMI's IDEA Part B determination for both 2024 and 2025 is Needs Assistance. In CNMI's 2025 determination letter, the Department advised CNMI of available sources of technical assistance, including OSEP-funded technical assistance centers, and required CNMI to work with appropriate entities. The Department directed CNMI to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. CNMI must report, with its FFY 2024 SPP/APR submission, due February 1, 2026, on: (1) the technical assistance sources from which CNMI received assistance; and (2) the actions CNMI took as a result of that technical assistance.

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2023 SPP/APR, use data from 2022-2023), 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
2017	76.39%

FFY	2018	2019	2020	2021	2022
Target >=	80.00%	80.00%	80.00%	80.00%	80.00%
Data	89.86%	90.77%	95.52%	91.94%	92.65%

Targets

FFY	2023	2024	2025
Target >=	80.00%	80.00%	80.00%

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

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Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Exiting Data Groups (ED ^{Facts} file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	50
SY 2022-23 Exiting Data Groups (ED ^{Facts} file spec FS009; Data Group 85)	02/21/2024	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 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	0
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
50	52	92.65%	80.00%	96.15%	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.

As an outlying area, CNMI does not report graduation data to the Department under ESEA Title 1. The graduation conditions in the CNMI is based on the approved CNMI Board of Education credit requirements. In school year 2005-2006, the BOE revised the graduation requirements, Policy 60-20-434, from 21 credits to 28 credits (23 credits for required subjects and 5 elective credits) to receive a high school diploma. The credit requirements for graduating with a high school diploma also apply to students with disabilities.

Are the conditions that youth with IEPs must meet to graduate with a regular high school diploma different from the conditions noted above? (yes/no)

NO

Provide additional information about this indicator (optional)

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

Data for this indicator are "lag" data. Describe the results of the State's examination of the section 618 exiting data for the year before the reporting year (e.g., for the FFY 2023 SPP/APR, use data from 2022-2023), 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
2021	8.06%

FFY	2018	2019	2020	2021	2022
Target <=	2.00%	2.00%	2.00%	8.06%	8.00%
Data	2.17%	1.86%	0.98%	8.06%	7.35%

Targets

FFY	2023	2024	2025
Target <=	8.00%	8.00%	8.00%

Targets: Description of Stakeholder Input

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Prepopulated Data

Source	Date	Description	Data
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	50
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	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 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (c)	
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (d)	0
SY 2022-23 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	02/21/2024	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (e)	2

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
2	52	7.35%	8.00%	3.85%	Met target	No Slippage

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

Definition

The CNMI uses the OSEP 618 definition for "Dropped Out" which states the total number of students who were enrolled at the start of the reporting period but were not enrolled at the end of the reporting period and did not exit through any other method. This includes dropouts, runaways, GED recipients, expulsions, status unknown, students who moved and are unknown to be continuing in another educational program, and students exiting the system in other ways. This method of collecting dropout data is consistent for all students.

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

NO

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

Provide additional information about this indicator (optional)

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3A: Participation for Children with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3A - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	92.59%
Reading	B	Grade 8	2020	85.07%
Reading	C	Grade HS	2020	65.22%
Math	A	Grade 4	2020	97.53%
Math	B	Grade 8	2020	92.54%
Math	C	Grade HS	2020	63.04%

Targets

Subject	Group	Group Name	2023	2024	2025
Reading	A >=	Grade 4	95.00%	95.00%	95.00%
Reading	B >=	Grade 8	95.00%	95.00%	95.00%
Reading	C >=	Grade HS	79.00%	87.00%	95.00%
Math	A >=	Grade 4	95.00%	95.00%	95.00%
Math	B >=	Grade 8	95.00%	95.00%	95.00%
Math	C >=	Grade HS	79.00%	87.00%	95.00%

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

FFY 2023 Data Disaggregation from EDFacts**Data Source:**

SY 2023-24 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

Date:

01/08/2025

Reading Assessment Participation Data by Grade (1)

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	95	83	57
b. Children with IEPs in regular assessment with no accommodations (3)	1	0	3
c. Children with IEPs in regular assessment with accommodations (3)	86	72	43
d. Children with IEPs in alternate assessment against alternate standards	8	8	7

Data Source:

SY 2023-24 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

Date:

01/08/2025

Math Assessment Participation Data by Grade

Group	Grade 4	Grade 8	Grade HS
a. Children with IEPs (2)	95	83	57
b. Children with IEPs in regular assessment with no accommodations (3)	1	0	3
c. Children with IEPs in regular assessment with accommodations (3)	86	73	40
d. Children with IEPs in alternate assessment against alternate standards	8	7	7

(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 2023 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4	95	95	98.73%	95.00%	100.00%	Met target	No Slippage
B	Grade 8	80	83	95.71%	95.00%	96.39%	Met target	No Slippage
C	Grade HS	53	57	76.32%	79.00%	92.98%	Met target	No Slippage

FFY 2023 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4	95	95	Not Valid and Reliable	95.00%	100.00%	Met target	N/A

Group	Group Name	Number of Children with IEPs Participating	Number of Children with IEPs	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
B	Grade 8	80	83	94.29%	95.00%	96.39%	Met target	No Slippage
C	Grade HS	50	57	71.05%	79.00%	87.72%	Met target	No Slippage

Regulatory Information

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

Public Reporting Information

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

<https://www.cnmipss.org/special-education-program>

Provide additional information about this indicator (optional)

3A - Prior FFY Required Actions

CNMI did not provide valid and reliable data for FFY 2022. CNMI must provide valid and reliable data for FFY 2023 in the FFY 2023 SPP/APR.

Response to actions required in FFY 2022 SPP/APR

In the 3A Indicator Data section, CNMI provided valid and reliable data for the FFY 2023 Indicator 3A participation performance.

3A - OSEP Response

3A - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3B - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	9.38%
Reading	B	Grade 8	2020	8.00%
Reading	C	Grade HS	2020	4.76%
Math	A	Grade 4	2020	7.35%
Math	B	Grade 8	2020	5.45%
Math	C	Grade HS	2020	15.00%

Targets

Subject	Group	Group Name	2023	2024	2025
Reading	A >=	Grade 4	15.00%	18.00%	21.00%
Reading	B >=	Grade 8	14.00%	17.00%	20.00%
Reading	C >=	Grade HS	11.00%	14.00%	17.00%
Math	A >=	Grade 4	13.00%	16.00%	19.00%
Math	B >=	Grade 8	11.00%	14.00%	17.00%
Math	C >=	Grade HS	21.00%	24.00%	27.00%

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

FFY 2023 Data Disaggregation from EDFacts

Data Source:

SY 2023-24 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/08/2025

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	87	72	46
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1	0	1
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	19	9	8

Data Source:

SY 2023-24 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/08/2025

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	87	73	43
b. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1	0	1
c. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	27	6	13

(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 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4	20	87	19.70%	15.00%	22.99%	Met target	No Slippage
B	Grade 8	9	72	17.24%	14.00%	12.50%	Did not meet target	Slippage
C	Grade HS	9	46	15.00%	11.00%	19.57%	Met target	No Slippage

Provide reasons for slippage for Group B, if applicable

CNMI did not meet its Reading proficiency target of 14% by 1.50% with a performance of 12.50% (9/72) and reported slippage by 4.74% from the previous year's 17.24% (10/58) performance. By numbers, this slippage represents a decrease by one student who scored at proficient or above (numerator) from 10 in FFY 2022 to nine in FFY 2023. Further, the number of students who received a valid score (denominator) increased by 14 from 58 in FFY 2022 to 72 in FFY 2023. Although there was just a decrease by one student who scored proficient or above, the increase in the total number of students who received a valid score made a difference in the calculation of the performance percentage.

The slippage could be attributed to the implementation of the new reading and math curriculum in school year 2022-2023 in support of recovery loss efforts from the COVID-19 pandemic. School year 2023-2024 continued the training and support to teachers for implementation. An adjustment to the new curriculum could have impacted student performance in 2023-2024.

To address this program improvement priority, CNMI continued partnering with Guam CEDDERS and the OSEP-funded PROGRESS Center to support teachers and related service personnel on the development of high-quality IEPs for implementing high-quality educational programming for students with an IEP. This partnership was further strengthened with CNMI receiving an OSEP State Personnel Development Grant: Project Higai effective October 1, 2023 to continue CNMI's efforts to enhance its technology-based professional development system for teachers and families that will result in improved educational results for students with an IEP. Project Higai's partners include Guam CEDDERS, PROGRESS Center, National Association of State Directors of Special Education (NASDSE), and the local CNMI Parent Training and Information (PTI) program.

In addition, beginning school year 2024-2025, CNMI PSS procured district-wide license for the online texthelp® literacy tools: uPar (Universal Protocol for Accommodations in Reading) and Read&Write for Google to support reading curriculum accessibility for all students. Initially, pilot implementation has started with two elementary schools to assess its usability with the CNMI PSS new reading curriculum.

FFY 2023 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs Scoring At or Above Proficient 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4	28	87	37.10%	13.00%	32.18%	Met target	No Slippage
B	Grade 8	6	73	8.77%	11.00%	8.22%	Did not meet target	Slippage
C	Grade HS	14	43	22.22%	21.00%	32.56%	Met target	No Slippage

Provide reasons for slippage for Group B, if applicable

CNMI did not meet its Math proficiency target of 11% by 2.78% with a performance of 8.22% (6/73) and reported a slight slippage by 0.55% from the previous year's 8.77% (5/57) performance. By numbers, this slippage represents an increase by one student who scored at proficient or above (numerator) from five in FFY 2022 to six in FFY 2023. Further, the number of students who received a valid score (denominator) increased by 16 from 57 in FFY 2022 to 73 in FFY 2023. Although there was an increase in the number of students who scored proficient or above, the increase in the total number of students with a valid score impacted the overall percentage.

The slight slippage could be attributed to the implementation of the new reading and math curriculum in school year 2022-2023 in support of recovery loss efforts from the COVID-19 pandemic. School year 2023-2024 continued the training and support to teachers for implementation. An adjustment to the new curriculum could have impacted student performance in 2023-2024.

To address this program improvement priority, CNMI continued partnering with Guam CEDDERS and the OSEP-funded PROGRESS Center to support teachers and related service personnel on the development of high-quality IEPs for implementing high-quality educational programming for students with an IEP. This partnership was further strengthened with CNMI receiving an OSEP State Personnel Development Grant: Project Higai effective October 1, 2023 to continue CNMI's efforts to enhance its technology-based professional development system for teachers and families that will result in improved educational results for students with an IEP. Project Higai's partners include Guam CEDDERS, PROGRESS Center, National Association of State Directors of Special Education (NASDSE), and the local CNMI Parent Training and Information (PTI) program.

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.cnmipss.org/special-education-program>

Provide additional information about this indicator (optional)

3B - Prior FFY Required Actions

None

3B - OSEP Response

3B - Required Actions

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

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

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

Instructions

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

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

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

3C - Indicator Data

Historical Data:

Subject	Group	Group Name	Baseline Year	Baseline Data
Reading	A	Grade 4	2020	27.27%
Reading	B	Grade 8	2020	85.71%
Reading	C	Grade HS	2020	44.44%
Math	A	Grade 4	2020	36.36%
Math	B	Grade 8	2020	85.71%
Math	C	Grade HS	2020	55.56%

Targets

Subject	Group	Group Name	2023	2024	2025
Reading	A >=	Grade 4	30.00%	33.00%	33.00%
Reading	B >=	Grade 8	85.00%	88.00%	88.00%
Reading	C >=	Grade HS	47.00%	50.00%	50.00%
Math	A >=	Grade 4	39.00%	42.00%	42.00%
Math	B >=	Grade 8	85.00%	88.00%	88.00%
Math	C >=	Grade HS	58.00%	61.00%	61.00%

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY

2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

FFY 2023 Data Disaggregation from EDFacts

Data Source:

SY 2023-24 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/08/2025

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	8	8	7
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	4	3	4

Data Source:

SY 2023-24 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/08/2025

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	8	7	7
b. Children with IEPs in alternate assessment against alternate standards scored at or above proficient	4	4	5

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4	4	8	33.33%	30.00%	50.00%	Met target	No Slippage
B	Grade 8	3	8	11.11%	85.00%	37.50%	Did not meet target	No Slippage
C	Grade HS	4	7	33.33%	47.00%	57.14%	Met target	No Slippage

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4	4	8	Not Valid and Reliable	39.00%	50.00%	Met target	N/A
B	Grade 8	4	7	33.33%	85.00%	57.14%	Did not meet target	No Slippage
C	Grade HS	5	7	44.44%	58.00%	71.43%	Met target	No Slippage

Regulatory Information

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

Public Reporting Information

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

<https://www.cnmipss.org/special-education-program>

Provide additional information about this indicator (optional)

3C - Prior FFY Required Actions

CNMI did not provide valid and reliable data for FFY 2022. CNMI must provide valid and reliable data for FFY 2023 in the FFY 2023 SPP/APR.

Response to actions required in FFY 2022 SPP/APR

In the 3C Indicator Data section, CNMI provided valid and reliable data for the FFY 2023 Indicator 3C proficiency performance.

3C - OSEP Response

3C - Required Actions

Indicator 3D: Gap in Proficiency Rates (Grade Level Academic Achievement Standards)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

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

Data Source

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

Measurement

D. Proficiency rate gap = [(proficiency rate for children with IEPs scoring at or above proficient against grade level academic achievement standards for the 2023-2024 school year) subtracted from the (proficiency rate for all students scoring at or above proficient against grade level academic achievement standards for the 2023-2024 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 2023-2024 school year compared to the proficiency rate for all students who were proficient against grade level academic achievement standards for the 2023-2024 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	35.66
Reading	B	Grade 8	2020	26.03
Reading	C	Grade HS	2020	33.11
Math	A	Grade 4	2020	30.26
Math	B	Grade 8	2020	30.36
Math	C	Grade HS	2020	51.94

Targets

Subject	Group	Group Name	2023	2024	2025
Reading	A <=	Grade 4	30.00	27.00	24.00
Reading	B <=	Grade 8	20.00	17.00	14.00
Reading	C <=	Grade HS	27.00	24.00	21.00
Math	A <=	Grade 4	24.00	21.00	18.00
Math	B <=	Grade 8	24.00	21.00	18.00
Math	C <=	Grade HS	46.00	43.00	40.00

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY

2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

FFY 2023 Data Disaggregation from EDFacts

Data Source:

SY 2023-24 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

Date:

01/08/2025

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	596	708	682
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	87	72	46
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	374	375	469
d. All students in regular assessment with accommodations scored at or above proficient against grade level	19	9	8
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1	0	1
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	19	9	8

Data Source:

SY 2023-24 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

Date:

01/08/2025

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	597	709	624
b. Children with IEPs who received a valid score and a proficiency was assigned for the regular assessment	87	73	43
c. All students in regular assessment with no accommodations scored at or above proficient against grade level	374	399	485
d. All students in regular assessment with accommodations scored at or above proficient against grade level	27	6	13
e. Children with IEPs in regular assessment with no accommodations scored at or above proficient against grade level	1	0	1
f. Children with IEPs in regular assessment with accommodations scored at or above proficient against grade level	27	6	13

(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 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4	22.99%	65.94%	48.69	30.00	42.95	Did not meet target	No Slippage
B	Grade 8	12.50%	54.24%	39.82	20.00	41.74	Did not meet target	Slippage
C	Grade HS	19.57%	69.94%	40.63	27.00	50.38	Did not meet target	Slippage

Provide reasons for slippage for Group B, if applicable

CNMI did not meet its Group B gap target between All Students and Students with an IEP and reported slippage from the previous year's gap performance. As noted in 3B, CNMI did not meet Group B (8th grade) targets for FFY 2023 in both content areas and reported slippage from the previous year's performance. Because of the small "n" size, the difference in the number of students with an IEP scoring proficient or above changed by only one (decrease of one in Reading and an increase of one in Math), with more students receiving a valid score compared to the previous year. For all students in Group B, there was a similar decrease and increase in percentages from the previous year's performance: Reading decreased by 2.82% (57.06% in FFY 2022 and 54.24% in FFY 2023) and Math increased slightly by 0.62% (56.50% in FFY 2022 and 57.12% in FFY 2023).

The slippage in the gap performance from previous year could be attributed to the new reading and math curriculum implemented in school year 2022-2023 in support of the recovery loss efforts from the COVID-19 pandemic. School year 2023-2024 continued the training and support to teachers for implementation. For students with an IEP, this meant ensuring understanding of the new general curriculum by all teachers and how to provide appropriate accommodations for struggling learners to access the new curriculum. In addition, there continues to be a need for ongoing support to teachers in strengthening the specially designed instruction (SDI) for students with an IEP.

To address this program improvement priority, CNMI continued partnering with Guam CEDDERS and the OSEP-funded PROGRESS Center to support teachers and related service personnel on the development of high-quality IEPs for implementing high-quality educational programming for students with an IEP. This partnership was further strengthened with CNMI receiving an OSEP State Personnel Development Grant: Project Higai effective October 1, 2023 to continue CNMI's efforts to enhance its technology-based professional development system for teachers and families that will result in improved educational results for students with an IEP. Project Higai's partners include Guam CEDDERS, PROGRESS Center, National Association of State Directors of Special Education (NASDSE), and the local CNMI Parent Training and Information (PTI) program.

In addition, beginning school year 2024-2025, CNMI PSS procured district-wide license for the online texthelp® literacy tools: uPar (Universal Protocol for Accommodations in Reading) and Read&Write for Google to support reading curriculum accessibility for all students. Initially, pilot implementation has started with two elementary schools to assess its usability with the CNMI PSS new reading curriculum.

Provide reasons for slippage for Group C, if applicable

CNMI did not meet its Group C (HS) gap target in Reading between All Students and Students with an IEP and reported slippage from the previous year's gap performance. Both groups showed an increase in percentage from the previous year's performance: All Students increased by 14.31% (55.63% in FFY 2022 and 69.94% in FFY 2023), and Students with an IEP increased by 4.57% (15% in FFY 2022 and 19.57% in FFY 2023). For the students with an IEP in Group C, by numbers, the increase in percentage represented six more students scoring proficient or above from three in FFY 2022 to nine in FFY 2023. Further, the number of students with an IEP in Group C who received a valid score more than doubled from the previous year from 20 in FFY 2022 to 46 in FFY 2023.

The slippage in the gap performance from previous year could be attributed to the new reading and math curriculum implemented in school year 2022-2023 in support of the recovery loss efforts from the COVID-19 pandemic. School year 2023-2024 continued the training and support to teachers for implementation. For students with an IEP, this meant ensuring understanding of the new general curriculum by all teachers and how to provide appropriate accommodations for struggling learners to access the new curriculum. In addition, there continues to be a need for ongoing support to teachers in strengthening the specially designed instruction (SDI) for students with an IEP.

To address this program improvement priority, CNMI continued partnering with Guam CEDDERS and the OSEP-funded PROGRESS Center to support teachers and related service personnel on the development of high-quality IEPs for implementing high-quality educational programming for students with an IEP. This partnership was further strengthened with CNMI receiving an OSEP State Personnel Development Grant: Project Higai effective October 1, 2023 to continue CNMI's efforts to enhance its technology-based professional development system for teachers and families that will result in improved educational results for students with an IEP. Project Higai's partners include Guam CEDDERS, PROGRESS Center, National Association of State Directors of Special Education (NASDSE), and the local CNMI Parent Training and Information (PTI) program.

In addition, beginning school year 2024-2025, CNMI PSS procured district-wide license for the online texthelp® literacy tools: uPar (Universal Protocol for Accommodations in Reading) and Read&Write for Google to support reading curriculum accessibility for all students. Initially, pilot implementation has started with two elementary schools to assess its usability with the CNMI PSS new reading curriculum.

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A	Grade 4	32.18%	67.17%	36.26	24.00	34.99	Did not meet target	No Slippage
B	Grade 8	8.22%	57.12%	47.73	24.00	48.90	Did not meet target	Slippage
C	Grade HS	32.56%	79.81%	57.87	46.00	47.25	Did not meet target	No Slippage

Provide reasons for slippage for Group B, if applicable

CNMI did not meet its Group B gap target between All Students and Students with an IEP and reported slippage from the previous year's gap performance. As noted in 3B, CNMI did not meet Group B (8th grade) targets for FFY 2023 in both content areas and reported slippage from the previous year's performance. Because of the small "n" size, the difference in the number of students with an IEP scoring proficient or above changed by only one (decrease of one in Reading and an increase of one in Math), with more students receiving a valid score compared to the previous year. For all students in Group B, there was a similar decrease and increase in percentages from the previous year's performance: Reading decreased by 2.82% (57.06% in FFY 2022 and 54.24% in FFY 2023) and Math increased slightly by 0.62% (56.50% in FFY 2022 and 57.12% in FFY 2023).

The slippage in the gap performance from previous year could be attributed to the new reading and math curriculum implemented in school year 2022-2023 in support of the recovery loss efforts from the COVID-19 pandemic. School year 2023-2024 continued the training and support to teachers for implementation. For students with an IEP, this meant ensuring understanding of the new general curriculum by all teachers and how to provide appropriate accommodations for struggling learners to access the new curriculum. In addition, there continues to be a need for ongoing support to teachers in strengthening the specially designed instruction (SDI) for students with an IEP.

To address this program improvement priority, CNMI continued partnering with Guam CEDDERS and the OSEP-funded PROGRESS Center to support teachers and related service personnel on the development of high-quality IEPs for implementing high-quality educational programming for students with an IEP. This partnership was further strengthened with CNMI receiving an OSEP State Personnel Development Grant: Project Higai effective October 1, 2023 to continue CNMI's efforts to enhance its technology-based professional development system for teachers and families that will result in improved educational results for students with an IEP. Project Higai's partners include Guam CEDDERS, PROGRESS Center, National Association of State Directors of Special Education (NASDSE), and the local CNMI Parent Training and Information (PTI) program.

Provide additional information about this indicator (optional)

3D - Prior FFY Required Actions

None

3D - OSEP Response

3D - Required Actions

Indicator 4A: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Results Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

If the State has established a minimum n and/or cell size requirement, the State 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 2023 SPP/APR, use data from 2022-2023), 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 2022-2023 school year, those 100 LEAs would have reported section 618 data in 2022-2023 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2023-2024, suspension/expulsion data from those 15 new LEAs would not be in the 2022-2023 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 2022-2023 (which can be found in the FFY 2022 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.

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

4A - Indicator Data

Historical Data

Baseline Year	Baseline Data
2008	2.40%

FFY	2018	2019	2020	2021	2022
Target <=	0.00%	0.00%	0.00%	0.00%	0.00%
Data	0.00%	0.00%	0.00%	0.00%	0.00%

Targets

FFY	2023	2024	2025
Target <=	0.00%	0.00%	0.00%

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

FFY 2023 SPP/APR Data

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

NO

Number of LEAs that have a significant discrepancy	Number of LEAs in the State	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
0	1	0.00%	0.00%	0.00%	Met target	No Slippage

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

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

Significant Discrepancy Definition: In its FFY 2007 APR, CNMI submitted the revised significant discrepancy definition of "0% difference between the two groups" – students without disabilities and students with disabilities, which went into effect in FFY 2008. In December 2014, the stakeholders revised the definition of significant discrepancy to read a difference of more than 1% between the two groups.

Methodology: CNMI is a unitary system and therefore uses the comparison methodology between students without disabilities and students with disabilities to determine if there exists a significant discrepancy in the rates of suspensions and expulsions greater than 10 days in a school year.

Using one year data lag, the reported data used for FFY 2023 Indicator 4A was from 2022-2023 as follows:

-Students without disabilities = 0.17% (16/9235)

-Students with disabilities = 0.48% (5/1036) - consistent with the 618 discipline data submitted in February 2024

-Difference = 0.31%

Provide additional information about this indicator (optional)

Review of Policies, Procedures, and Practices (completed in FFY 2023 using 2022-2023 data)

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

The State 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 2022

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

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 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 2023 SPP/APR, use data from 2022-2023), 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 2022-2023 school year, those 100 LEAs would have reported section 618 data in 2022-2023 on the number of children suspended/expelled. If the State then opens 15 new LEAs in 2023-2024, suspension/expulsion data from those 15 new LEAs would not be in the 2022-2023 section 618 data set, and therefore, those 15 new LEAs should not be included in the denominator of the calculation. States must use the number of LEAs from the year before the reporting year in its calculation for this indicator. For the FFY 2022 SPP/APR submission, States must use the number of LEAs reported in 2022-2023 (which can be found in the FFY 2022 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.

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

YES

Provide an explanation of why it is not applicable below:

Per OSEP's instructions, Indicator 4B does not apply to CNMI.

4B - Prior FFY Required Actions

None

4B - OSEP Response

This indicator is not applicable to CNMI.

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	2018	2019	2020	2021	2022
A	2020	Target >=	85.00%	85.00%	88.54%	85.00%	85.00%
A	88.54%	Data	84.58%	87.31%	88.54%	88.79%	87.51%
B	2020	Target <=	4.00%	3.00%	1.67%	3.00%	3.00%
B	1.67%	Data	2.10%	1.49%	1.67%	1.40%	0.85%
C	2020	Target <=	0.70%	0.70%	0.11%	0.70%	0.70%
C	0.11%	Data	0.58%	0.23%	0.11%	0.11%	0.32%

Targets

FFY	2023	2024	2025
Target A >=	85.00%	85.00%	89.00%
Target B <=	3.00%	3.00%	1.00%
Target C <=	0.70%	0.70%	0.10%

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

Prepopulated Data

Source	Date	Description	Data
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	Total number of children with IEPs aged 5 (kindergarten) through 21	943
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	835
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	8
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	c1. Number of children with IEPs aged 5 (kindergarten) through 21 in separate schools	0
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	c2. Number of children with IEPs aged 5 (kindergarten) through 21 in residential facilities	0
SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/31/2024	c3. Number of children with IEPs aged 5 (kindergarten) through 21 in homebound/hospital placements	5

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

NO

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class 80% or more of the day	835	943	87.51%	85.00%	88.55%	Met target	No Slippage
B. Number of children with IEPs aged 5 (kindergarten) through 21 inside the regular class less than 40% of the day	8	943	0.85%	3.00%	0.85%	Met 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]	5	943	0.32%	0.70%	0.53%	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	2018	2019	2020	2021	2022
A	Target >=	86.00%	86.00%	43.04%	43.00%	43.00%
A	Data	78.70%	62.82%	43.04%	58.23%	67.03%
B	Target <=	0.00%	0.00%	0.00%	0.00%	0.00%
B	Data	0.00%	0.00%	0.00%	0.00%	0.00%
C	Target <=			56.96%	57.00%	57.00%
C	Data			56.96%	41.77%	32.97%

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not

demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

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	43.04%
B	2020	0.00%
C	2020	56.96%

Inclusive Targets – 6A, 6B

FFY	2023	2024	2025
Target A >=	45.00%	50.00%	55.00%
Target B <=	0.00%	0.00%	0.00%

Inclusive Targets – 6C

FFY	2023	2024	2025
Target C <=	55.00%	50.00%	45.00%

Prepopulated Data

Data Source:

SY 2023-24 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)

Date:

07/31/2024

Description	3	4	5	3 through 5 - Total
Total number of children with IEPs	13	41	32	86
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	7	29	23	59
b1. Number of children attending separate special education class	0	0	0	0
b2. Number of children attending separate school	0	0	0	0
b3. Number of children attending residential facility	0	0	0	0
c1. Number of children receiving special education and related services in the home	6	12	9	27

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 2023 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 2022 Data	FFY 2023 Target	FFY 2023 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	59	86	67.03%	45.00%	68.60%	Met target	No Slippage
B. Separate special education class, separate school, or residential facility	0	86	0.00%	0.00%	0.00%	Met target	No Slippage
C. Home	27	86	32.97%	55.00%	31.40%	Met target	No Slippage

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	2018	2019	2020	2021	2022
A1	2008	Target >=	96.50%	96.50%	93.00%	93.00%	93.00%
A1	96.00%	Data	89.47%	100.00%	93.75%	91.30%	94.12%

A2	2008	Target >=	57.00%	57.00%	33.00%	33.00%	33.00%
A2	37.00%	Data	39.13%	51.43%	33.33%	57.14%	43.48%
B1	2008	Target >=	100.00%	100.00%	97.00%	97.00%	97.00%
B1	100.00%	Data	91.30%	96.97%	97.37%	97.06%	95.56%
B2	2008	Target >=	31.00%	31.00%	15.00%	15.00%	15.00%
B2	22.00%	Data	13.04%	25.71%	15.38%	22.86%	23.91%
C1	2008	Target >=	96.50%	96.50%	96.00%	96.00%	96.00%
C1	96.20%	Data	89.74%	100.00%	96.43%	90.00%	87.50%
C2	2008	Target >=	72.50%	72.50%	43.00%	43.00%	45.00%
C2	44.40%	Data	36.96%	57.14%	43.59%	60.00%	43.48%

Targets

FFY	2023	2024	2025
Target A1 >=	93.00%	93.00%	96.50%
Target A2 >=	33.00%	33.00%	38.00%
Target B1 >=	97.00%	97.00%	100.00%
Target B2 >=	20.00%	25.00%	30.00%
Target C1 >=	96.00%	96.00%	97.00%
Target C2 >=	45.00%	46.00%	48.00%

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

FFY 2023 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

48

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	0	0.00%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	3	6.25%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	36	75.00%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	3	6.25%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	6	12.50%

Outcome A	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	39	42	94.12%	93.00%	92.86%	Did not meet target	Slippage
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	9	48	43.48%	33.00%	18.75%	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	0	0.00%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	0	0.00%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	43	89.58%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	3	6.25%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	2	4.17%

Outcome B	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	46	46	95.56%	97.00%	100.00%	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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	5	48	23.91%	20.00%	10.42%	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	0	0.00%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	0	0.00%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	37	77.08%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	3	6.25%

Outcome C Progress Category	Number of Children	Percentage of Children
e. Preschool children who maintained functioning at a level comparable to same-aged peers	8	16.67%

Outcome C	Numerator	Denominator	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation:</i> $(c+d)/(a+b+c+d)$	40	40	87.50%	96.00%	100.00%	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. <i>Calculation:</i> $(d+e)/(a+b+c+d+e)$	11	48	43.48%	45.00%	22.92%	Did not meet target	Slippage

Part	Reasons for slippage, if applicable
A1	<p>Of the 42 preschoolers with IEPs who entered the program below age expectation in positive social-emotional skills (including social relationship), 92.86% or 39 out of 42 substantially increased their rate of growth in positive social-emotional skills. CNMI did not meet its target of 93% by just 0.14% and showed slippage of just over 1% at 1.26% from the performance of 94.12% reported in FFY 2022.</p> <p>Stakeholders agreed to review drill down data of the 3 preschoolers that were in progress category “b” of who improved functioning but not sufficient to move nearer to functioning comparable to same aged peers. Stakeholders requested the Program to analyze the following data points of preschoolers in this category-- 1) age at entry; 2) length of early childhood special education (ECSE) services received; 3) if early intervention services were provided; 4) types of disabilities; 5) settings; 6) types of services; and 7) the number of services indicated in the IEPs.</p> <p>Age at Entry: Two out of the 3 preschoolers were 3 years of age when first enrolled to receive ECSE services and one was 4 years of age. There were no preschoolers that were 5 years of age at entry.</p> <p>Length of Services: One out of the 3 preschoolers had a range of 12 to 23 months, and two preschoolers had greater than 24 months of ECSE service.</p> <p>Early Intervention Services: Two out of 3 preschoolers received early intervention services, and one preschooler did not.</p> <p>Disability: Two out of 3 preschoolers had autism and one had developmental delays.</p> <p>Settings: One out of the 3 preschoolers received ECSE in the home and two were in Head Start classes.</p> <p>Types of Services: Two preschoolers with speech and language services identified in the IEP; one had occupational services and assistive technology.</p> <p>Number of Services: One out of 3 preschoolers had one service listed in their IEPs, one preschooler had two services listed; and one preschooler didn't have any related services.</p> <p>Reflections and Recommendations: Stakeholders noted the slippage was by 1.26% and the Program missed the target by .14% with an overall performance of 92.86% which was a high performance. Noting that there were only three preschoolers in progress category “b,” stakeholders praised the good work.</p>
A2	<p>Of the 48 preschoolers with IEPs exiting the program, 18.75% or 9 out of 48 preschoolers were functioning within age expectations in positive social-emotional skills, by the time they exited. This represented slippage in performance by 24.73% from FFY 2022 at 43.48%.</p> <p>Stakeholders agreed to review drill down data of the 36 preschoolers that were in progress category “c” of who improved functioning to a level nearer to same-aged peers but did not reach it. The stakeholders requested the Program to analyze the following data points of preschoolers in this category-- 1) age at entry; 2) length of early childhood special education (ECSE) services received; 3) if early</p>

Part	Reasons for slippage, if applicable
	<p>intervention services were provided; 4) types of disabilities; 5) settings; 6) types of services; and 7) the number of services indicated in the IEPs.</p> <p>Age at Entry: Twenty-five (25) out of the 36 preschoolers or 69.44% were 3 years of age when first enrolled to receive ECSE services and 11 or 30.55% were 4 years of age. There were no preschoolers that were 5 years of age at entry.</p> <p>Length of Services: Eight (8) out of the 36 preschoolers or 22.22% had 12 months or less of ECSE Services; 25% or 9 out of the 36 had a range of 13 to 24 months, and 19 out of the 36 or 52.78% had greater than 25 months of ECSE service.</p> <p>Early Intervention Services: Twenty (20) out of the 36 or 55.56% preschoolers received early intervention services and 16 or 44.44% preschoolers did not.</p> <p>Disability: Twenty-one (21) or 58.33% had autism; 14 or 38.89% had developmental delays, and one or 2.78% had intellectual disability.</p> <p>Settings: Eleven (11) out of the 36 or 30.56% received ECSE in the home, 20 or 55.56% in Head Start classes; and five or 13.87% in Child Care Centers.</p> <p>Types of Services: Thirty-six (36) or 100% had speech and language services identified in the IEP; 32 or 88.89% had occupational services; four or 11.11% had physical therapy services and assistive technology; and one preschooler or 2.78% had behavioral service.</p> <p>Number of Services: Four (4) preschoolers or 11.11% had one service listed in their IEPs, 26 or 72.22% of preschoolers had two services listed; five or 13.89% had three services; and one or 2.78% had four services listed in their IEP.</p> <p>Reflections and Recommendations: The analysis of the data points indicated that the majority of the 36 preschoolers in progress category "c" received ECSE services for greater than 25 months and were three years of age at the time of enrollment. Further, of the 36 preschoolers in progress category "c", 21 or 58.33% increased their exit rating by 1 point from their entry rating, twelve preschoolers or 33.33% increased by 2 points; two preschoolers or 5.56% increased by 3 points; and one or 2.78% had increased by 4 points in their exit ratings. Documenting that although 36 preschoolers were in the "c" progress category, each preschooler made progress in their positive social skills, as noted in their exit rating.</p> <p>To continue to support improved child progress, stakeholders recommended that training be provided for all Head Start, ECSE, and Child Care teachers that service preschoolers with disabilities on:</p> <ol style="list-style-type: none"> 1) the Early Childhood Outcome (ECO). The ECO training will include embedding the three outcomes into the IEP process. This would ensure progress monitoring of the preschooler's performance in the outcome measures at each IEP meeting. 2) the early childhood coaching model. The coaching training would provide the ECSE teachers with the skills set for implementing evidence-based practice that would support the parents, Head Start and/or child care teachers in implementing the IEP goals and objectives within the preschooler's daily routine.
B2	<p>Of the 48 preschoolers with IEPs exiting the program, 10.42% or 5 out of 48 preschoolers were functioning within age expectations in the acquisition and use of knowledge and skills, by the time they exited. This represents slippage by 13.49% from the FFY 2022 performance of 23.91%.</p> <p>Stakeholders agreed to review drill down data of the 43 preschoolers that were in category "c" of who improved functioning to a level nearer to same-aged peers but did not reach it. The stakeholders requested the Program to analyze the following data points of preschoolers in this category-- 1) age at entry; 2) length of early childhood special education (ECSE) services received; 3) if early intervention services were provided; 4) types of disabilities; 5) settings; 6) types of services; and 7) the number of services indicated in the IEPs.</p> <p>Age at Entry: Thirty-one (31) out of the 43 preschoolers or 72.09% were 3 years of age when first enrolled to receive ECSE services and 12 or 27.91% were 4 years of age. There were no preschoolers that were 5 years of age at entry.</p> <p>Length of Services: Seven (7) out of the 43 or 16.28% preschoolers had 11 months or less of ECSE Services; 25.58% or 11 out of the 43 had a range of 12 to 23 months, and 25 out of the 43 or 58.14% had greater than 24 months of ECSE service.</p> <p>Early Intervention Services: Twenty-six (26) out of the 43 or 60.47% of preschoolers received early intervention services and 17 or 39.53% preschoolers did not.</p> <p>Disability: Twenty-four (24) or 55.81% had autism; 18 or 41.86% had developmental delays, and one or 2.33% had an intellectual disability.</p> <p>Settings: Twelve (12) out of the 43 or 27.91% received ECSE services in the home, 24 or 55.81% in Head Start classes; and seven or 16.28% in Child Care Centers.</p> <p>Types of Services: Forty-two (42) or 97.67% had speech and language services identified in the IEP; 22 or 51.16% had occupational services; two or 4.65% had physical therapy services, five or 11.63% assistive technology; and one preschooler or 2.33% had behavioral services.</p>

Part	Reasons for slippage, if applicable
	<p>Number of Services: Seven (7) preschoolers or 16.28% had one service listed in their IEPs, 28 or 65.12% of preschoolers had two services listed; five or 11.63% had three services listed; and two or 4.65% had four services listed in their IEP. There was one preschooler with no related services listed in the IEP.</p> <p>Reflections and Recommendations: The analysis of the data points indicated that the majority of the 43 preschoolers in progress category "c" received ECSE services for greater than 24 months and were three years of age at the time of enrollment. Further, of the 43 preschoolers in progress category "c", 18 or 41.86% increased their exit rating by 1 point from their entry rating, 20 preschoolers or 46.51% increased by 2 points; and five or 11.63% of preschoolers increased by 3 points in their exit ratings. Documenting that although 43 preschoolers were in the "c" progress category, each preschooler made progress in the acquisition and use of knowledge, as noted in their exit rating.</p> <p>To continue to improve child progress, stakeholders recommended that training is provided for all Head Start, ECSE, and Child Care teachers that service preschoolers with disabilities on: 1) the Early Childhood Outcome (ECO). The ECO training will include embedding the three outcomes into the IEP process. This would ensure progress monitoring of the preschooler's performance in the outcome measures at each IEP meeting. 2) the early childhood coaching model. The coaching training would provide the ECSE teachers with the skills set for implementing evidence-based practice that would support the parents, Head Start and/or child care teachers in implementing the IEP goals and objectives within the preschooler's daily routine.</p>
C2	<p>Of the 48 preschoolers with IEPs exiting the program, 22.92% or 11 out of 48 preschoolers were functioning within age expectations in the use of appropriate behaviors to meet their need, by the time they exited. This represents slippage by 20.56% from the performance of 43.48% for FFY 2022.</p> <p>Stakeholders agreed to review drill down data of the 37 preschoolers that were in category "c" of who improved functioning to a level nearer to same-aged peers but did not reach it. The stakeholders requested the Program to analyze the following data points of preschoolers in this category-- 1) age at entry; 2) length of early childhood special education (ECSE) services received; 3) if early intervention services were provided; 4) types of disabilities; 5) settings; 6) types of services; and 7) the number of services indicated in the IEPs.</p> <p>Age at Entry: Twenty-seven (27) out of the 37 preschoolers or 72.97% were 3 years of age when first enrolled to receive ECSE services and 10 or 27.03% were 4 years of age. There were no preschoolers that were 5 years of age at entry.</p> <p>Length of Services: Five (5) out of the 37 or 13.51% preschoolers had 12 months or less of ECSE Services; 27.03% or 10 out of the 37 had a range of 13 to 24 months, and 22 out of the 37 or 59.46% had greater than 25 months of ECSE service.</p> <p>Early Intervention Services: Twenty-two (22) out of the 37 or 59.46% preschoolers received early intervention services and 15 or 40.54% preschoolers did not.</p> <p>Disability: Twenty-four (22) or 59.46% had autism; 13 or 35.14% had developmental delays, one preschooler had orthopedic impairments, and one preschooler had an intellectual disability.</p> <p>Settings: Twelve (12) out of the 37 or 32.43% received ECSE services in the home, 20 or 54.05% in Head Start classes; and five or 13.51% in Child Care Centers.</p> <p>Types of Services: Thirty-six (36) or 97.30% had speech and language services identified in the IEP; 35 or 94.59% had occupational services; four or 10.81% had physical therapy services, five or 13.51% assistive technology; and one preschooler had behavioral services, and one preschooler had teacher of students with visual impairment (TVI) services.</p> <p>Number of Services: Two (2) preschoolers or 5.41% had one service listed in their IEPs, 28 or 75.68% of preschoolers had two services listed; six or 16.22% had three services listed; and one preschooler had four services listed in their IEP.</p> <p>Reflections and Recommendations: The analysis of the data points indicated that the majority of the 37 preschoolers in progress category "c" received ECSE services for greater than 25 months and were three years of age at the time of enrollment. Further, of the 37 preschoolers in progress category "c", 11 or 29.73% increased their exit rating by 1 point from their entry rating, 23 preschoolers or 62.16% increased by 2 points; and three or 8.11% of preschoolers increased by 3 points in their exit ratings. Documenting that although 37 preschoolers were in the "c" progress category, each preschooler made progress in appropriate behavior to meeting their needs, as noted in their exit rating.</p> <p>To continue to improve child progress, stakeholders recommended that training is provided for all Head Start, ECSE, and Child Care teachers that service preschoolers with disabilities on: 1) the Early Childhood Outcome (ECO). The ECO training will include embedding the three outcomes into the IEP process. This would ensure progress monitoring of the preschooler's performance in the outcome measures at each IEP meeting. 2) the early childhood coaching model. The coaching training would provide the ECSE teachers with the skills set for implementing evidence-based practice that would support the parents, Head Start and/or child care teachers in implementing the IEP goals and objectives within the preschooler's daily routine.</p>

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

The Child Outcome Summary (COS) process consists of four key features of quality. These features include:

1. Using information from multiple sources. The process produces a description of the child's functioning at a single point in time by synthesizing multiple sources of information. Multiple source of information is used to determine the status of the COS. Most of the information needed is already collected as part of the development of the child's IEP and therefore, collecting child assessment information is currently part of the IEP development process and is not an added step. Multiple sources of information are used to make decisions regarding the child's performance related to the three child outcomes.

Data sources include:

- o The Hawaii Early Learning Profile
- o Other assessment results if appropriate
- o Parent and other caregiver information
- o Child observations
- o Early Childhood Special Education Service provider observations and input

2. Relying on team-based discussion and team decision making. This approach is a team process, involving professionals and family members contributing to decision-making. The COS process is designed to be a team consensus process where each individual member contributes information about the child's functioning across a variety of setting and situations. The members of the team participate collectively in a discussion to determine the child's rating. The child's family is an important member of the COS team. The family provides critical information about the child. The family may not be familiar with the COS process but they are experts on what their child is doing across settings and situations. The team shall include family members, professionals who work with the child, and others familiar with the child's functioning such as child care providers. Teams can range in size from two people to as many the parent and team feels is needed.

3. Using a 7-point rating scale to describe the child's function across settings and situations. The process involves team members using the information gathered about a child to rate his or her functioning in each of the three outcome areas on a 7-point scale. Using the 7-point rating scale requires the team to compare the child's skills and behaviors with those expected for his or her age. The purpose of the rating is to document current functioning. The COS process results in a rating for each of the three child outcomes. The rating is based on child's functioning across settings and situations. A child's functioning is compared with what is expected for a child at that age. The rating reflects the child's functioning at each of the time points and should be determined as close to the actual entry and exit as possible. The comparison of entry to exit ratings provides information about the child's progress. Ratings on all three outcomes must be reported for every child enrolled. Ratings are needed in all areas even if: 1) No one has concerns about a child's development, and 2) A child has delays in one or two outcome areas, but not in all three outcome areas. The ECO Decision Tree is a helpful tool for facilitating the rating process and guides the team through the process for each outcome.

4. Completing the COS forms upon program entry and exit. The COS process is completed at two points in time, at a minimum--when the child enters the program and when the child exits the program.

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 2023 SPP/APR, compare the FFY 2023 response rate to the FFY 2022 response rate) and describe strategies that will be implemented which are expected to increase the response rate, particularly for those groups that are underrepresented.

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

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

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

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

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

Historical Data

Baseline Year	Baseline Data
2005	78.00%

FFY	2018	2019	2020	2021	2022
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Target >=	90.00%	90.00%	90.00%	90.00%	90.00%
Data	93.53%		92.11%	92.78%	93.53%

Targets

FFY	2023	2024	2025
Target >=	90.00%	90.00%	90.00%

FFY 2023 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
613	673	93.53%	90.00%	91.08%	Met target	No Slippage

Since the State did not report preschool children separately, discuss the procedures used to combine data from school age and preschool surveys in a manner that is valid and reliable.

The surveys were disseminated to all parents of students with disabilities, including preschool children with disabilities. Dissemination of the survey to parents of preschoolers with disabilities was done via the Head Start Program, which is housed in the elementary schools, or through the Early Childhood Special Education (ECSE) teacher for those preschoolers with disabilities who receive special education and related services in home settings. The surveys included an introductory letter and a blank envelope to use when returning the completed surveys. Surveys disseminated via the Head Start Program and to parents of preschoolers with disabilities receiving services in the home were collected by the ECSE teachers. All collected surveys were submitted in sealed envelopes to the Special Education Central Office. The individual surveys were then sent to the University of Guam CEDDERS for analysis of the data.

For preschoolers with disabilities, 97 surveys were disseminated; of which, 77 completed surveys were returned, representing 79.38% (77/97) of parents of preschoolers with disabilities. For school-age students with disabilities, 912 surveys were disseminated, with 596 completed surveys returned for a 65.35% (596/912) response rate. Overall, CNMI reported a 66.70% (673/1009) response rate in FFY 2023, which represents an increase by 8.64% from last year's 58.06% (587/1011) response rate.

The number of parents to whom the surveys were distributed.

1,009

Percentage of respondent parents

66.70%

Response Rate

FFY	2022	2023
Response Rate	58.06%	66.70%

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

The metric used to determine representativeness of the FFY 2023 parent survey response was the +/-3% discrepancy calculation. The target group for the calculation was the CNMI 618 reported Child Count data for that school year. CNMI uses a census dissemination process that included all students with an IEP at the time the survey was disseminated to parents of preschoolers and school-age children with disabilities.

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.

To determine representativeness of the surveys collected, CNMI analyzed the ethnicity and geographic location demographics of the respondents compared to the same demographics of CNMI's 618 reported Child Count - children with an IEP.

The parent survey included ethnicity and geographic location items for parents to respond to. The ethnicity item asked parents to indicate their child's ethnicity by checking one of the listed OSEP ethnicity categories. The geographic location item on the survey asked parents to indicate their child's center (preschool) or school.

Based on the +/-3 discrepancy calculation, the respondent-identified ethnicities were not representative of the 618 reported CNMI Child Count. The range of difference was from -1.03% for the ethnicity category of "more than one race" to 3.25% for the ethnicity category of "Asian." Based on the respondent's selection of their ethnicity, the "Asian" category reported overrepresentation of respondents compared to the demographics of children with disabilities served.

The second demographic reviewed for representativeness was geographic location or the three island communities of the CNMI. Based on the +/-3

discrepancy calculation, two island communities indicated representativeness: Rota at 2.44% difference and Tinian at 1.69% difference. The largest island, Saipan, showed an underrepresentation of -4.13%. Although all islands, programs, and schools were represented in the respondent group, the discrepancy calculation showed Saipan was underrepresented, while Tinian and Rota were within the +/-3 discrepancy range.

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

NO

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

With the increase in response rate through the paper survey dissemination, CNMI will continue with the paper survey dissemination for completing the survey. Although underrepresented for the geographic location demographic, Saipan, the largest island community in the CNMI, showed an increase in respondents from FFY 2022 at 55.57% (509/916) to 63.57% (581/914) in FFY 2023. This increase for Saipan represented an additional 72 respondents in FFY 2023 through the paper survey dissemination process. In addition, all Saipan preschool programs and schools were represented in the response data.

CNMI will continue to work with the various parent groups, the Special Education State Advisory Panel (SESAP), and the PSS Parent Advisory Council (PAC) to support the dissemination efforts to promote increased responses from parents of children with disabilities, with a particular focus on the island of Saipan. In addition, the dissemination process will include awareness activities with parents about the survey items to ensure responses reflect accurate 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.

In FFY 2023, CNMI reported a 66.70% (673/1009) response rate, which represents an increase by 8.64% from last year's 58.06% (587/1011) response rate. This increase could be attributed to the dissemination method changing from an online survey with paper surveys available in FFY 2020, to paper surveys disseminated through the preschool programs and schools beginning FFY 2021 through FFY 2023.

To continue increasing the response rate, CNMI will continue to work closely with the PSS Parent Advisory Council (PAC) comprised of Parent Teacher Student Association (PTSA) presidents of elementary, middle, and high schools whose purpose is to present issues and concerns from their respective PTSA councils to the PSS Leadership, and for PSS Leadership to share information to the PAC for dissemination to PTSAs. Dissemination of information will include both in-person and virtual methods to ensure we are able to reach parents to encourage them to complete the survey, in particular on Saipan, the largest of the three CNMI island communities.

Describe the analysis of the response rate including any nonresponse bias that was identified, and the steps taken to reduce any identified bias and promote response from a broad cross section of parents of children with disabilities.

The analysis of the respondents indicated a cross section of parents who responded to the survey. All CNMI Child Count reported OSEP ethnicities were represented by the parents who responded to the survey. All islands, programs, and schools were represented, with the majority of surveys received from the island of Saipan, the largest of the three CNMI islands. Respondents by island dissemination represented 63.57% (581/914) from Saipan, 100% (49/49) from Rota, and 91.30% (42/46) from Tinian. One early childhood parent respondent did not complete the location item of the survey.

To determine the potential nonresponse bias, CNMI analyzed the location of respondents and process for dissemination at each level - preschool locations and schools. As described in the representativeness section, the demographics of ethnicity showed overrepresentation in the "Asian" ethnicity category and the island of Saipan location indicating underrepresentation. Further analysis of the Saipan respondents showed all schools and programs were represented in the response rate. In addition, the process for dissemination at each level and locations, inclusive of Saipan, was consistent with this year's paper survey dissemination, which included reminders to parents via email and calls by the preschool program and school personnel to encourage all parents to respond. Based on CNMI's analysis of the response rate, CNMI did not identify nonresponse bias in the FFY 2023 response rate.

As discussed in the Strategies section, CNMI will continue to work closely with the PSS Parent Advisory Council (PAC) comprised of Parent Teacher Student Association (PTSA) presidents of elementary, middle, and high schools whose purpose is to present issues and concerns from their respective PTSA councils to the PSS Leadership, and for PSS Leadership to share information to the PAC for dissemination to PTSAs. Dissemination of information will include both in-person and virtual methods to ensure we are able to reach parents to encourage them to complete the survey, with a particular focus on Saipan, the largest of the three CNMI island communities.

Sampling Question	Yes / No
Was sampling used?	NO

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	NO
If yes, provide a copy of the survey.	

Provide additional information about this indicator (optional)

8 - Prior FFY Required Actions

In the FFY 2023 SPP/APR, CNMI must report whether the FFY 2023 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions CNMI is taking to address this issue. CNMI 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 2022 SPP/APR

In the FFY 2023 Indicator 8 Indicator Data section, CNMI provided the required description and analysis for determining representativeness and actions taken to address the non-representativeness.

8 - OSEP Response

8 - Required Actions

In the FFY 2024 SPP/APR, CNMI 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 CNMI is taking to address this issue. CNMI 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 2023 reporting period (i.e., after June 30, 2024).

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

YES

Provide an explanation of why it is not applicable below.

Per OSEP instructions, Indicator 9 is not applicable to the CNMI.

9 - Prior FFY Required Actions

None

9 - OSEP Response

This indicator is not applicable to CNMI.

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 2023 reporting period (i.e., after June 30, 2024).

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

10 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

YES

Provide an explanation of why it is not applicable below

Per OSEP instructions, Indicator 10 not applicable to the CNMI.

10 - Prior FFY Required Actions

None

10 - OSEP Response

This indicator is not applicable to CNMI.

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	53.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	96.53%	94.16%	92.00%	85.71%	97.86%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
205	195	97.86%	100%	95.12%	Did not meet target	Slippage

Provide reasons for slippage

CNMI reported substantial compliance in FFY 2023 with a performance of 95.12% (195/205), but reported slippage by 2.74% from a FFY 2022 performance of 97.86% (229/234). This slippage represented a difference of five individual instances from five in FFY 2022 to 10 in FFY 2023. As noted in the reasons for the delays section of Indicator 11, the 10 individual instances were completed over timeline due to program delays, which included testing schedule conflicts, shortage of evaluators, and nonadherence to procedural requirements. These reasons were similar to the five in FFY 2022, but represented six schools in FFY 2023 compared to three schools in FFY 2022.

To address the increased number of schools that demonstrated individual instances of noncompliance with Indicator 11, the CNMI PSS Special Education Program has added the Special Education Director in the monthly emails regarding the timeline requirements sent to the school administrators and special education teachers. The monthly notices include the google sheets with color codes for pending initial evaluation due dates. Including the Special Education Director in the emails has prompted discussions during key management meetings and individual consultation between the Special Education Director and relevant school principal/s. In addition, PSS continues to contract external evaluators to support the administration of tests for initial evaluations.

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

10

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.

Range of days:

5 were completed over the 60-day timeline - Less than 30 days.

2 were completed over the 60-day timeline - 31-60 days.

3 were completed over the 60-day timeline - 61 days or above.

The reasons for the delay in completing the 10 initial evaluations not included in (b) were due to program delays.

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.

The data for this indicator is taken from the database of all children for whom a consent for initial evaluation was received for the report period of July 1, 2023 to June 30, 2024. The Data Manager logs the referral information into the database which generates the time requirements (60 days from receipt of the parent consent). The Data Manager sends out the referral information to the schools and providers responsible for the evaluation. Upon completion of evaluations, the reports are sent to the data manager to input into the database. The database is formatted to "flag" any date over the 60-day timeline. For all red flags, a Reason for Delay form is required. The Data Manager/Compliance Monitor, in consultation with the Special Education Director, designates a determination of valid or invalid reasons for delay, consistent with 34 CFR §300.301(d).

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2022

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
5	5	0	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

The FFY 2022 findings of noncompliance were verified as corrected through a review of updated data of actual initial evaluation documents from the two elementary schools and one high school issued the Written Notice of Findings for the five individual instances of noncompliance reported in the FFY 2022 Indicator 11 performance data of 97.86% (229/234). As described in the FFY 2022 for Indicator 11, the five individual instances of noncompliance were completed but over timeline. To verify correction, updated data of actual initial evaluation documents submitted to PSS Special Education Program for input into the special education database, the State data system, were reviewed for 100% compliance with the 60-day timeline requirement for the three schools issued the Written Notice of Findings for the five individual instances of noncompliance.

In FFY 2023, the review of actual initial evaluation documents from the three schools in the first quarter of the school year resulted in the determination that they have demonstrated verified timely correction of the initial evaluation regulatory requirement with the updated data demonstrating 100% compliance with the 60-day timeline requirement within the one-year timeframe for verified correction. These additional initial evaluations from the three schools demonstrating 100% compliance with the 60-day timeline requirement confirmed that they were correctly implementing the 60-day initial evaluation regulatory requirement, consistent with OSEP QA 23-01.

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

As documented in the FFY 2022 performance data for Indicator 11, the five initial evaluations from the three schools were completed but not in a timely manner. Although late, these five individual instances of noncompliance were verified to be completed through a review of actual initial evaluation documents submitted to PSS Special Education Program for input into the special education database, as reported in FFY 2022 for Indicator 11. In addition, through a review of updated data of actual initial evaluations in the first quarter of school year 2023-2024 submitted to the PSS Special Education Program for input into the special education database, the three schools demonstrated 100% compliance with the updated data of initial evaluations demonstrating 100% verified timely correction and received a Written Notice of Timely Correction, consistent with OSEP QA 23-01.

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

11 - Prior FFY Required Actions

Because CNMI reported less than 100% compliance for FFY 2022, CNMI must report on the status of correction of noncompliance identified in FFY 2022 for this indicator. When reporting on the correction of noncompliance, CNMI must report, in the FFY 2023 SPP/APR, that it has verified that the noncompliance identified in FFY 2022 for this indicator has been corrected, and that CNMI is: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP QA 23-01. In the FFY 2023 SPP/APR, CNMI must describe the specific actions that were taken to verify the correction.

If CNMI did not identify any findings of noncompliance in FFY 2022, although its FFY 2022 data reflect less than 100% compliance, provide an explanation of why CNMI did not identify any findings of noncompliance in FFY 2022.

Response to actions required in FFY 2022 SPP/APR

As described in the Correction of Noncompliance section of the Indicator 11 Indicator Data section, CNMI provided a description of the written findings of noncompliance issued in FFY 2022 and the correction of these findings of noncompliance in FFY 2023.

11 - OSEP Response

11 - Required Actions

Because CNMI reported less than 100% compliance for FFY 2023, CNMI must report on the status of correction of noncompliance identified in FFY 2023 for this indicator. When reporting on the correction of noncompliance, CNMI must report, in the FFY 2024 SPP/APR, that it has verified that, with regard to the noncompliance identified in FFY 2023 for this indicator, CNMI: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA and no outstanding corrective action exists under a State complaint or due process hearing decision for the child, consistent with OSEP QA 23-01. In the FFY 2024 SPP/APR, CNMI must describe the specific actions that were taken to verify the correction. If CNMI 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 CNMI did not identify any findings. If CNMI did not issue any findings because it has adopted procedures that permit CNMI to correct noncompliance prior to CNMI's issuance of a finding, the explanation must include how CNMI verified, prior to issuing a finding, that it 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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

12 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2005	96.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	44
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	11
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	29
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.	4
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	0
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 2022 Data	FFY 2023 Target	FFY 2023 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.	29	29	100.00%	100%	100.00%	Met 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

0

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.

Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

Data used to report in this indicator was taken from the database and verified in the child's IEP folder. The Early Intervention Program submits a monthly listing of Part C children who will be three (3) years old during the year and who are potentially eligible for Part B services. The Early Childhood Special Education (EC-SPED) team attends all Transition Conferences of children potentially eligible for Special Education. During the Transition Conference, the EC-SPED team plans and schedules with parents the potential dates to begin the Part B evaluation and IEP process. The EC-SPED team is responsible to ensure procedural safeguard requirements are followed (Prior Written Notice provided to the parent and parental consent to evaluate is obtained prior to the evaluation). If the child is determined eligible for special education, parental consent is obtained prior to the development and implementation of initial services and placement. The EC-SPED team submits the timeline data (date of Consent to Evaluate, date of Consent for Initial IEP, and IEP implementation date) to the data manager. The data manager logs the information into the database and verifies the dates with the documents. The database is formatted to "flag" untimely IEP's by third birthday. Allowable delays are parent refusal to consent to the initial evaluation or refusal to consent to the initial IEP.

Provide additional information about this indicator (optional)

Correction of Findings of Noncompliance Identified in FFY 2022

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

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 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 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

12 - Prior FFY Required Actions

None

12 - OSEP Response

12 - Required Actions

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 2023 SPP/APR, the data for FFY 2022), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Beginning with the FFY 2024 SPP/APR (due February 2, 2026), if the State did not issue any findings because it has adopted procedures that permit its LEAs to correct noncompliance prior to the State's issuance of a finding (i.e., pre-finding correction), the explanation within each applicable indicator must include how the State verified, prior to issuing a finding, that the LEA has corrected each individual case of child-specific noncompliance and is correctly implementing the specific regulatory requirements.

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	77.00%

FFY	2018	2019	2020	2021	2022
Target	100%	100%	100%	100%	100%
Data	100.00%	83.18%	100.00%	100.00%	100.00%

Targets

FFY	2023	2024	2025
Target	100%	100%	100%

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
205	205	100.00%	100%	100.00%	Met target	No Slippage

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.

The Data Manager uses the National Secondary Transition Technical Assistance Center (NSTTAC) checklist to review all IEP's of students 16 years old to verify that the required secondary transition components reflect students who are at least 16 years old and above and that there were no duplicate counts. The data is collected from each IEP and inputted on an excel sheet created by the Data Manager as a component of the State data base.

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 2022

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

Correction of Findings of Noncompliance Identified Prior to FFY 2022

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2022 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

13 - Prior FFY Required Actions

None

13 - OSEP Response

13 - Required Actions

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

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 2024 on students who left school during 2022-2023, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2022-2023 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 2023 SPP/APR, compare the FFY 2023 response rate to the FFY 2022 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	2018	2019	2020	2021	2022
A	2009	Target ≥	20.00%	20.00%	17.00%	17.00%	18.00%
A	10.00%	Data	16.13%	8.62%	17.02%	12.28%	17.86%
B	2009	Target ≥	63.00%	63.00%	40.00%	40.00%	45.00%
B	62.00%	Data	72.58%	56.90%	40.43%	56.14%	44.64%
C	2009	Target ≥	87.00%	87.00%	40.00%	45.00%	45.00%
C	86.00%	Data	75.81%	63.79%	40.43%	70.18%	60.71%

FFY 2021 Targets

FFY	2023	2024	2025
Target A ≥	18.00%	19.00%	20.00%
Target B ≥	50.00%	55.00%	62.10%
Target C ≥	60.00%	70.00%	86.10%

Targets: Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year’s performance and national data, where applicable to CNMI’s context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP’s instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not

demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

FFY 2023 SPP/APR Data

Total number of targeted youth in the sample or census	52
Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	40
Response Rate	76.92%
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	11
2. Number of respondent youth who competitively employed within one year of leaving high school	12
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)	3
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).	0

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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
A. Enrolled in higher education (1)	11	40	17.86%	18.00%	27.50%	Met target	No Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	23	40	44.64%	50.00%	57.50%	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)	26	40	60.71%	60.00%	65.00%	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	2022	2023
Response Rate	82.35%	76.92%

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

CNMI used the NPSO Response Calculator to determine representativeness. The NPSO Response Calculator calculates the response data by demographic categories and determines representativeness of the target group (all leavers). The NPSO Response Calculator utilizes a discrepancy measure of exceeding a +/- 3% difference in the proportion of responders compared to the target group.

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

CNMI's FFY 2023 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. CNMI used the NPSO Response Calculator to calculate the response data by demographic categories for the target group compared to the respondent group.

The NPSO Response Calculator identifies whether the discrepancy between the target group and respondent group exceeded +/-3%, in particular in the ethnicity, geographic location, exit, and disability categories. Exceeding a +/-3% difference between the two groups indicates over or under representation, which would mean that the response data are not representative of the target group.

The target group included the leavers/exiters from the 2022-2023 618 exit report: 50 graduates with a high school diploma (HSD) and two drop-outs. Of the 52 leavers, 40 graduates with a HSD responded to the survey. This represented a 76.92% response rate.

The differences by demographic categories included:

Ethnicity: The three ethnicities of the target group included: Other Pacific Islanders, Asian, and Two or More Races. The Two or More Races ethnicity was within the +/-3 discrepancy at -0.38% between the target group (leavers) and respondent group. The Asian ethnicity reported overrepresentation at 6.15% and underrepresented was Other Pacific Islanders at -5.77%.

Geographic location: This category reviewed the target and respondent groups from the three CNMI islands: Saipan, Rota, and Tinian. The difference was -3.46% for Saipan, 1.73% for Rota, and 1.73% for Tinian, which indicated that Saipan was underrepresented, while Rota and Tinian were representative.

Exit: The two exit categories of all leavers were Drop-out and Graduation with a HSD. The difference calculated was -3.85% for Drop-out representing underrepresentation and 3.85% for Graduates with a HSD for overrepresentation.

Disability: Disability categories represented in the target group included SLD, ID, OHI, AUT, HI, and MD. All disability categories were represented in the respondent group within the +/-3% discrepancy from a range of -2.88% for AUT to 2.12% for SLD.

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

NO

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

The CNMI PSS will continue to utilize the Post-School Outcome survey to collect and report data for this indicator. Each school year special education teachers notify students as well as parents or guardians that the student will be contacted for a post school interview one year from leaving high school to see if they have met their goals. During the school year, special education teachers ensure that contact information is updated and current prior to the student exiting, especially with those who drop-out.

Beginning Spring of each year, school teams contact the exiters or their families (possibly siblings, relatives, etc.) to conduct the post-school survey. Surveys are gathered and submitted to the Data and Compliance Program Manager for review to ensure all sections have been completed correctly and accounted for all exiters.

The CNMI PSS continues to collaborate with its community partner agencies through the Disability Network Partners as well as other PSS programs to promote, educate and share resources that will enable and expand career and technical education pathways for post-secondary opportunities.

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

CNMI reported a decrease in response rate by 5.43% from 82.35% (56/68) in FFY 2022 to 76.92% (40/52) in FFY 2023. The CNMI PSS will continue to utilize the Post-School Outcome survey to collect and report data for this indicator. Each school year special education teachers notify students as well as parents or guardians that the student will be contacted for a post school interview one year from leaving high school to see if they have met their goals. During the school year, special education teachers ensure that contact information is updated and current prior to the student exiting.

Beginning spring of each year, school teams contact the exiters or their families (possibly siblings, relatives, etc.) to conduct the post-school survey. Surveys are gathered and submitted to the Data and Compliance Program Manager for review to ensure all sections have been completed correctly and accounted for all exiters.

To increase CNMI's response rate, the CNMI PSS continues to collaborate with its community partner agencies through the Disability Network Partners (DNP), as well as other PSS programs, to promote, educate and share resources that will enable and expand career and technical education pathways for post-secondary. The DNP meets at least twice a year. These meetings emphasize the importance of gathering post-school outcomes data for improving programs and services across the network. The meetings include a review of post-school outcomes data, including collection methods, and how the network can support the consistent collection and reporting of post-school outcomes data to increase the response rate of all leavers, especially those leavers underrepresented, to ensure the data are representative of CNMI's community. The DNP can then better anticipate the needs for development and/or enhancement of post-school priorities and activities.

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.

In FFY 2023, CNMI's response rate of 76.92% (40/52) represented the broad cross section of youth who are no longer in secondary school and had IEPs in effect at the time they left school. The analysis of the response rate did not identify any nonresponse bias. The analysis included a review of the characteristics of the target group (all leavers) compared to the respondent group and the characteristics of the respondent group compared to the

nonrespondent group. Although the Ethnicity, Geographic Location, and Exit demographic categories were not representative, the Disability category was representative. Further, the demographic categories of Geographic Location and Exit showed less than -4/+4 difference between the target group and respondent group. The Geographic Location also showed that all high schools were represented in the respondent group. In addition, the dissemination of the surveys and follow-up indicated that the process was consistent for all leavers.

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

Provide additional information about this indicator (optional)

14 - Prior FFY Required Actions

In the FFY 2023 SPP/APR, CNMI must report whether the FFY 2023 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions CNMI is taking to address this issue. CNMI must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

Response to actions required in FFY 2022 SPP/APR

In the FFY 2023 Indicator 14 Indicator Data section, CNMI provided the required FFY 2023 data for determining representativeness of the respondent group compared to the target group (leavers). CNMI also discussed its analysis of the response data to determine representativeness.

14 - OSEP Response

14 - Required Actions

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

Indicator 15: Resolution Sessions

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the EDFacts Metadata and Process System (EMAPS)).

Measurement

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

Instructions

Sampling is not allowed.

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

States are not required to establish 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 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/13/2024	3.1 Number of resolution sessions	0
SY 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/13/2024	3.1(a) Number resolution sessions resolved through settlement agreements	0

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

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2018	2019	2020	2021	2022
Target >=					
Data					

Targets

FFY	2023	2024	2025
Target >=			

FFY 2023 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
0	0				N/A	N/A

Provide additional information about this indicator (optional)

CNMI is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

15 - Prior FFY Required Actions

None

15 - OSEP Response

CNMI reported fewer than ten resolution sessions held in FFY 2023. CNMI is not required to provide targets until any fiscal year in which ten or more resolution sessions were held.

15 - Required Actions

Indicator 16: Mediation

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Data Source

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the ED^{Facts} Metadata and Process System (EMAPS)).

Measurement

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

Instructions

Sampling is not allowed.

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

States are not required to establish 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 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/13/2024	2.1 Mediations held	0
SY 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/13/2024	2.1.a.i Mediations agreements related to due process complaints	0
SY 2023-24 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/13/2024	2.1.b.i Mediations agreements not related to due process complaints	0

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

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

Historical Data

Baseline Year	Baseline Data
2005	

FFY	2018	2019	2020	2021	2022
Target >=					
Data					

Targets

FFY	2023	2024	2025
Target >=			

FFY 2023 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 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
0	0	0				N/A	N/A

Provide additional information about this indicator (optional)

CNMI is not required to provide targets until any fiscal year in which ten or more mediations were held.

16 - Prior FFY Required Actions

None

16 - OSEP Response

CNMI reported fewer than ten mediations held in FFY 2023. CNMI is not required to provide targets until any fiscal year in which ten or more mediations were held.

16 - Required Actions

Indicator 17: State Systemic Improvement Plan

Instructions and Measurement

Monitoring Priority: General Supervision

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

Measurement

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

Instructions

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

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

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

Overview of the Three Phases of the SSIP

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

Phase I: Analysis:

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

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

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

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

- Results of Ongoing Evaluation and Revisions to the SSIP.

Specific Content of Each Phase of the SSIP

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

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

Phase III: Implementation and Evaluation

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

A. Data Analysis

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

B. Phase III Implementation, Analysis and Evaluation

The State must provide a narrative or graphic representation, (e.g., a logic model) of the principal activities, measures and outcomes that were implemented since the State's last SSIP submission (i.e., February 1, 2024). 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 2023 APR, report on anticipated outcomes to be obtained during FFY 2024, i.e., July 1, 2024-June 30, 2025).

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 2023 APR, report on activities it intends to implement in FFY 2024, i.e., July 1, 2024-June 30, 2025) 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)?

By June 30, 2026, at least 39% of 3rd grade students with an IEP in the elementary schools will perform at or above reading proficiency against grade level and alternate academic achievement.

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

NO

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

YES

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

The CNMI is using 3rd graders for the SiMR based on risk factors associated if a student is not reading by 3rd grade.

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.cnmiappss.org/sites/default/files/cnmi_b_toa_2022_508_compliant_0.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	26.92%

Targets

FFY	Current Relationship	2023	2024	2025
Target	Data must be greater than or equal to the target	33.00%	36.00%	39.00%

FFY 2023 SPP/APR Data

# of 3rd graders with an IEP in the Three Target Schools who scored At or Above proficient in Reading	# of 3rd Graders with an IEP in the Three Target Schools with Valid Scores in Reading	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
5	24	18.18%	33.00%	20.83%	Did not meet target	No Slippage

Provide the data source for the FFY 2023 data.

For SY23-24, the CNMI Public School System (PSS) Renaissance STAR Reading (k-3) assessment proficiency data from the end of the year outcomes and the multi-state alternate assessment based on alternate achievement standards served as the data source.

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

The data is collected by school and disaggregated by subgroups and then summarized for the three target schools. The data for the SiMR are analyzed for the proficiency rate by identifying the percentage of 3rd grade students with an IEP performing at or above the benchmark standard score for the 3rd grade as measured by the Renaissance STAR Reading and determined proficient as measured by the alternate assessment based on alternate achievement standards (AA-AAS). The data collected included the 3rd grade IEP students with valid scores in the three SSIP target schools. The numerator of "5" represented those 3rd grade IEP students with a valid score in the three SSIP target schools who scored at the proficient level in reading as measured by the Renaissance STAR Reading and AA-AAS. The denominator of "24" represented the total number of 3rd grade IEP students with a valid score in the three target schools.

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

NO

Did the State identify any general data quality concerns, unrelated to COVID-19, 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.cnmpss.org/sites/default/files/cnmissipevaluationplanworksheet_508_compliant_0.pdf

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

NO

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

STRAND: Governance and Leadership

A. Strategy: Universal Screening

The PSS continues to implement the universal screening and the use of the results as secondary data. The outcomes for this strategy were measured by conducting three screenings and a fidelity checklist. For SY23-24, the PSS continues to use the Renaissance STAR Early Literacy and STAR Reading as the source for the outcome data at the end of the school year by using Screening #3 data. The implementation of the universal screening has scaled-up to the remaining 6 elementary schools.

B. Strategy: Implementation of the Early Literacy and Reading Curriculum

During the SY22-23, the PSS implemented a new early literacy/reading curriculum. For this reporting period, the PSS continues to implement the new curriculum with fidelity as a result of on-going job-embedded training.

C. Strategy: Early Warning Systems (EWS) for Grades Kinder through 3rd

This strategy addresses the identification of students exhibiting academic and behavior-at-risk performance who are in need of supplemental interventions to improve academic performance.

D. Strategy: High Dosage Tutoring

High Dosage Tutoring continued to be provided during the 2nd semester of the SY23-24. However, this strategy was discontinued for the SY24-25.

E. Strategy: Establishment of a Family Engagement and Community Involvement Program

The goal of this strategy is to increase the performance of students in the PSS through better engagement of families and the community in the education of students in the CNMI Public school through the provision of professional learning opportunities.

Strand: Professional Development

A. Strategy: Early Warning Systems (EWS) for Grades K-3

For this strategy, professional development focuses on the full implementation of the EWS. This includes but not limited to the identification of students at-risk for failure and the interventions to address the needs of struggling learners.

B. Strategy: EL Program/EL Teachers

To support the English Learners and their teachers, coaches were reassigned to this program at the start of the SY23-24.

C. Strategy: Implementation of "Into Reading" (new early literacy/reading curriculum)

Professional development focuses on the full implementation of the new curriculum with fidelity to improve reading outcomes.

D. State Special Education Personnel Development Grant (SPDG)

The CNMI PSS obtained a special education personnel development grant to support the following long term outcomes: (1) sustained system of co-creating changes and additions to the PSS system of PD to develop agency in practitioners and stakeholders in the engagement of PD through the use of technology and ISP; (2) Evidence-based PD system for implementing high-quality educational programming through high-quality IEPs; (3) Improved educational results for children with disabilities.

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.

Governance and Leadership

A. Universal Screening (Results reflect only data from the three target schools). The includes the participation and proficiency data for all students and disaggregated for students with an IEP in grades K-3rd grade. For this reporting period, SY23-24 screening #3 was used as the outcome data. The SY23-24 Win'23 and Fall'24 data are also included for this reporting period.

Participation (K-3rd)

Screening Period	ALL Students	Students with IEP
SY23-24 Screening #2 (Winter'24)	98% (936/957)	90% (75/83)
SY23-24 Screening #3 (Outcome-SPR'24).	99% (909/919)	93% (79/85)
SY24-25 Screening #1 (Fall'24)	99% (976/985)	95% (88/93)

*The # of students screened includes K-3rd grade students that were screened with STAR Early Literacy, STAR Reading, or alternate screening assessment.

Performance (K-3rd)

Screening Period	ALL Students	Students with IEP
SY23-24 Screening #2 (Winter'24)	51% (479/936)	12% (9/75)
SY23-24 Screening #3 (Outcome-SPR'24)	61% (553/909)	9% (7/79)
SY24-25 Screening #1 (Fall'24)	55% (537/976)	6% (5/88)

The # of students screened includes K-3rd grade students that were screened with STAR Early Literacy, STAR Reading, or alternate screening assessment in the SSIP target schools.

STAR Early Literacy/Reading Fidelity Data

of observations = 30; 70% of observations conducted by vice principal & 30% conducted by principal; breakdown by grade level: K=23.3%, 1st=26.7%, 2nd=23.3%, and 3rd=26.7%; It was "clearly evident" that the teachers met the requirement:

B. Implementation of the Early Literacy/Reading Curriculum

High-Quality Usage Fidelity Data (The high-quality instructional materials usage is measured by the number of assignments completed per grade level from February 2024 to December 2024.)

Target Schools: Kinder=3,340; 1st=6,306; 2nd=19,008; 3rd=11,243.

All Schools (Target & Scale-up Schools (6)): Kinder:5,984; 1st=39,370; 2nd=41,283; 3rd=15,987.

of English Learner students served:

SY23-24: 1351 SY24-25: 1324

C. Early Warning Systems (EWS) for Grades Kinder through 3rd

1. As of January '25, there are 446 active interventions, 1 new intervention, and 57 closed interventions.

2. SY #of Ss w/0-1 Risk Indicators (L) #of Ss w/3-4 Risk Indicators (M) # of Ss w/5 or More Indicators (H)

23-24	1,858	313	39
24-25	2,083	110	0

D. High Dosage Tutoring (HDT)

HDT was provided to 9 elementary schools & the total # of students from K-12 was 1,292.

Percent of students who are proficient and advanced in Early Literacy/Reading: SY23-24: Goal = 55%

Grade Level	Screening #1	Screening #2	Screening #3 (Outcome)
Kinder (EL)	12%	50%	69%
1st (EL)	18%	25%	37%
2nd (Reading)	17%	30%	49%
3rd (Reading)	16%	26%	39%

Survey on Quality of the HDT:

of teachers surveyed: 46; Percent & # Rating the overall quality of the HDT program as "Excellent"= 44% (20/46); Percent & rating of the usefulness the tutor in meeting the students' needs to mastery of the academic standards as "Excellent" = 39% (18/46); Note: The respondents include some secondary teachers based on the report. HDT was discontinued in June 2024 due to lack of funding.

E. Family Engagement & Community Involvement

Evaluation Results of State Level Parent Summit held on September 28, 2024 (level of agreement with statement-Strongly Agree=SA, Agree=A, Neutral=N, Disagree=D, and Strongly Disagree=SD) - # of Responses=52): Appropriateness of Content-SA=90% (47), A=7.7% (4), N=1.92% (1); Usefulness of Ideas & Content - SA=85% (44), A=13% (7), N=1.92% (1); Impact on Parent Partnership with Public School System (PSS)-SA=85% (45), A=13% (7), N=1.92% (1); Summit Met Expectations-SA=81% (42), A=19% (1); Feelings of Overall Quality of Workshop-SA=85% (44), A=15% (8); Structure of Workshop-SA=85% (44), A=11% (6), N=4% (2);

Other activities to Engage Families & the Community:

Transition of Family & Community Engagement activities facilitation from central office to schools; establishment of on-going live data tracking system for tracking all district & school-based activities; Parent Advisory Council Quarterly Meetings, school-based parent summit, HMS Parent Literacy, and Talent & Family Movie night that included participation of parents of children with a disability.

School-based Family Engagement & Community Involvement: From 2/1/2024-6/1/24, activities were conducted by 10 K-12 schools & involved 315 parents.

F. Professional Learning Community (PLC)

Total Observations: 37 (6/9 elem schools); 73% conducted by principals & 29.7% by Vice Principals; Grade Levels: Kinder=24.3%; 1st: 24.3%; 2nd:21.6%; & 3rd: 18.9%; Participants: General education teacher: 100%; Special education teacher: 54.1%; EL Teacher: 54.1%; Title 1 Teacher; 73%; Admin: 21.6%; Counselor: 29.7%; Parent: 8.1%; Content: Agenda: 100%; ; Discussion of at-risk students such as EL and students with disabilities: 97.3% (Yes); Level of Engagement: 81.1% Most-All; 18.9% Many; Discussion of STAR EL/Reading to guide instructional planning: 81.1% (Yes); Discussion of other sources of data to inform instruction: 100%;

Professional Development

The following training/PDs were conducted during this reporting period related to the reading curriculum.

Science of Reading Training within HMH Into Reading; HMH Into Reading Coaching and Model Training -training of trainer course in Science of Reading; HMH Into Reading Coaching and Model Training; Science of Reading and Science of Numeracy Course Development; Classroom Instruction that Works PD-180 Elementary, Middle, and High school teachers incorporate strategies to increase student motivation and engagement such as pairing and sharing, jigsaw, and other collaborative student learning strategies; High Quality Instructional Materials Mentoring and Training for all teachers-HQIM provider conduct coaching, training, and classroom observations to all the teachers who are using the HQIM Reading and Math throughout the SY 2024-2025.

The following trainings/PD were conducted to support the English Learner program:

Renaissance Assessment training and data dialogue; WIDA Writing with Multilingual Learners; Science of Reading and Science of Numeracy online

summer training; Science of Reading and Science of Numeracy online summer training; K-12 Summit - Assessment for EL students. Accountability/Monitoring System

All target schools included subgroups for SY23-24 and SY24-25; For SY23-24 and SY24-25, one of the six scale-up schools, included subgroups and 1/6 for SY24-25; SY23-24: 100% of elementary schools met the STAR Early Literacy proficiency goal while 33% met the goal for STAR Reading based on the outcome screener administered in SPR '24. For 24-25, 33% (3/9) met STAR Early Literacy for Screener 1 (Fall 24) and only one non-target school met STAR Reading target for Screener 1 (Fall 24).

Did the State implement any new (newly identified) infrastructure improvement strategies during the reporting period? (yes/no)

YES

Describe each new (newly identified) infrastructure improvement strategy and the short-term or intermediate outcomes achieved.

Strategy: Implementation of "Into Reading" (new early literacy/reading curriculum)

For this reporting period, the PSS implemented a new Early Literacy and Reading curriculum, Into Reading, with the core instruction focusing on the foundations of reading. The new curriculum was selected based on its ability to address both virtual and face-to-face platforms.

Strategy: State Personnel Development Grant (SPDG): Project Higai

The CNMI PSS obtained a special education personnel development grant to support the following long term outcomes: (1) sustained system of co-creating changes and additions to the PSS system of PD to develop agency in practitioners and stakeholders in the engagement of PD through the use of technology and ISP. (2) Evidence-based PD system for implementing high-quality educational programming through high-quality IEPs. (c) Improved educational results for children with disabilities.

Provide a summary of the next steps for each infrastructure improvement strategy and the anticipated outcomes to be attained during the next reporting period.

Governance and Leadership:

Universal Screening:

Continue the Benchmark Screenings 3x/year and provide professional development to the scale-up schools to build proficiency in data collection and analysis; Collect participation and performance data for all elementary schools for FFY24.

Early Literacy and Reading Curriculum – "Into Reading" (HMH)

Develop the onboarding framework for the HQIM for new teachers.

Early Warning System (EWS)

Complete the development of the Standard Operating Procedures (SOPs) for implementing a Multi-tiered Systems of Supports (MTSS)

Family Engagement & Community Involvement

Schools will create their own school-based parent training based on data from the central office. Targeted school activities related to disability awareness. Parent Training & Information (PTI) will conduct Parent Summit with Department of Youth Affairs (DYS);

Professional Learning Communities (PLCs)

The next step is to increase the documentation & reporting of PLC meetings that include the planning, discussion, and analysis of data for all students and subgroups such as EL and students with a disability.

Professional Development

Provide the Read180 and Writeable 180 training for all teachers; Develop the onboarding framework for the HQIM for the new teachers; Collaborate with early Head Start and Head Start on Parent Literacy Summit in March; Plan and deliver the Summer Science of Reading and Science of Math training.; Plan and deliver the MTSS training for ELL teachers; Teacher-level session for PLC (Summit K-12) - for EL teachers; Leadership (school admin) Sessions and follow-up for EL teacher sessions (K-12); School-based literacy on-going trainings

Accountability/Monitoring System

Develop an accountability framework to allow ARE to measure performance and to be able to disaggregate data by subgroups such as students receiving Title 1, special education, and English Learners and flag students within a subgroup to be able to address their needs.

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

1. Universal Screening: Renaissance STAR Reading
2. Early Literacy and Reading Curriculum – "Into Reading" (HMH)
3. Early Warning System (EWS) for K-3
4. Professional Learning Communities (PLC)
5. Data-based decision making – Data Dialogue
6. Classroom observations -monitoring the fidelity in implementation of evidence-based instructional programs

Provide a summary of each evidence-based practice.

1. The universal screening: is conducted three times during the school year. The Fall and Spring are considered benchmark data with the final (3rd screening) considered as outcome or end of year summative data.
2. Early Literacy and Reading Curriculum – A new reading curriculum, Into Reading (HMH), was implemented in all elementary schools – reading instruction provided for 90 minutes.
3. Early Warning System (EWS) for K-3: The attendance and performance of all K-3 students are monitored on an on-going basis. Updated the Early Warning System (EWS) platform to integrate critical data—such as attendance, grades, assessments, and behavior—into a centralized platform, making it easier to identify trends, personalize interventions, and support every student's success.
4. High Dosage Tutoring: High-Dosage Tutoring is provided during the school day and as part of the after school programs for 40-60 minutes in groups of a maximum of three students.
5. Professional Learning Communities (PLC) – Each grade level meets as a PLC team to address data and needs of every student to include needs of subgroups such as students with an IEP and English Learners (ELs).
6. School Wide Plans (SWPs) Data-based decision making: Each school is required to submit a School Wide Plan (SWP) each year that addresses the needs of the students in the school. The SWP must include activities and outcomes for subgroups such as students with an IEP and ELLs.

7. Monitoring the fidelity of reading curriculum and delivery of evidence-based instruction: Classroom observations with a duration of at least 30 minutes are conducted at least annually.

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.

1. Universal Screening: The Fall and Spring screening benchmarks identifies students at risk for not meeting end of year outcomes and provides data that assist school personnel in providing supplemental interventions to meet the students' needs. This practice is implemented in all elementary schools.

2. Early Literacy and Reading Curriculum: The implementation of an evidence-based early literacy and reading curriculum increases the probability of achieving the SiMR. For this report period, the PSS implemented the HMM into Reading early literacy and reading curriculum.

3. Early Warning System (EWS): The implementation of the EWS for grades K-3 is the overarching strategy that ensures that the needs of students are identified early enough to provide interventions and support. This is in line with implementing universal screening.

4. High Dosage Tutoring: The supplemental instruction provided by the provision of High Dosage Tutoring closes the gap between where the students are performing and where they should be.

5. Professional Development that is ongoing and job-embedded in the areas related to literacy and the use of data will improve delivery of literacy instruction and improve student outcomes.

6. Professional Learning Communities allows horizontal alignment of instruction and opportunity for modeling effective practices that will increase student outcomes.

7. School Wide Plans (SWPs) that include outcomes for disaggregated groups will ensure that schools are held accountable for all students and promote data-based decision making.

8. Monitoring the implementation of the reading curriculum with a focus on the foundations of reading through fidelity checks will provide data that will be used to support the need for additional support and training.

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

Governance/Leadership

a. Universal Screening

-Screenings are conducted three times a year. Fidelity checks are conducted during each screening period.

b. Implementation of Early Literacy and Reading Curriculum

- Data is collected at least once a year.

c. Early Warning System (EWS)

-The impact of the implementation of the EWS will be measured by the number of students identified as needing supplemental support and the effectiveness of the interventions to improve instruction.

2. Professional Development

-All professional development activities are initially evaluated with a "Reaction Survey" at the end of each activity and observations to collect data on change in practices.

3. Collaborative Efforts

Professional Learning Community

-Data on participation and data discussion of Professional Learning Communities (PLCs) are collected monthly.

Family Supports/Family Partnerships

-Data will be collected on participation of families in activities to improve student achievement as well as reaction surveys.

-Collect parent demographics data of parents that attend parent summits, trainings, meetings.

4. Accountability System

-School Wide Plans (SWPs) are reviewed annually and if approved, activities are funded for implementation. SWPs are evaluated to determine if the plan addresses the academic needs of subgroups such as students with an IEP. With this requirement, the schools are held accountable for all students.

5. Monitoring System

-The Office of Curriculum & Instruction And school level administrators continue to monitor the fidelity of implementing the "Into Reading" curriculum.

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.

None

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

1. Universal Screening: Renaissance STAR Reading

- Continue to collect fidelity data from all target and scale up schools

- Continue to provide professional development for teachers

2. Early Literacy and Reading Curriculum – "Into Reading" (HMM)

- Continue to collect the fidelity data from target and scale up schools

- Continue to provide professional development for teachers

3. Early Warning System (EWS) for K-3

- Finalize the development of the MTSS SOP to align with EWS

- Continue to track the interventions being provided to students identified through EWS
- Continue to provide MTSS and EWS Training

4. High-dosage Tutoring - Funded project period ended SY 23-24

5. Professional Learning Communities (PLC)

- Continue to collect PLC data on the participation of general education, special education, Title I, and EL Teachers in PLC sessions

6. Data-based decision making – The Office of Accountability, Research and Evaluation will continue to conduct school level Data Dialogue

7. Classroom observations - Continue to monitor the fidelity of evidenced-based instructional programs in the target and scale up schools

- Collect fidelity data on the implementation of the reading curriculum data from target and scale up schools.
- Continue to provide professional development for teachers in Instructional coaching as part of the learning designed based on HQIM.

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.

For SY 24-25, PSS will continue to implement, monitor and improve the infrastructure activities to determine the effectiveness of the strategies and processes in place.

Section C: Stakeholder Engagement

Description of Stakeholder Input

With technical assistance provided by the Guam CEDDERS, the PSS Special Education Program facilitated a process for ensuring broad stakeholder input and involvement in the review and development of the CNMI PART B FFY 2020-FFY 2025 State Performance Plan (SPP) and FFY 2023 Annual Performance Report (APR). Broad stakeholders, inclusive of the Special Education State Advisory Panel, school administrators, special education teachers, and the State Systemic Improvement Plan (SSIP) Core Team reviewed current performance data compared to previous year's performance and national data, where applicable to CNMI's context. In addition, the FFY 2020-2025 SPP and FFY 2023 APR were provided to the newly elected board members for review and input.

This FFY 2023 APR includes current performance data for 16 of the 18 Indicator measures: Indicators 1, 2, 3, 4, 5, 6, 7, 8, 11, 12, 13, 14, 15, 16, 17 and 18. Per OSEP's instructions, SPP Indicators 4B, 9 and 10 do not apply to the CNMI. For each applicable SPP Indicator measure, CNMI reports FFY 2023 progress data to determine if CNMI met its FFY 2023 targets. An explanation of slippage is provided if CNMI did not meet its target and did not demonstrate improvement from the previous year's performance. A response to any issue identified in the 2024 OSEP SPP/APR Determination letter for CNMI's FFY 2022 SPP/APR is also provided within the related indicators.

- Conducted various SSIP Core Meetings with pilot and scale up school representatives to gather updates on all the infrastructure activities

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

- Conducted school level parent engagement sessions as well as Annual Parent Summit
- Gathered data input from special education teachers
- Provided ongoing input sessions from parents, advisory panel members and key management
- Conducted various information and training sessions for parents of young children with IEPs within PSS and through our agency partners

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.

None

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

None

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

The Commissioner of Education announced the rotation of school principals for SY2025-26 and district senior directors. The principal rotation includes the elementary school principals, with a few of them moving out of elementary schools and into middle and high schools. The elementary school principals affected have agreed to train and/or shadow those principals who are part of the SSIP pilot and scale-up schools. As for the senior directors, they will continue to support each other and the SSIP.

Provide additional information about this indicator (optional).

17 - Prior FFY Required Actions

None

17 - OSEP Response

17 - Required Actions

Indicator 18: General Supervision

Instructions and Measurement

Monitoring Priority: General Supervision

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

Data Source

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

Measurement

This SPP/APR indicator requires the reporting on the percent of findings of noncompliance corrected within one year of identification:

- # of findings of noncompliance issued the prior Federal fiscal year (FFY) (e.g., for the FFY 2023 submission, use FFY 2022, July 1, 2022 – June 30, 2023)
- # 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

States are required to complete the General Supervision Data Table within the online reporting tool.

Instructions

Baseline Data: The State must provide baseline data expressed as a percentage. OSEP assumes that the State's FFY 2023 data for this indicator is the State's baseline data unless the State provides an explanation for using other baseline data.

Targets must be 100%.

Report in Column A the total number of findings of noncompliance made in FFY 2022 (July 1, 2022 – June 30, 2023) and report in Column B 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.

Starting with the FFY 2023 SPP/APR, States will be required to report on the correction of noncompliance related to compliance indicators 4B, 9, 10, 11, 12, and 13 based on findings issued in FFY 2022. Under each compliance indicator, States report on the correction of noncompliance for that specific indicator. However, in this general supervision Indicator 18, States report on both those findings as well as any additional findings that the State issued related to that compliance indicator.

In the last row of this General Supervision Data Table, 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.

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.

18 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2023	100.00%

Targets

FFY	2023	2024	2025
Target	100%	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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 4B due to various factors (e.g., additional findings related to other IDEA requirements).

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

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

Indicator 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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 9 due to various factors (e.g., additional findings related to other IDEA requirements).

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

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

Indicator 10. Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. (20 U.S.C. 1416(a)(3)(C))

Findings of Noncompliance Identified in FFY 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 10 due to various factors (e.g., additional findings related to other IDEA requirements).

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

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

Indicator 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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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
5	0	5	0	0

Please explain any differences in the number of findings reported in this data table and the number of findings reported in Indicator 11 due to various factors (e.g., additional findings related to other IDEA requirements).

There were no other written findings of noncompliance identified in FFY 2022. The five written findings of noncompliance identified were related to Indicator 11 60-day timeline requirement.

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

As reported in the FFY 2023 Indicator 11 Indicator Data section, the FFY 2022 findings of noncompliance were verified as corrected through a review of updated data of actual initial evaluation documents from the two elementary schools and one high school issued the Written Notice of Findings for the five individual instances of noncompliance reported in the FFY 2022 Indicator 11 performance data of 97.86% (229/234). As described in the FFY 2022 for Indicator 11, the five individual instances of noncompliance were completed but over timeline. To verify correction, updated data of actual initial evaluation documents submitted to PSS Special Education Program for input into the special education database, the State data system, were reviewed for 100% compliance with the 60-day timeline requirement for the three schools issued the Written Notice of Findings for the five individual instances of noncompliance.

In FFY 2023, the review of actual initial evaluation documents from the three schools in the first quarter of the school year resulted in the determination that they have demonstrated verified timely correction of the initial evaluation regulatory requirement with the updated data demonstrating 100% compliance with the 60-day timeline requirement within the one-year timeframe for verified correction. These additional initial evaluations from the three schools demonstrating 100% compliance with the 60-day timeline requirement confirmed that they were correctly implementing the 60-day initial evaluation regulatory requirement, consistent with OSEP QA 23-01.

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

As documented in the FFY 2022 performance data for Indicator 11, the five initial evaluations from the three schools were completed but not in a timely manner. Although late, these five individual instances of noncompliance were verified to be completed through a review of actual initial evaluation documents submitted to PSS Special Education Program for input into the special education database, as reported in FFY 2022 for Indicator 11. In addition, through a review of updated data of actual initial evaluations in the first quarter of the 2023-2024 school year submitted to the PSS Special Education Program for input into the special education database, the three schools demonstrated 100% compliance with the updated data of initial evaluations demonstrating 100% verified timely correction and received a Written Notice of Timely Correction, consistent 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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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 any differences in the number of findings reported in this data table and the number of findings reported in Indicator 12 due to various factors (e.g., additional findings related to other IDEA requirements).

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

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

Indicator 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 2022

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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 any differences in the number of findings reported in this data table and the number of findings reported in Indicator 13 due to various factors (e.g., additional findings related to other IDEA requirements).

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

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

Optional for FFY 2023, 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 2022 (7/1/22 – 6/30/23)	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

Explain the source (e.g., State monitoring, State database/data system, dispute resolution, fiscal, related requirements, etc.) of any findings reported in this section:

Please describe, consistent with OSEP QA 23-01, how the State verified that the source of noncompliance is correctly implementing the regulatory requirements based on *updated data*:

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

Total for All Noncompliance Identified (Indicators 4B, 9, 10, 11, 12, 13, and Optional Areas):

Column A: # of written findings of noncompliance identified in FFY 2022 (7/1/22 – 6/30/23)	Column B: # of any other written findings of noncompliance identified in FFY 2022 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
5	0	5	0	0

FFY 2023 SPP/APR Data

Number of findings of Noncompliance that were timely corrected	Number of findings of Noncompliance that were identified FFY 2022	FFY 2022 Data	FFY 2023 Target	FFY 2023 Data	Status	Slippage
5	5		100%	100.00%	N/A	N/A

Percent of findings of noncompliance not corrected or not verified as corrected within one year of identification	0.00%
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Provide additional information about this indicator (optional)

Summary of Findings of Noncompliance identified in FFY 2022 Corrected in FFY 2023 (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified during FFY 2022 (the period from July 1, 2022 through June 30, 2023)	5
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)	5
3. Number of findings <u>not</u> verified as corrected within one year	0

Subsequent Correction: Summary of All Outstanding Findings of Noncompliance Identified in FFY 2022 Not Timely Corrected in FFY 2023 (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	
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	
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	
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	
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	
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	
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	
7. Number of findings <u>not</u> 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.

18 - OSEP Response

CNMI has established the baseline for this indicator, using data from FFY 2023, and OSEP accepts that baseline.

18 - Required Actions

Certification

Instructions

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

Certify

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

Select the certifier's role:

Chief State School Officer

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:

Lawrence F. Camacho, Ed.D

Title:

Commissioner of Education

Email:

pss.coe@cnmipss.org

Phone:

670/237-3061

Submitted on:

04/18/25 10:39:40 PM

Determination Enclosures

RDA Matrix

Northern Mariana Islands 2025 Part B Results-Driven Accountability Matrix Freely Associated States, Outlying Areas, and the Bureau of Indian Education

Results-Driven Accountability Percentage and Determination (1)

Percentage (%)	Determination
100.00%	Needs Assistance

Results and Compliance Overall Scoring

Section	Total Points Available	Points Earned	Score (%)
Results	6	6	100.00%
Compliance	12	12	100.00%

(1) For a detailed explanation of how the Compliance Score, Results Score, and the Results-Driven Accountability Percentage and Determination were calculated, review "How the Department Made Determinations under Section 616(d) of the Individuals with Disabilities Education Act in 2025: Freely Associated States, Outlying Areas, and the Bureau of Indian Education, Part B."

2025 Part B Results Matrix

Reading Assessment Elements

Reading Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment (2)	Grade 3-8	95%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	N/A	N/A
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	N/A	N/A
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	N/A	N/A
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	N/A	N/A

Math Assessment Elements

Math Assessment Elements	Grade	Performance (%)	Score
Percentage of Children with Disabilities Participating in Statewide Assessment	Grade 3-8	97%	1
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 4	N/A	N/A
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 4	N/A	N/A
Percentage of Children with Disabilities Scoring at Basic or Above on the National Assessment of Educational Progress	Grade 8	N/A	N/A
Percentage of Children with Disabilities Included in Testing on the National Assessment of Educational Progress	Grade 8	N/A	N/A

(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 Over Previous 3 Years	7	2
Percentage of Children with Disabilities who Graduated with a Regular High School Diploma Over Previous 3 Years**	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."

2025 Part B Compliance Matrix

Part B Compliance Indicator (3)	Performance (%)	Full Correction of Findings of Noncompliance Identified in FFY 2022 (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.	N/A	N/A	N/A
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	N/A	N/A	N/A
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.	N/A	N/A	N/A
Indicator 11: Timely initial evaluation	95.12%	N/A	2
Indicator 12: IEP developed and implemented by third birthday	100.00%	N/A	2
Indicator 13: Secondary transition	100.00%	N/A	2
Indicator 18: General Supervision	100.00%	YES	2
Timely and Accurate State-Reported Data	100.00%		2
Timely State Complaint Decisions	N/A		N/A
Timely Due Process Hearing Decisions	N/A		N/A
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/FFY2023-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 $\geq 5\%$ and $< 10\%$ for Indicators 4B, 9, and 10, and $\geq 90\%$ and $< 95\%$ for Indicators 11, 12, 13 and 18.

Data Rubric
Northern Mariana Islands

FFY 2023 APR (1)

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

APR Indicator	Valid and Reliable	Total
1	1	1
2	1	1
3A	1	1
3B	1	1
3C	1	1
3D	1	1
4A	1	1
4B	N/A	0
5	1	1
6	1	1
7	1	1
8	1	1
9	N/A	0
10	N/A	0
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 2023 APR was submitted on-time, place the number 5 in the cell on the right.	5
Grand Total - (Sum of Subtotal and Timely Submission Points) =	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: 7/31/24	1	1	1	3
Personnel Due Date: 3/5/25	1	1	1	3
Exiting Due Date: 3/5/25	1	1	1	3
Discipline Due Date: 3/5/25	1	1	1	3
State Assessment Due Date: 1/8/25	1	1	1	3
Dispute Resolution Due Date: 11/13/24	1	1	1	3
MOE/CEIS Due Date: 9/4/24	1	1	1	3

618 Score Calculation

Subtotal	21
Grand Total (Subtotal X 1.28571429) =	27.00

(2) In the 618 Data table, when calculating the value in the Total column, any N/As in the Timely, Complete Data, or Passed Edit Checks columns are treated as a '0'. An N/A does not negatively affect a State's score; this is because 1.28571429 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	27.00
C. APR Grand Total (A) + 618 Grand Total (B) =	51.00
Total N/A Points in APR Data Table Subtracted from Denominator	3
Total N/A Points in 618 Data Table Subtracted from Denominator	0.00
Denominator	51.00
D. Subtotal (C divided by Denominator) (3) =	1.0000
E. Indicator Score (Subtotal D x 100) =	100.00

(3) Note that any cell marked as N/A in the APR Data Table will decrease the denominator by 1, and any cell marked as N/A in the 618 Data Table will decrease the denominator by 1.28571429.

APR and 618 -Timely and Accurate State Reported Data

DATE: February 2025 Submission

SPP/APR Data

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

Part B 618 Data

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

618 Data Collection	EDFacts Files/ EMAPS Survey	Due Date
Part B Child Count and Educational Environments	FS002 & FS089	7/31/2024
Part B Personnel	FS070, FS099, FS112	3/5/2025
Part B Exiting	FS009	3/5/2025
Part B Discipline	FS005, FS006, FS007, FS088, FS143, FS144	3/5/2025
Part B Assessment	FS175, FS178, FS185, FS188	1/8/2025
Part B Dispute Resolution	Part B Dispute Resolution Survey in <i>EMAPS</i>	11/13/2024
Part B LEA Maintenance of Effort Reduction and Coordinated Early Intervening Services	Part B MOE Reduction and CEIS Survey in <i>EMAPS</i>	9/4/2024

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 *EDFacts* 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
Northern Mariana Islands
School Year: 2023-24

Section A: Written, Signed Complaints

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

Section B: Mediation Requests

(2) Total number of mediation requests received through all dispute resolution processes.	0
(2.1) Mediations held.	0
(2.1) (a) Mediations held related to due process complaints.	0
(2.1) (a) (i) Mediation agreements related to due process complaints.	0
(2.1) (b) Mediations held not related to due process complaints.	0
(2.1) (b) (i) Mediation agreements not related to due process complaints.	0
(2.2) Mediations pending.	0
(2.3) Mediations withdrawn or not held.	0

Section C: Due Process Complaints

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

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

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

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

These data were extracted on the close date:
11/13/2024

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 2025 will be posted in June 2025. Copy and paste the link below into a browser to view.

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



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

Final Determination Letter

June 20, 2025

Honorable Lawrence F. Camacho
Commissioner of Education
Commonwealth of the Northern Mariana Islands Public School System
P.O. Box 501370 CK
Saipan, MP 96950

Dear Commissioner Camacho:

I am writing to advise you of the U.S. Department of Education's (Department) 2025 determination under Section 616 of the Individuals with Disabilities Education Act (IDEA). The Department has determined that Northern Mariana Islands needs assistance in implementing the requirements of Part B of the IDEA. This determination is based on the totality of Northern Mariana Islands' data and information, including the Federal fiscal year (FFY) 2023 State Performance Plan/Annual Performance Report (SPP/APR), other State-reported data, and other publicly available information.

Northern Mariana Islands' 2025 determination is based on the data reflected in its "2025 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 2025: Freely Associated States, Outlying Areas, and the Bureau of Indian Education-Part B" (HTDMD).

The Office of Special Education Programs (OSEP) is continuing to use both results data and compliance data in making determinations for outlying areas, freely associated States, and the Bureau of Indian Education (the Entities) in 2025, as it did for determinations in 2024. (The specifics of the determination procedures and criteria are set forth in the HTDMD document and reflected in the RDA Matrix for Northern Mariana Islands).

In making Part B determinations in 2025, 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 2025 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, and Puerto Rico. OSEP used the available NAEP data for Puerto Rico in making Puerto Rico's 2025 determination as it did for Puerto Rico's 2024 determination. OSEP used the publicly available NAEP data for the Bureau of Indian Education 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 2025 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.

For the 2025 IDEA Part B determinations, OSEP also considered performance on timely correction of noncompliance requirements in Indicator 18. While the State's performance on timely correction of noncompliance was a factor in each State or Entity's 2025 Part B Compliance Matrix, no State or Entity received a Needs Intervention determination in 2025 due solely to this criterion. However, this criterion will be fully incorporated beginning with the 2026 determinations.

You may access the results of OSEP's review of Northern Mariana Islands' SPP/APR and other relevant data by accessing the EMAPS SPP/APR reporting tool using your Northern Mariana Islands-specific log-on information at <https://emaps.ed.gov/suite/>. When you access Northern Mariana Islands' SPP/APR on the site, you will find, in applicable Indicators 1 through 18, the OSEP Response to the indicator and any actions that Northern Mariana Islands is required to take. The actions that Northern Mariana Islands is required to take are in the "Required Actions" section of the indicator. It is important for you to review the Introduction to the SPP/APR, which may also include language in the "OSEP Response" and/or "Required Actions" sections.

400 MARYLAND AVE. S.W., WASHINGTON DC 20202-2600

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The Department of Education's mission is to promote student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access.

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

- (1) Northern Mariana Islands' RDA Matrix;
- (2) the HTDMD [link](#);
- (3) "2025 Data Rubric Part B," which shows how OSEP calculated Northern Mariana Islands' "Timely and Accurate State-Reported Data" score in the Compliance Matrix; and
- (4) "Dispute Resolution 2023-2024," which includes the IDEA Section 618 data that OSEP used to calculate the Northern Mariana Islands' "Timely State Complaint Decisions" and "Timely Due Process Hearing Decisions" scores in the Compliance Matrix.

As noted above, Northern Mariana Islands' 2025 determination is Needs Assistance. A State's or Entity's 2025 RDA Determination is Needs Assistance if the RDA Percentage is at least 60% but less than 80%. A State's or Entity's determination would also be Needs Assistance if its RDA Determination percentage is 80% or above but the Department has imposed Specific Conditions on the State's or Entity's last three IDEA Part B grant awards (for FFYs 2022, 2023, and 2024), and those Specific Conditions are in effect at the time of the 2025 determination.

Northern Mariana Islands' determination for 2024 was also Needs Assistance. In accordance with Section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), if a State or Entity is determined to need assistance for two consecutive years, the Secretary must take one or more of the following actions:

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

Pursuant to these requirements, the Secretary is advising Northern Mariana Islands of available sources of technical assistance, including OSEP-funded technical assistance centers and resources at the following website: [Individuals with Disabilities Education Act \(IDEA\) Topic Areas](#), and requiring Northern Mariana Islands to work with appropriate entities. The Secretary directs Northern Mariana Islands to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. We strongly encourage Northern Mariana Islands to access technical assistance related to those results elements and compliance indicators for which it received a score of zero. Northern Mariana Islands must report with its FFY 2024 SPP/APR submission, due February 2, 2026, on:

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

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

The Secretary is considering modifying the factors the Department will use in making its determinations in June 2026 and beyond, as part of the Administration's priority to empower States in taking the lead in developing and implementing policies that best serve children with disabilities, and empowering parents with school choice options. As we consider changes to data collection and how we use the data reported to the Department in making annual IDEA determinations, OSEP will provide parents, States, entities, and other stakeholders with an opportunity to comment and provide input through a variety of mechanisms.

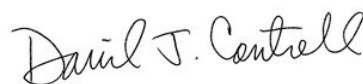
For the FFY 2024 SPP/APR submission due on February 1, 2026, OSEP is providing the following information about the IDEA Section 618 data. The 2024-25 IDEA Section 618 Part B data submitted as of the due date will be used for the FFY 2024 SPP/APR and the 2026 IDEA Part B Results Matrix and data submitted during correction opportunities will not be used for these purposes. The 2024-25 IDEA Section 618 Part B data will automatically be prepopulated in the SPP/APR reporting platform for Part B SPP/APR Indicators 3, 5, and 6 (as they have in the past). Under EDFacts Modernization, States and Entities are expected to submit high-quality IDEA Section 618 Part B data that can be published and used by the Department as of the due date. States and Entities are expected to conduct data quality reviews prior to the applicable due date. OSEP expects States and Entities to take one of the following actions for all business rules that are triggered in the appropriate EDFacts system prior to the applicable due date: 1) revise the uploaded data to address the edit; or 2) provide a data note addressing why the data submission triggered the business rule. States and Entities will be unable to submit the IDEA Section 618 Part B data without taking one of these two actions. There will not be a resubmission period for the IDEA Section 618 Part B data.

As a reminder, Northern Mariana Islands must make its SPP/APR available to the public by posting it on its agency website. Within the upcoming weeks, OSEP will be finalizing an Entity Profile that:

- (1) includes Northern Mariana Islands' 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 Northern Mariana Islands' efforts to improve results for children and youth with disabilities and looks forward to working with Northern Mariana Islands 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,



David J. Cantrell
Deputy Director
Office of Special Education Programs

