

U.S. Department of Education

Washington, D.C. 20202-5335

OSEP FY 2020 Grant Performance Report

CFDA # 84.325L

PR/Award # H325L200008

Budget Period # 1

Report Type: Annual Performance

PR/Award # H325L200008

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Project Narrative - Optional attachment for additional Section A text

Title : Optional attachment for additional Section A text

Attachment:

File :

1 [f425_OHIO_APR325L_5_5_2021.pdf](#)

Federal Financial Report

(Follow form Instructions)

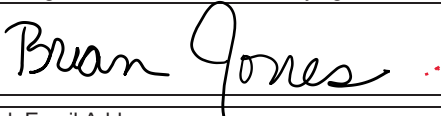
OMB Number: 4040-0014
Expiration Date: 02/28/2022

| | | | |
|---|--|---|---|
| 1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Education/ Office of Special Education Programs | | 2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) H325L200008 | |
| 3. Recipient Organization (Name and complete address including Zip code) Recipient Organization Name: Ohio Department of Education Office of Early Learning and School Readiness Street1: 25 South Front Street Street2: City: Columbus County: Province: Ohio State: USA: UNITED STATES ZIP / Postal Code: 43215 Country: | | | |
| 4a. DUNS Number 809174378 | 4b. EIN 31-6402047 | 5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) H325L200008 | |
| 6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final | 7. Basis of Accounting <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual | 8. Project/Grant Period From: 10/1/2020 To: 09/30/2021 | 9. Reporting Period End Date 03/31/2021 |
| 10. Transactions | | | Cumulative |
| <i>(Use lines a-c for single or multiple grant reporting)</i> | | | |
| Federal Cash (To report multiple grants, also use FFR attachment): | | | |
| a. Cash Receipts | | | 0.00 |
| b. Cash Disbursements | | | 0.00 |
| c. Cash on Hand (line a minus b) | | | 0.00 |
| <i>(Use lines d-o for single grant reporting)</i> | | | |
| Federal Expenditures and Unobligated Balance: | | | |
| d. Total Federal funds authorized | | 190,000.00 | 0.00 |
| e. Federal share of expenditures | | | 0.00 |
| f. Federal share of unliquidated obligations | | | 0.00 |
| g. Total Federal share (sum of lines e and f) | | | 0.00 |
| h. Unobligated balance of Federal Funds (line d minus g) | | 190,000.00 | 0.00 |
| Recipient Share: | | | |
| i. Total recipient share required | | | 0.00 |
| j. Recipient share of expenditures | | | 0.00 |
| k. Remaining recipient share to be provided (line i minus j) | | | 0.00 |
| Program Income: | | | |
| l. Total Federal program income earned | | | 0.00 |
| m. Program Income expended in accordance with the deduction alternative | | | 0.00 |
| n. Program Income expended in accordance with the addition alternative | | | 0.00 |
| o. Unexpended program income (line l minus line m or line n) | | | 0.00 |

| 11. Indirect Expense | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| a. Type | b. Rate | c. Period From | Period To | d. Base | e. Amount Charged | f. Federal Share |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| g. Totals: | | | | <input type="text"/> | <input type="text"/> | <input type="text"/> |

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

| | | |
|---|--|--|
| a. Name and Title of Authorized Certifying Official | | |
| Prefix: <input type="text"/> | First Name: <input type="text" value="Brian"/> | Middle Name: <input type="text"/> |
| Last Name: <input type="text" value="Jones"/> | Suffix: <input type="text"/> | |
| Title: <input type="text" value="Executive Director, Office of Grants Administration"/> | | |
| b. Signature of Authorized Certifying Official | | c. Telephone (Area code, number and extension) |
|  | | <input type="text" value="614-981-6539"/> |
| d. Email Address | e. Date Report Submitted | 14. Agency use only: |
| <input type="text" value="brian.jones@education.ohio.gov"/> | <input type="text" value="05/05/2021"/> | |

Federal Financial Report Instructions

Report Submissions

- 1) Recipients will be instructed by Federal agencies to submit the *Federal Financial Report (FFR)* to a single location, except when an automated payment management reporting system is utilized. In this case, a second submission location may be required by the agency.
- 2) If recipients need more space to support their *FFRs*, or *FFR Attachments*, they should provide supplemental pages. These additional pages must indicate the following information at the top of each page: Federal grant or other identifying number (if reporting on a single award), recipient organization, Data Universal Numbering System (DUNS) number, Employer Identification Number (EIN), and period covered by the report.

Reporting Requirements

- 1) The submission of interim *FFRs* will be on a quarterly, semi-annual, or annual basis, as directed by the Federal agency. A final *FFR* shall be submitted at the completion of the award agreement. The following reporting period end dates shall be used for interim reports: 3/31, 6/30, 9/30, or 12/31. For final *FFRs*, the reporting period end date shall be the end date of the project or grant period.
- 2) Quarterly and semi-annual interim reports shall be submitted no later than 30 days after the end of each reporting period. Annual reports shall be submitted no later than 90 days after the end of each reporting period. Final reports shall be submitted no later than 90 days after the project or grant period end date.

Note: For single award reporting:

- 1) Federal agencies may require both cash management information on lines 10(a) through 10(c) and financial status information lines 10(d) through 10(o).
- 2) 10(b) and 10(e) may not be the same until the final report.

Line Item Instructions for the Federal Financial Report

| FFR Number | Reporting Item | Instructions |
|--------------------------|--|--|
| Cover Information | | |
| 1 | Federal Agency and Organizational Element to Which Report is Submitted | Enter the name of the Federal agency and organizational element identified in the award document or as instructed by the agency. |
| 2 | Federal Grant or Other Identifying Number Assigned by Federal Agency | For a single award, enter the grant number assigned to the award by the Federal agency. For multiple awards, report this information on the <i>FFR Attachment</i> . <i>Do not complete this box if reporting on multiple awards.</i> |
| 3 | Recipient Organization | Enter the name and complete address of the recipient organization including zip code. |
| 4a | DUNS Number | Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number. |
| 4b | EIN | Enter the recipient organization's Employer Identification Number (EIN). |
| 5 | Recipient Account Number or Identifying Number | Enter the account number or any other identifying number assigned by the recipient to the award. This number is for the recipient's use only and is not required by the Federal agency. For multiple awards, report this |

| FFR Number | Reporting Item | Instructions |
|---|---|--|
| | | information on the <i>FFR</i> Attachment. <i>Do not complete this box if reporting on multiple awards.</i> |
| 6 | Report Type | Mark appropriate box. <i>Do not complete this box if reporting on multiple awards.</i> |
| 7 | Basis of Accounting (Cash/Accrual) | Specify whether a cash or accrual basis was used for recording transactions related to the award(s) and for preparing this <i>FFR</i> . Accrual basis of accounting refers to the accounting method in which expenses are recorded when incurred. For cash basis accounting, expenses are recorded when they are paid. |
| 8 | Project/Grant Period, From: (Month, Day, Year) | Indicate the period established in the award document during which Federal sponsorship begins and ends. Note: Some agencies award multi-year grants for a project period that is funded in increments or budget periods (typically annual increments). Throughout the project period, agencies often require cumulative reporting for consecutive budget periods. Under these circumstances, enter the beginning and ending dates of the project period not the budget period. <i>Do not complete this line if reporting on multiple awards.</i> |
| | Project/Grant Period, To: (Month, Day, Year) | See the above instructions for "Project/Grant Period, From: (Month, Day, Year)." |
| 9 | Reporting Period End Date: (Month, Day, Year) | Enter the ending date of the reporting period. For quarterly, semi-annual, and annual interim reports, use the following reporting period end dates: 3/31, 6/30, 9/30, or 12/31. For final <i>FFRs</i> , the reporting period end date shall be the end date of the project or grant period. |
| 10 | Transactions Enter cumulative amounts from date of the inception of the award through the end date of the reporting period specified in line 9. Use Lines 10a through 10c, Lines 10d through 10o, or Lines 10a through 10o, as specified by the Federal agency, when reporting on single grants. Use Line 12, Remarks, to provide any information deemed necessary to support or explain <i>FFR</i> data. | |
| Federal Cash (To report multiple grants, also use <i>FFR</i> Attachment) | | |
| 10a | Cash Receipts | Enter the cumulative amount of actual cash received from the Federal agency as of the reporting period end date. |
| 10b | Cash Disbursements | Enter the cumulative amount of Federal fund disbursements (such as cash or checks) as of the reporting period end date. Disbursements are the sum of actual cash disbursements for direct charges for goods and services, the amount of indirect expenses charged to the award, and the amount of cash advances and payments made to subrecipients and contractors. For multiple grants, report each grant separately on the <i>FFR</i> Attachment. The sum of the cumulative cash disbursements on the <i>FFR</i> Attachment must equal the amount entered on Line 10b, <i>FFR</i> . |
| 10c | Cash On Hand (Line 10a Minus Line 10b) | Enter the amount of Line 10a minus Line 10b. This amount represents immediate cash needs. If more than three business days of cash are on hand, the Federal agency may require an explanation |

| FFR Number | Reporting Item | Instructions |
|--|--|--|
| | | on Line 12, Remarks, explaining why the drawdown was made prematurely or other reasons for the excess cash. |
| Federal Expenditures and Unobligated Balance: Do not complete this section if reporting on multiple awards. | | |
| 10d | Total Federal Funds Authorized | Enter the total Federal funds authorized as of the reporting period end date. |
| 10e | Federal Share of Expenditures | Enter the amount of Federal fund expenditures. For reports prepared on a cash basis, expenditures are the sum of cash disbursements for direct charges for property and services; the amount of indirect expense charged; and the amount of cash advance payments and payments made to subrecipients. For reports prepared on an accrual basis, expenditures are the sum of cash disbursements for direct charges for property and services; the amount of indirect expense incurred; and the net increase or decrease in the amounts owed by the recipient for (1) goods and other property received; (2) services performed by employees, contractors, subrecipients, and other payees; and (3) programs for which no current services or performance are required. Do not include program income expended in accordance with the deduction alternative, rebates, refunds, or other credits. (Program income expended in accordance with the deduction alternative should be reported separately on Line 10o.) |
| 10f | Federal Share of Unliquidated Obligations | <p>Unliquidated obligations on a cash basis are obligations incurred, but not yet paid. On an accrual basis, they are obligations incurred, but for which an expenditure has not yet been recorded. Enter the Federal portion of unliquidated obligations. Those obligations include direct and indirect expenses incurred but not yet paid or charged to the award, including amounts due to subrecipients and contractors. On the final report, this line should be zero unless the awarding agency has provided other instructions.</p> <p><i>Do not include any amount in Line 10f that has been reported in Line 10e. Do not include any amount in Line 10f for a future commitment of funds (such as a long-term contract) for which an obligation or expense has not been incurred.</i></p> |
| 10g | Total Federal Share (Sum of Lines 10e and 10f) | Enter the sum of Lines 10e and 10f. |
| 10h | Unobligated Balance of Federal Funds (Line 10d Minus Line 10g) | Enter the amount of Line 10d minus Line 10g. |
| Recipient Share: Do not complete this section if reporting on multiple awards. | | |
| 10i | Total Recipient Share Required | Enter the total required recipient share for reporting period specified in line 9. The required recipient share should include all matching and cost sharing provided by recipients and third-party providers to meet the level required by the Federal agency. This amount should not include cost sharing and match amounts in excess of the amount required by the Federal agency (for example, cost overruns for which the recipient incurs additional expenses and, therefore, contributes a greater level of cost |

| FFR Number | Reporting Item | Instructions |
|--|--|---|
| | | sharing or match than the level required by the Federal agency). |
| 10j | Recipient Share of Expenditures | Enter the recipient share of actual cash disbursements or outlays (less any rebates, refunds, or other credits) including payments to subrecipients and contractors. This amount may include the value of allowable third party in-kind contributions and recipient share of program income used to finance the non-Federal share of the project or program. Note: On the final report this line should be equal to or greater than the amount of Line 10i. |
| 10k | Remaining Recipient Share to be Provided (Line 10i Minus Line 10j) | Enter the amount of Line 10i minus Line 10j. If recipient share in Line 10j is greater than the required match amount in Line 10i, enter zero. |
| Program Income: Do not complete this section if reporting on multiple awards. | | |
| 10l | Total Federal Program Income Earned | Enter the amount of Federal program income earned. Do not report any program income here that is being allocated as part of the recipient's cost sharing amount included in Line 10j. |
| 10m | Program Income Expended in Accordance With the Deduction Alternative | Enter the amount of program income that was used to reduce the Federal share of the total project costs. |
| 10n | Program Income Expended in Accordance With the Addition Alternative | Enter the amount of program income that was added to funds committed to the total project costs and expended to further eligible project or program activities. |
| 10o | Unexpended Program Income (Line 10l Minus Line 10m or Line 10n) | Enter the amount of Line 10l minus Line 10m or Line 10n. This amount equals the program income that has been earned but not expended, as of the reporting period end date. |
| 11 | Indirect Expense: Complete this information only if required by the awarding agency. Enter cumulative amounts from date of the inception of the award through the end date of the reporting period specified in line 9. | |
| 11a | Type of Rate(s) | State whether indirect cost rate(s) is Provisional, Predetermined, Final, or Fixed. |
| 11b | Rate | Enter the indirect cost rate(s) in effect during the reporting period. |
| 11c | Period From; Period To | Enter the beginning and ending effective dates for the rate(s). |
| 11d | Base | Enter the amount of the base against which the rate(s) was applied. |
| 11e | Amount Charged | Enter the amount of indirect costs charged during the time period specified. (Multiply 11b. x 11d.) |
| 11f | Federal Share | Enter the Federal share of the amount in 11e. |
| 11g | Totals | Enter the totals for columns 11d, 11e, and 11f. |
| Remarks, Certification, and Agency Use Only | | |
| 12 | Remarks | Enter any explanations or additional information required by the Federal sponsoring agency including excess cash as stated in line 10c. |
| 13a | Typed or Printed Name and Title of Authorized Certifying Official | Enter the name and title of the authorized certifying official. |
| 13b | Signature of Authorized Certifying Official | The authorized certifying official must sign here. |
| 13c | Telephone (Area Code, Number and Extension) | Enter the telephone number (including area code and extension) of the individual listed in Line 13a. |
| 13d | E-mail Address | Enter the e-mail address of the individual listed in Line 13a. |

| FFR Number | Reporting Item | Instructions |
|------------|--|---|
| 13e | Date Report Submitted (Month, Day, Year) | Enter the date the <i>FFR</i> is submitted to the Federal agency using the month, day, year format. |
| 14 | Agency Use Only | This section is reserved for Federal agency use. |

Project Narrative - Signed Cover Sheet

Title : Signed Cover Sheet

Attachment:

File :

1 [524BSIGNED_OHIO_APR325L_5_5_2021.pdf](#)

**U.S. Department of Education
Grant Performance Report
Cover Sheet (ED 524B)**

**Check only one box per
Program Office instructions.**

Annual Performance Report Final Performance Report

General Information

1. PR/Award #: H325L200008

(Block 5 of the Grant Award Notification - 11 Characters.)

2. Grantee NCES ID#: 39

*(See instructions. Up to 12 Characters.)*3. Project Title: Leadership Development Programs: Increasing the Capacity of Leaders to Improve Systems Serving Children With Disabilities
*(Enter the same title as on the approved application.)*4. Grantee Name: EDUCATION, OHIO DEPARTMENT OF
*(Block 1 of the Grant Award Notification.)*5. Grantee Address:
(See instructions.)

Street: 25 S FRONT ST

City: COLUMBUS

State: OH Zip: 43215 Zip+4: 4176

6. Project Director:
(See instructions.)

First Name:Wendy

Last Name:Grove

Title:Director, Office of Early Learning & School Readiness

Phone #: 6144662096

Fax #:

Email Address: wendy.grove@education.ohio.gov

Reporting Period Information (See instructions.)7. Reporting Period: From: 10/1/2020 To: 2/28/2021
*(mm/dd/yyyy)***Budget Expenditures (To be completed by your Business Office. See instructions. Also see Section B.)**

8. Budget Expenditures:

| | Federal Grant Funds | Non-Federal Funds <i>(Match/Cost Share)</i> |
|---|---------------------|--|
| a. Previous Budget Period | 0 | 0 |
| b. Current Budget Period | 0 | 0 |
| c. Entire Project Period <i>(For Final Performance Reports only)</i> | | |

Indirect Cost Information (To be completed by your Business Office. See instructions.)

9. Indirect Costs

- a. Are you claiming indirect costs under this grant?
If yes, please indicate which of the following applies to your grant? Yes No
- b. The grantee has an Indirect Cost Rate Agreement approved by the Federal Government: Yes No
The period covered by the Indirect Cost Rate Agreement is : From: To: (mm/dd/yyyy)
The approving Federal agency is : ED Other *(Please specify):*
The Indirect Cost Rate is : %
Type of Rate Provisional *(Please specify):*
(For Final Performance Reports Only): Final Other
- c. The grantee is not a State, local government, or Indian tribe, and is using the de minimus rate of 10% of modified total direct costs (MTDC) in compliance with 2 CFR 200.414(f) Yes No
- d. The grantee is funded under a Restricted Rate Program and is you using a restricted indirect cost rate that either :
 Is included in your approved Indirect Cost Rate Agreement Complies with 34 CFR 76.564(c)(2)?
- e. The grantee is funded under a Training Rate Program and:
 Is recovering indirect cost using 8 percent of MTDC in compliance with 34 CFR 75.562(c)(2)
 Is recovering indirect costs using its actual negotiated indirect cost rate reflected in 9(b)

Human Subjects (Annual Institutional Review Board (IRB) Certification) (See instructions.)10. Is the annual certification of Institutional Review Board (IRB) approval attached? Yes No N/A**Data Privacy and Security Measures Certification (See instructions.)**11. Is a statement affirming that you are aware of federal and state data security and student privacy regulations included, with supporting documentation attached? Yes No N/A

12. Performance Measures Status

- a. Are complete data on performance measures for the current budget period included in the Project Status Chart? Yes No
 b. If no, when will the data be available and submitted to the Department? 12/01/2021 (mm/dd/yyyy)

13. By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and the expenditures, disbursements, and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-33812). Furthermore, to the best of my knowledge and belief, all data in this performance report are true, complete, and correct and the report fully discloses all known weaknesses concerning the accuracy, reliability, and completeness of data reported.

| | |
|---|---|
| Name of Authorized Representative: Paolo DeMaria <i>Brian Jones</i> | Title: Superintendent of Public Instruction / <i>Executive Director</i> |
| Signature: <i>Brian Jones</i> | Date: <i>5/5/2021</i> |
| | |

Grant Performance Report (ED 524B) Executive Summary Attachment:

Title : File Name: Executive Summary_OHIO_APR325L_5-5-2021
 File : [Executive Summary OHIO APR325L 5 5 2021.pdf](#)

**U.S. Department of Education
Grant Performance Report
Cover Sheet (ED 524B)**

**Check only one box per
Program Office instructions.**

**Annual
Performance
Report** **Final
Performance
Report**

General Information

1. PR/Award #: H325L200008

(Block 5 of the Grant Award Notification - 11 Characters.)

2. Grantee NCES ID#: 39

*(See instructions. Up to 12 Characters.)*3. Project Title: Leadership Development Programs: Increasing the Capacity of Leaders to Improve Systems Serving Children With Disabilities
*(Enter the same title as on the approved application.)*4. Grantee Name: EDUCATION, OHIO DEPARTMENT OF
*(Block 1 of the Grant Award Notification.)*5. Grantee Address:
(See instructions.)

Street: 25 S FRONT ST

City: COLUMBUS

State: OH Zip: 43215 Zip+4: 4176

6. Project Director:

(See instructions.)

First Name: Wendy

Last Name: Grove

Title: Director, Office of Early Learning & School Readiness

Phone #: 6144662096

Fax #:

Email Address: wendy.grove@education.ohio.gov

Reporting Period Information (See instructions.)7. Reporting Period: From: 10/1/2020 To: 2/28/2021
*(mm/dd/yyyy)***Budget Expenditures (To be completed by your Business Office. See instructions. Also see Section B.)**

8. Budget Expenditures:

| | Federal Grant Funds | Non-Federal Funds (Match/Cost Share) |
|---|----------------------------|---|
| a. Previous Budget Period | 0 | 0 |
| b. Current Budget Period | 0 | 0 |
| c. Entire Project Period <i>(For Final Performance Reports only)</i> | | |

Indirect Cost Information (To be completed by your Business Office. See instructions.)

9. Indirect Costs

- a. Are you claiming indirect costs under this grant?
If yes, please indicate which of the following applies to your grant? Yes No
- b. The grantee has an Indirect Cost Rate Agreement approved by the Federal Government: Yes No
The period covered by the Indirect Cost Rate Agreement is : From: To: (mm/dd/yyyy)
The approving Federal agency is : ED Other *(Please specify):*
The Indirect Cost Rate is : %
Type of Rate Provisional *(Please specify):*
(For Final Performance Reports Only): Final Other
- c. The grantee is not a State, local government, or Indian tribe, and is using the de minimus rate of 10% of modified total direct costs (MTDC) in compliance with 2 CFR 200.414(f) Yes No
- d. The grantee is funded under a Restricted Rate Program and is you using a restricted indirect cost rate that either :
 Is included in your approved Indirect Cost Rate Agreement Complies with 34 CFR 76.564(c)(2)?
- e. The grantee is funded under a Training Rate Program and:
 Is recovering indirect cost using 8 percent of MTDC in compliance with 34 CFR 75.562(c)(2)
 Is recovering indirect costs using its actual negotiated indirect cost rate reflected in 9(b)

Human Subjects (Annual Institutional Review Board (IRB) Certification) (See instructions.)10. Is the annual certification of Institutional Review Board (IRB) approval attached? Yes No N/A**Data Privacy and Security Measures Certification (See instructions.)**11. Is a statement affirming that you are aware of federal and state data security and student privacy regulations included, with supporting documentation attached? Yes No N/A

12. Performance Measures Status

- a. Are complete data on performance measures for the current budget period included in the Project Status Chart? Yes No
 b. If no, when will the data be available and submitted to the Department? 12/01/2021 (mm/dd/yyyy)

13. By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and the expenditures, disbursements, and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-33812). Furthermore, to the best of my knowledge and belief, all data in this performance report are true, complete, and correct and the report fully discloses all known weaknesses concerning the accuracy, reliability, and completeness of data reported.

| | |
|--|---|
| Name of Authorized Representative: Paolo DeMaria | Title: Superintendent of Public Instruction |
| Signature: | Date: |

Grant Performance Report (ED 524B) Executive Summary Attachment:

Title : File Name: Executive Summary_OHIO_APR325L_5-5-2021
 File : [Executive Summary_OHIO_APR325L_5_5_2021.pdf](#)

EXECUTIVE SUMMARY

File Name: Executive Summary_OHIO_APR325L_5-5-2021

Ohio has made on-time and expected progress toward its project activities and objectives since the October 1, 2020 award date. As a reminder, Ohio outlined three major objectives and four activities for the grant. Expected outcomes for Grant Year One were articulated in Ohio's grant application, Table 6. For this reporting period of October 1, 2020 – February 28, 2021, all project goals are on target to being fully met by the end of Year One on September 30, 2021. By objective and goal, the work completed and in progress are summarized below.

Objective1: Create an effective and efficient model of personalized learning that will consist of face-to-face and online training, use of the internet and other technologies designed to create and sustain an effective network of support for early childhood leaders, implementation of coaching and mentoring to provide ongoing support, and implementation of job-embedded activities and assignments designed so that project participants can apply what they are learning to their work with peers, colleagues, and families.

Activity 1: Professional Learning Experience (PLE) Year One Progress on Grant Goals

- Engage the Project Advisory Board **COMPLETE**
- Contract with Organizational Partners **IN PROGRESS**
- Complete initial presentations with Early Intervention Advisory, State Advisory Panel on Exceptional Children, & Early Childhood Advisory Council **COMPLETE**
- Work with Organizational Partners to create content **IN PROGRESS**
- Take drafted content to Project Advisory Board for input **NOT STARTED**
- Revise content based on input **NOT STARTED**
- Pilot test drafted content **NOT STARTED**
- Finalize PLE content across multiple modalities **NOT STARTED**
- Contract for needed technology platform(s) **IN PROGRESS**
- Finalize menu of professional learning options (Year 1) **IN PROGRESS**
- Create Needs Assessment surveys (Year 1) **IN PROGRESS**
- Create pre-test materials for participants (Year 1) **IN PROGRESS**
- Quarterly reports on progress to Early Intervention Advisory, State Advisory Panel on Exceptional Children, & Early Childhood Advisory Council **IN PROGRESS**
- Annual performance reports to OSEP & post on website **IN PROGRESS**

Activity 2: Mentoring Experience (ME) Year One Progress on Grant Goals

- Engage the Project Advisory Board **COMPLETED**
- Contract with Organizational Partners **IN PROGRESS**
- Quarterly reports on progress to Early Intervention Advisory, State Advisory Panel on Exceptional Children, & Early Childhood Advisory Council **IN PROGRESS**
- Annual performance reports to OSEP **IN PROGRESS**

Under the first project objective to create and deploy a fellowship program, Ohio is on target with all activities. The Year One Fellowship's Learning Experience is under development, with significant work completed by reviewing learning opportunities available. By the end of the month, all learning content will be identified as they fit across the Core Competencies and a rubric by age of child (0 – age 3; age 3 – 5; and/or age 6 – 8) and the extent to which the learning will facilitate the (a) acquisition or (b) application of knowledge.

Objective 2: Recruit and retain participants from high-need school districts and feeder Early Intervention programs who will complete a two-year learning and mentoring experience that will culminate in the identification and resolution of a relevant problem of practice to improve services to young children with disabilities and their families.

Activity 3: Recruit and Retain Participants for Early Childhood Inclusive Leadership Fellowship

- Engage the Project Advisory Board **COMPLETED**
- Engage the Targeted districts and Early Intervention programs **IN PROGRESS**
- Create & deploy communications for recruitment **IN PROGRESS**
- Create application forms, process, and scoring rubric **COMPLETED**
- Take drafted communications to Project Advisory Board for input **COMPLETED**
- Revise communications based on input **IN PROGRESS**
- Establish criteria & process for paying participant stipends **NOT STARTED**
- Recruit & select participants for cohort 1 **NOT STARTED**
- Create formative assessments for participants **IN PROGRESS**
- Quarterly reports on progress to Early Intervention Advisory, State Advisory Panel on Exceptional Children, & Early Childhood Advisory Council **IN PROGRESS**
- Annual performance reports to OSEP **IN PROGRESS**

Under the second project objective to recruit and retain participants, Ohio is on target with all activities. In addition to all planned activities, Ohio has created a page on the Ohio Department of Education's website as a public facing page to share information on the project. Access the webpage here: <http://education.ohio.gov/Topics/Early-Learning/Ohio-Early-Childhood-Inclusive-Leadership>.

Objective 3: Align the competencies for knowledge, skills, and leadership across Ohio's state agencies, early childhood and school professional development providers, Institutes of Higher Education, and professional organizations to identify and implement a cohesive, comprehensive, and coordinated set of standards for professionals working with children with disabilities and their families in their formative years.

Activity 4: Create a set of core competencies for professionals working with children with disabilities and their families in early childhood

- Engage the Project Advisory Board **COMPLETED**
- Contract with Organizational Partners **IN PROGRESS**

- Work with Organizational Partners to identify all sets of competencies that should be considered for alignment **COMPLETED**
- Take drafted alignment to Project Advisory Board for input **COMPLETED**
- Create pre-test materials for participants **IN PROGRESS**
- Quarterly reports on progress to Early Intervention Advisory, State Advisory Panel on Exceptional Children, & Early Childhood Advisory Council **IN PROGRESS**
- Annual performance reports to OSEP **IN PROGRESS**

In addition to the Project Management Team, Ohio has successfully engaged a robust and diverse Project Advisory Team. These teams have been meeting regularly since December 2020 to complete the tasks to achieve the project goals. Most notably, in this short amount of time, Ohio has taken three sets of professional standards and one set of Recommended Practices and added its Ohio Core Knowledge and Competencies for Administrators to identify one set of coordinated and comprehensive competencies. The drafted competencies were identified, then put before both Teams for input and feedback. As of the writing of this executive summary, Ohio has completed its multiple levels of review and is very close to finalizing these competencies. Once finalized, Ohio's Core Competencies for Early Childhood Inclusive Leadership will be the base for all activities that come after, including the Learning and Mentoring Experiences.

U.S. Department of Education
Grant Performance Report (ED 524B)
Project Status Chart

PR/Award #: H325L200008

SECTION A - Project Objectives Information and Related Performance Measures Data (See Instructions. Use as many pages as necessary.)**1 . Project Objective**

[] Check if this is a status update for the previous budget period.

Create an effective and efficient model of personalized learning that will consist of face-to-face and online training, use of the internet and other technologies designed to create and sustain an effective network of support for early childhood leaders, implementation of coaching and mentoring to provide ongoing support, and implementation of job-embedded activities and assignments designed so that project participants can apply what they are learning to their work with peers, colleagues, and families. Activity 1: Learning Experience; Activity 2: Mentoring Experience.

| Performance Measure | Measure Type | Quantitative Data | | | | | |
|--|--------------|-------------------|-----------|-----|-------------------------|-----------|-----|
| | | Target | | | Actual Performance Data | | |
| | | Raw Number | Ratio | % | Raw Number | Ratio | % |
| 2 The percentage of scholars completing preparation programs who are knowledgeable and skilled in evidence-based practices for children with disabilities. | PROGRAM | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 2a By the end of the learning experience year, 80% of the participating fellows will demonstrate increased knowledge across the core competencies as measured by pre and post self-reports on the Ohio ECIL Fellowship Experience Survey. | PROJECT | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 4 The percentage of scholars completing preparation programs who are working in the area(s) in which they were prepared upon program completion. | PROGRAM | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 4a After the completion of the fellowship, 90% of participating fellows will be employed in a leadership position as measured by self-reports on the Ohio ECIL Fellowship Completion Survey. | PROJECT | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 7 The percentage of scholars who completed the preparation program and are rated effective by their employers. | PROGRAM | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 7a After the completion of the fellowship, 100% of participating fellows will be rated as effective or higher on the Ohio ECIL Fellowship Employer Survey. | PROJECT | | 999 / 999 | 100 | | 999 / 999 | 100 |
| P1 The percentage of scholars who completed the preparation program and are employed in | PROGRAM | | 999 / 999 | 100 | | 999 / 999 | 100 |

| | | | | | | | |
|---|---------|--|-----------|-----|--|-----------|-----|
| the field of special education for at least two years. | | | | | | | |
| <p>P1a</p> <p>By the end of Grant Year 4, 80 percent of participating fellows who completed the two year fellowship in cohort 1 will report being employed in their field as measured by self-reports on the Ohio ECIL Fellowship Follow-up Survey.</p> | PROJECT | | 999 / 999 | 100 | | 999 / 999 | 100 |
| Explanation of Progress (Include Qualitative Data and Data Collection Information) | | | | | | | |

U.S. Department of Education
Grant Performance Report (ED 524B)
Project Status Chart

PR/Award #: H325L200008

SECTION A - Project Objectives Information and Related Performance Measures Data (See Instructions. Use as many pages as necessary.)**2 . Project Objective**

[] Check if this is a status update for the previous budget period.

Recruit and retain participants from high-need school districts and feeder Early Intervention programs who will complete a two-year learning and mentoring experience that will culminate in the identification and resolution of a relevant problem of practice to improve services to young children with disabilities and their families.

| Performance Measure | Measure Type | Quantitative Data | | | | | |
|---|--------------|-------------------|-----------|-----|-------------------------|-----------|-----|
| | | Target | | | Actual Performance Data | | |
| | | Raw Number | Ratio | % | Raw Number | Ratio | % |
| 5 The Federal cost per scholar who completed the preparation program. | PROGRAM | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 5a By the end of Grant Year 5, the federal cost per project-funded fellow as measured by the total grant award divided by the number of project-funded fellows who successfully completed the fellowship prior to the end of the grant will be \$24,000 or less. | PROJECT | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 3 The percentage of scholars who exit preparation programs prior to completion due to poor academic performance. | PROGRAM | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 3a By the end of Grant Years 1, 2, 3, 4, and 5, less than 10% of participating fellows will exit the leadership program prior to completion due to a lack of engagement as measured by self-reports on the Ohio ECIL Fellowship Experience Survey. | PROJECT | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 3b By the end of Grant Years 2, 3, and 4, 80% of the participating fellows will rate the learning experience as engaging, achieving a 4 or a 5 on a 5-point Likert scale as measured by the Ohio ECIL Fellowship Experience Survey. | PROJECT | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 3c By the end of Grant Years 3, 4, and 5, 80% of the participating fellows will rate the mentoring experience as engaging, achieving a 4 or a 5 on a 5-point Likert scale as measured by the Ohio ECIL Fellowship Experience Survey. | PROJECT | | 999 / 999 | 100 | | 999 / 999 | 100 |

Explanation of Progress (Include Qualitative Data and Data Collection Information)

**U.S. Department of Education
Grant Performance Report (ED 524B)
Project Status Chart**

PR/Award #: H325L200008

SECTION A - Project Objectives Information and Related Performance Measures Data (See Instructions. Use as many pages as necessary.)

3 . Project Objective Check if this is a status update for the previous budget period.

Align the competencies for knowledge, skills, and leadership across Ohio's state agencies, early childhood and school professional development providers, Institutes of Higher Education, and professional organizations to identify and implement a cohesive, comprehensive, and coordinated set of standards for professionals working with children with disabilities and their families in their formative years.

| Performance Measure | Measure Type | Quantitative Data | | | | | |
|---|--------------|-------------------|-----------|-----|-------------------------|-----------|-----|
| | | Target | | | Actual Performance Data | | |
| | | Raw Number | Ratio | % | Raw Number | Ratio | % |
| 1 The percentage of preparation programs that incorporate scientifically or evidence-based practices into their curricula. | PROGRAM | | 999 / 999 | 100 | | 999 / 999 | 100 |
| 1a By the end of Grant Years 1, 2, and 3, 80% of the participating fellows will rate the core competencies as cohesive, comprehensive, and coordinated set of standards for professionals, achieving a 4 or a 5 on a 5-point Likert scale as measured by the Ohio ECIL Fellowship Experience Survey. | PROJECT | | 999 / 999 | 100 | | 999 / 999 | 100 |

Explanation of Progress (Include Qualitative Data and Data Collection Information)

U.S. Department of Education
Grant Performance Report (ED 524B)
Project Status Chart

PR/Award #: **H325L200008**

SECTION B - Budget Information (See Instructions. Use as many pages as necessary.)

Title : Budget Information_OHIO_APR325L_5-5-2021

File : [Budget Information_OHIO_APR325L_5_5_2021.pdf](#)

SECTION C - Additional Information (See Instructions. Use as many pages as necessary.)

Title : Additional Information_OHIO_APR325L_5-5-2021

File : [Additional Information_OHIO_APR325L_5_5_2021.pdf](#)

BUDGET INFORMATION

File Name: Budget Information_OHIO_APR325L_5-5-2021

When Ohio submitted its application for this grant, the first budget period had an end date of June 30, 2021. However, when the grant was awarded from the US Department of Education, the budget period for this first grant year as 10/1/2020 – 9/30/2021. With this updated timeframe, Ohio fully expects to spend all of the Year One budgeted dollars.

The funded budget narrative and updates by section are provided below for Year 1 (Grant Award Date – June 30, 2021). **Ohio is requesting that the budget date range included in the application be adjusted to match the Grant Award Notice, with a Grant Year One start date of October 1, 2020 and an end date of September 30, 2021. Each item included in Grant Year One budget is listed below, with requested changes noted in red.**

Ohio is not making significant changes to its grant activities or budget at this time for either the current or next budget period.

Personnel:

- No personnel costs are requested in Year 1 of this budget.
- 15% of the Project Director and 20% of the Age 3 – Grade 3 Project Lead’s time will be contributed as in-kind (\$65,500/25% match). **No change**

Fringe Benefits:

- No fringe benefits are requested in Year 1 of this budget. **No change**

Travel:

- In order to have three Project Leads attend the two- and one-half day project directors’ conference in Washington, DC, we are requesting \$3,600. **As per funder, this budget item is no longer needed, therefore one change being requested is that this amount be made available to the learning experience platform and virtual technologies item under “other,” now that the first cohort is being planned entirely virtually.**

Equipment:

- No equipment costs are requested in Year 1 of this budget. **No change.**

Supplies:

- No supply costs are requested in Year 1 of this budget. **No change.**

Contractual:

- The projected cost for contractors to create the professional learning content in Year 1 across organizational partners is \$160,000. **No change, contracts in process.**

Construction:

- No construction costs are requested in Year 1 of this budget. **No change.**

Other:

- Website contribution for the hosting of the online learning modules and community of practice, as they are developed in Year 1; and other technologies that will be utilized for the virtual meetings of the Project Management Team and Project Advisory Board in Year 1 are expected to cost \$6,400. **Requesting to add the non-needed travel costs of \$3,600 here for a requested new total of \$10,000.**
- Design and printing for recruitment materials are expected to cost \$10,000 in Year 1. **No change.**

- Third-party evaluation supports are expected to cost \$10,000 in Year 1 for the development of the measures that will be used throughout Years 2 – 5. **No change, contract in progress.**

Participation Stipends:

- No participant stipends are requested in Year 1 of this budget. **No change.**

With total budgeted costs estimated at \$190,000 for Year One of the grant and the one requested change above , Ohio anticipates it will expend the full budget by September 30, 2021. Moreover, Ohio does not plan for any change in planned activities that would require a requested budget change for Year Two of the grant.

ADDITIONAL INFORMATION

File Name: Additional Information_OHIO_APR325L_5-5-2021

The Ohio Department of Education is partnering with the Ohio Department of Developmental Disabilities to oversee the activities of this grant. The Project Management Team, as identified in Ohio's grant application in Table 4, is fully engaged. No changes in those identified and participating have been needed. Furthermore, no changes are anticipated for the remainder of Year One or the upcoming Grant Year Two.

At this time, there are no changes needed to the grant activities, Project Director, or key personnel.

The status of Ohio's grant project has been provided in the Executive Summary.

| Table 4. Project Management Team Members Affiliation and Grant Roles | | | |
|---|-------------|---|--|
| Project Management Team | | | |
| Purpose: Administer grant funds and activities, including the development, deployment, implementation, evaluation, and reporting of the proposed project. | | | |
| Name | Affiliation | Title | Grant Role/Activities |
| Wendy Grove, PhD | ODE | Director, Office of Early Learning & School Readiness | Project Director Oversight & Reporting Lead |
| Nathan DeDino | DODD | Part C Coordinator Division on Policy and Strategic Planning | Project Lead: Birth – Age 3 Implementation |
| Sophia Hubbell | ODE | Assistant Director, Curriculum & Assessment, Office of Early Learning & School Readiness | Project Lead: Age 3 – Grade 3 Implementation |
| Diane Fox | DODD | EI Program Manger Division on Policy and Strategic Planning | Project Development & Deployment |
| Tiffany Madden, MA | DODD | Early Intervention Program Consultant-CSPD Division on Policy and Strategic Planning | Project Development & Deployment |
| Jody Beall, MSW | ODE | Assistant Director & IDEA 619 Coordinator, Office of Early Learning & School Readiness | Project Development & Deployment |
| Jo Hannah Ward, M. Ed., LPCC | ODE | Director, Office for Exceptional Children (Part B of IDEA) | Project Development & Deployment |
| Kathleen Herrmann, PhD, pHCLE | ODE | Certified Professional Human Capital Leader in Education, Education Program Specialist Office of Educator Effectiveness | Project Development & Deployment |
| Sarah Buoni, MEd | ODE | Education Program Specialist, Low Incidence Disabilities | Project Development & Deployment |
| Eben Dowell | ODE | Senior Research Analyst | Evaluation Advisor |

| | | | |
|-----------------------------------|-------|--|-----------------------------|
| | | Office of Research, Evaluation & Advanced Analytics | |
| Amy Haller | ODE | Financial Program Manager, Fiscal Services Office | Budget Advisor |
| Laurie Dinnebeil, PhD | UT | Distinguished University Professor and Daso Herb Chair, University of Toledo | Content Creation & Delivery |
| Jim Gay, PhD and Karel Oxley, PhD | BASA | Project Co-Directors, Ohio Leadership Advisory Council, Buckeye Association of School Administrators | Content Creation & Delivery |
| Shawn Henry and Laura Maddox | OCALI | Executive Director; Program Director, Center for the Young Child | Content Creation & Delivery |
| Lisa Hickman, PhD | OCECD | Executive Director, Ohio Coalition for the Education of Children with Disabilities | Content Creation & Delivery |