**State Performance Plan / Annual Performance Report: Part B**

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

**For reporting on   
FFY 2019**

**Colorado**

U.S. Department of Education seal

**PART B DUE   
February 1, 2021**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

In SY2019-20, Colorado was comprised of 67 Administrative Units (AUs), which served as Educational Service Agencies. The size of these AUs range from AUs that consist of a single school district to AUs that consist of more than 10 individual school districts. In Colorado, the AUs are considered the Local Educational Agency (LEA) for the purpose of administering the Individuals with Disabilities Education Act (IDEA) and are responsible for the provision of a Free and Appropriate Public Education (FAPE) to students with disabilities.  
  
The table below summarizes whether Colorado met the FFY2019 performance target for each indicator and if a slippage was detected.  
  
  
Summary of Indicator Targets and Slippage  
  
Indicator ………… Target Met? ………… Slippage?  
1 ……………………… No ……………………… No  
2 ……………………... Yes …………………...… No  
3B ………………….… NA ……………………… NA  
3C ………………….… NA ……………………… NA  
4A …………………… Yes ……………………… No  
4B …………………… Yes ……………………… No  
5A …………………… Yes ……………………… No  
5B …………………… Yes ……………………… No  
5C …………………… Yes ……………………… No  
6A …………………… Yes ……………………… No  
6B …………………… Yes ……………………… No  
7A1 …………………… No ……………………… Yes  
7A2 …………………… No ……………………… Yes   
7B1 …………………… No ……………………… Yes  
7B2 …………………… No ……………………… Yes  
7C1 …………………… No ……………………… Yes  
7C2 …………………… No ……………………… Yes  
8 ……………………… Yes ……………………… No  
9 ……………………… Yes ……………………… No  
10 ……………..……… Yes ……………………… No  
11 ……………………… No ……………………… Yes  
12 ……………………… No ……………………… Yes  
13 ……………………… No ……………………… No  
14A …………….……… No ……………………… Yes  
14B …………………… Yes ……………………… No  
14C ……….…………… No ……………………… No  
15 ………..…………… Yes ……………………… No  
16 ……………………… No ……………………… No

**Additional information related to data collection and reporting**

Due to COVID-19 pandemic, Colorado schools suspended all in-person instructions per Governor’s Executive Order in March 2020. This school closure impacted several indicators in the current SPP/APR submission;   
• Indicator 3B&C – The Spring 2020 state assessments were canceled, thus, there are no data to report.  
• Indicator 7 – The end-of-year checkpoint data were not collected at the end of SY2019-20. Instead of the end-of-year checkpoint data, the mid-year checkpoint data were used to calculate the exit scores for preschool children with IEPs. Consequently, all sub indicators showed slippages compared to the previous year.   
• Indicator 11 – The disruption of in-person instruction caused significantly more delays in initial evaluations than usual years.   
• Indicator 12 – The disruption of in-person instruction caused significantly more delays in C-to-B transitions than usual years.

**Number of Districts in your State/Territory during reporting year**

67

**General Supervision System**

**The systems that are in place to ensure that IDEA Part B requirements are met, e.g., monitoring, dispute resolution, etc.**

This section is submitted as an attachment.

**Technical Assistance System**

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

CDE consultants are available via email, telephone, and in person to address AU-specific requests for technical assistance (TA) as a part of the General Supervision System. In addition, the CDE provides a continuum of support to ensure the timely delivery of high quality support to AUs. The CDE provides varied levels of technical assistance.   
  
Universal Support   
Typically available for AUs that have demonstrated compliance with IDEA/ECEA regulations based on policies, procedures, and self-audits of student records. Examples of Universal Supports include, but are not limited to tools and resources on the website, conferences, and webinars.   
  
Targeted Support   
Typically for AUs that have demonstrated multiple areas of moderate need demonstrated over 12-18 months that are reflected in student achievement data as well as issues of noncompliance based on its self-audits of IEP-related documentation and performance on indicators. The AU’s specific area(s) of need are targeted through TA activities and interventions outlined in a plan developed by the AU with support and follow up from the CDE. Additional data on AU identified area(s) of need were collected, either through an on-site or desk audit of the AU data submission. Examples of Targeted Supports include but are not limited to side-by-side assistance, in-person professional learning, and tools and resources to analyze areas of concern.  
  
Intensive Support   
Typically for an AU that has an ongoing area of intense need or many areas of need that have not been addressed. Evidence includes student achievement data and/or results of self-audits regarding compliance and implementation of IDEA and ECEA regulations, verified by CDE record review. A Corrective Action Plan (CAP) is developed to address findings of noncompliance. The AU receives intensive support from the CDE (e.g., site visits, professional development, increased data reporting to the CDE in targeted area(s), virtual meetings, desk audit) to develop and implement the CAP. The CDE follows up with AUs regarding its CAP on a regular basis to ensure compliance and progress.

**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 students with disabilities.**

Colorado has a number of systems in place to ensure that educators and providers have the skills to work effectively with students with disabilities. Institutions of higher education in the state work closely with the CDE and the Department of Higher Education to ensure programs that cover the range of skills and knowledge required of teachers of students with disabilities. Fourteen (14) public and/or private four-year schools in Colorado offer undergraduate and/or graduate degrees and licensure programs in special education. There are currently five (5) BOCES approved by the CDE to offer alternate programs leading to licensure as a special education generalist.  
  
The CDE is responsible for the content review of all teacher preparation programs, both traditional and alternative, to ensure that any program seeking authorization or reauthorization meets the state standards defined in statute, State Board of Education rules and CDE policy and guidance. Initial approval and reauthorization are required for any institution offering educator preparation programs leading to endorsement in Colorado, including public and private institutions. The OSE works with the Educator Talent Licensing Office to review the content of any program that seeks to prepare teachers in special education and related fields. The process ensures that programs offered throughout the state meet the Performance Based Standards for Colorado Teachers and the endorsement related standards delineated in the Rules for the Administration of the Educator Licensing Act of 1991.  
  
Additionally, the CDE is actively engaged in the enhancement of skills and knowledge required of licensed educators currently working in the field. The OSE provided professional development in areas identified by teachers, related service providers, local Directors of Special Education, and OSE consultants. Informal surveys are conducted at least annually with Directors of Special Education who are asked to note topics for professional development required by their staff, which then are prioritized and offered to the field. Content specialists in the OSE provide ongoing professional development for educators and specialized service personnel in their respective disciplines.

**Stakeholder Involvement**

**The mechanism for soliciting broad stakeholder input on targets in the SPP, including revisions to targets.**

The 2013 - 2018 Colorado State Performance Plan (SPP) was drafted internally by team members from the CDE. Throughout the process, input was gathered from numerous internal CDE stakeholder groups, which included the Office of Learning Supports, the Office of Literacy, the Office of Early Learning & School Readiness, the Office of Student Assessments, the Federal Programs Unit, the Office of Accountability, the Office of District & School Performance Unit, and the Improvement Planning Unit. The OSE gathered input from these internal stakeholder groups to assist in developing SPP targets.   
  
Additionally, representatives from the following groups participated in various stages throughout the process: the Directors of Special Education from across the State, the Colorado Special Education Advisory Council (CSEAC), the Family, School & Community Partnering Community of Practice, Colorado’s Parents Training and Information (PTI) Center, Parents/families of students with disabilities, the Preschool Advisory Committee, Mountain Plains Regional Resource Center, representatives from the Higher Education Council in Colorado, Transition Coordinators, the Colorado Department of Human Services - Early Intervention Office, and DaSy.  
  
Input was provided by these stakeholder groups in a variety of methods, most commonly in the form of face-to-face discussions, planned meetings, and regularly scheduled meetings. Technology was also utilized to communicate via telephone, the CDE website, and email. The tasks requested of these groups were related to the development of a new State Performance Plan, such as reviewing and establishing baselines and targets, assisting in determining an appropriate State-identified Measurable Result for the State Systemic Improvement Plan, provide input regarding a coherent set of improvement activities, and input into the likely efficacy of the strategies proposed that will assist local Administrative Units and the OSE in improving outcomes for students with disabilities.   
  
<FFY2019 target update>  
Given the 1-year extension of the current SPP/APR, the CDE consulted with the state advisory panel, the Colorado Special Education Advisory Council (CSEAC). In addition, the CDE also sought input from the content-specific advisory boards (e.g., preschool advisory council for Indicator 6 and 7, secondary transition task force for Indicator 14) as well as an advisory group made up of AU directors of special education.

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

NO

**Reporting to the Public**

**How and where the State reported to the public on the FFY18 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 2018 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, including any revision if the State has revised the SPP that it submitted with its FFY 2018 APR in 2020, is available.**

Following the submission of the FFY2018 SPP/APR to the U.S. Department of Education, the CDE posted the FFY2018 performance of each AU on the following website:   
http://www.cde.state.co.us/cdesped/AUperformanceprofiles.asp   
A complete and final copy of the State’s SPP/APR was also posted on the following website:  
http://www.cde.state.co.us/cdesped/spp-apr

## Intro - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report FFY 2019 data for the State-identified Measurable Result (SiMR). Additionally, the State must, consistent with its evaluation plan described in Phase II, assess and report on its progress in implementing the SSIP. Specifically, the State must provide: (1) a narrative or graphic representation of the principal activities implemented in Phase III, Year Five; (2) measures and outcomes that were implemented and achieved since the State's last SSIP submission (i.e., April 1, 2020); (3) a summary of the SSIP’s coherent improvement strategies, including infrastructure improvement strategies and evidence-based practices that were implemented and progress toward short-term and long-term outcomes that are intended to impact the SiMR; and (4) any supporting data that demonstrates that implementation of these activities is impacting the State’s capacity to improve its SiMR data.  
  
The State's IDEA Part B determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance.  
The State must report, with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

**Response to actions required in FFY 2018 SPP/APR**

Technical Assistance Accessed by the State in SY2019-20  
In response to the States' Determination of Needs Assistance, we have accessed the following technical assistance.  
  
  
Results Driven Accountability  
TA sources  
• National Center for Systemic Improvement (NCSI)  
• IDEA Data Center   
• Office of Special Education Programs  
  
CO’s Action   
• NSCI provided samples of states’ monitoring self-assessments and the educational benefit reviews. Based on these, the Colorado General Supervision and Monitoring Team evaluated processes and components of states’ systems. A comprehensive comparison of models was developed and presented to Colorado leadership. A proposed framework was developed and the implementation of the work of developing a new Colorado monitoring and supervision Facilitated Self-Assessment including Education Benefit Review was begun in July, 2020 with internal stakeholders.  
• Given the TA from NCSI, the CDE refined the correction of noncompliance process to more closely follow OSEP memo 09-02.  
• Per IDEA Data Center’s on-going support with significant disproportionality (e.g., peer-to-peer exchange), Colorado developed various resources that help AUs prevent significant disproportionality, as well as tools that guide the AUs identified as significantly disproportionate through the remedy process (e.g., review of policy, practice, and procedure, root-cause analysis, comprehensive coordinated early intervening services).  
• Colorado submitted the FFY2018 SPP/APR after receiving TA from IDC and OSEP.  
  
  
Indicators 1, 2, 13, 14 (Graduation, Dropout, Transition Compliance, and Post School Outcomes)  
TA sources  
• National Technical Assistance Center on Transition (NTACT)  
  
CO’s Action   
• Support to setup a framework to increase students with disabilities’ access to career technical education (CTE) programs   
 o Developed a project that creates a partnership between CDE/ESSU and Colorado Community College System/CTE in Colorado to build a pipeline to career readiness success at the systemic level for students with disabilities engaged in CTE programming statewide with a focus on rural and underserved geographic areas of Colorado.  
 • Assembled a core planning team  
 • Developed an interest assessment for the field to determine interest in the project.   
 • Provided an informational webinar to provide information to individuals who expressed interest in the project.   
 • Set up meeting with NAPE discuss data dashboard and requirements for CDE.  
 • The core planning team will be assembled to review CTE data, identify potential pilot sites based on data analysis and AU interest, and begin working on the project proposal.  
 • Developed a proposal for submission to CDE leadership team.  
 • Identified pilot sites, and working with NAPE to prepare for implementation of project SY 2021-2022  
• Support and coaching on the postschool outcomes interview process  
 o Redesigned PSO interview protocol  
 o Used information to lead PSO stakeholder group discussions  
 o Designed and delivered PSO interview training to the field  
 o Designed website to include information provided by NTACT  
• Provided training and resources regarding COVID supports  
 o Webinar to provide support and resources to address needs in the field  
 o Offered office hours to discuss challenges  
 o Developed webpage to provide resources to the field  
• Provided training and supports on postsecondary goals for students with significant support needs  
 o Developed training webinar and resources to provide guidance on how to write postsecondary goals for students with significant support needs  
• Ongoing coaching and support for State Toolkit for Examining Post-School Success (STEPSS)  
 o Continued to support school districts who were in the implementation phase of STEPSS  
  
  
Indicator 3 and SSIP: (Academic Achievement)  
TA sources  
• State Implementation and Scaling-up of Evidence-based Practices (SISEP) (virtual & in-person)   
• Collaboration for Educator Effectiveness, Development, Accountability, and Reform (CEEDAR): Intensive Technical Assistance (virtual & in-person)   
• WestEd: Targeted technical assistance (virtual and in-person)   
  
CO’s Action   
• Updated Phase III of the SSIP (FFY 2019)   
• Utilized the SISEP Implementation Science frameworks to inform next steps in the SSIP   
• Continued syllabi review using the Innovation Configuration for K-5 Reading Instruction with Institutes of Higher Education and completed multiple crosswalks to literacy licensure standards to align programming to streamline professional learning between pre-service learning, new teacher learning, and professional learning.   
• Developed crosswalks between the four domains of rapid school turnaround, especially focusing on Leadership for Rapid Improvement and Instructional Transformation regarding students with disabilities.   
  
  
Indicator 6 & 7: (Preschool Settings and Skills)  
TA sources  
• Center for IDEA Early Childhood Data Systems (DaSy) Center for IDEA Early Childhood Data Systems (DaSy)  
• ECTA/DaSy Child Outcomes Local Data Use Cohort  
  
CO’s Action   
• Using the DaSy Center’s technical expertise, Colorado was able to work with assessment vendors to set their automatic conversion algorithms for Indicator 7 reporting  
• With help from the DaSy Center, Colorado redesigned its rubric/criteria used for selecting preschool assessments. Colorado subsequently was able to use the rubric/criteria to select vendors for preschool assessment list.  
• Through participation in the GOLD Learning Community, a peer learning community facilitated by DaSy, Colorado was able to stay abreast of assessment issues and consult with other states around Indicator 7 data patterns resulting from the GOLD assessment tool.  
• Colorado participates in the Teaching Strategies Special Education Council Convening to analyze thresholds GOLD uses to determine age-appropriate functioning of children assessed with the tool.  
• Through participation in the Child Outcomes Data Use Cohort, Colorado is able to work within the cohort with family and local administrative unit representatives to identify critical questions for Preschool Outcomes and promote data use in local communities.  
  
  
Indicator 8: (Parent Involvement)  
TA sources  
• IDEA Data Center  
  
CO’s Action   
• Colorado developed a new parent survey that measures and promotes parent involvement, as well as fulfills the CDE’s requirements for Indicator 8. The survey was developed with the help from the IDEA Data Center during SY2018-19 and was used to collect the data during SY2019-20.   
  
  
Dispute Resolution  
TA sources  
• The CDE participates in the TAESE Dispute Resolution quarterly conference calls for State Complaints Officers, Mediators and Due Process Hearing Officers/Administrative Law Judges. State Compliant Officers and SEA staff participate on the State Complaints call; SEA staff and contract mediators participate on the Mediators call; and, SEA staff and ALJs participate on the Due Process call.  
CO’s Action   
• Case law and professional resources are utilized by participants to assist in conducting effective and legally sound state complaint investigations, mediations, and due process hearings.   
  
Data Quality  
TA sources  
• IDEA Data Center  
• OSEP  
CO’s Action   
• IDC and OSEP’s data collection webinars have helped Colorado fulfill the federal data reporting requirements with high-quality data

## Intro - OSEP Response

The State's determinations for both 2019 and 2020 were Needs Assistance. Pursuant to section 616(e)(1) of the IDEA and 34 C.F.R. § 300.604(a), OSEP's June 25, 2020 determination letter informed the State that it must report with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State provided the required information.

## Intro - Required Actions

The State's IDEA Part B determination for both 2020 and 2021 is Needs Assistance. In the State's 2021 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2020 SPP/APR submission, due February 1, 2022, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

## Intro - State attachments



# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of youth with Individualized Education Programs (IEPs) graduating from high school 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 of Education (Department) under Title I of the Elementary and Secondary Education Act (ESEA).

**Measurement**

States may report data for children with disabilities using either the four-year adjusted cohort graduation rate required under the ESEA or an extended-year adjusted cohort graduation rate under the ESEA, if the State has established one.

**Instructions**

Sampling is not allowed.

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019), and compare the results to the target. Provide the actual numbers used in the calculation.

Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma and, if different, the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma. If there is a difference, explain.

Targets should be the same as the annual graduation rate targets for children with disabilities under Title I of the ESEA.

States must continue to report the four-year adjusted cohort graduation rate for all students and disaggregated by student subgroups including the children with disabilities subgroup, as required under section 1111(h)(1)(C)(iii)(II) of the ESEA, on State report cards under Title I of the ESEA even if they only report an extended-year adjusted cohort graduation rate for the purpose of SPP/APR reporting.

## 1 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2017 | 75.43% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 80.00% | 80.00% | 73.40% | 75.00% | 76.60% |
| Data | 54.63% | 53.78% | 57.24% | 75.43% | 74.12% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 78.20% |

**Targets: Description of Stakeholder Input**

Colorado’s Stakeholder Consultation and Engagement in State Plan Development:  
  
The Colorado Department of Education (CDE) recognizes that ongoing and meaningful stakeholder engagement is essential to the effective development and successful implementation of Colorado’s Every Student Succeeds Act (ESSA) state plan on behalf of Colorado students. CDE is committed to providing multiple avenues and opportunities for interested individuals and organizations to review the decision points, options, recommendations, and drafts and provide feedback throughout the design and development of Colorado’s ESSA plan. In addition, CDE is committed to making the stakeholder consultation and plan development process as meaningful and transparent as possible. These efforts included frequent and widely disseminated updates on the process, timelines, and opportunities to engage at different stages and levels of plan development.  
  
Colorado’s roadmap in support of effective stakeholder consultation included the following overarching strategies to promote engagement and participation opportunities: Building awareness and establishing a variety of communication channels with schools, districts, and the public through online and virtual engagement; Meeting with stakeholder groups throughout the plan development process, including, but not limited to: a statewide Listening Tour, participation opportunities in ESSA Committees, and multiple recurring meetings with critical education partners; Posting plan drafts and decision points for public input and comment prior to submission to USDE; Developing a formalized internal process to incorporate and address stakeholder feedback as appropriate; and Creating a system of continuous feedback to remove any barriers that could prevent broad, meaningful, and authentic engagement.  
  
Stakeholder Meetings and Engagement with Critical Partners through Plan Development:  
  
Concurrent with the development of an open and transparent online presence, the Department began planning for a multi-stage public input and stakeholder consultation effort to collect input and feedback on the components of the state plan at several stages and in various platforms throughout plan development. A statewide ESSA Listening Tour was a first step towards gathering broad and geographically diverse input and feedback from across the state on how Colorado should implement vital components of ESSA. Following the ESSA Listening Tour, the Department convened a Hub Committee and multiple spoke committees to begin reviewing and making recommendations on options to address ESSA state plan requirements. The committees used the Listening Tour feedback as a starting point for discussion and decision making. After recommendations and decisions were incorporated into state plan drafts, CDE circled back to the public by posting a draft plan for public review and comments. Through all steps, CDE consulted with critical education partners and the State Board of Education.  
  
In total, through formal and informal listening events, CDE engaged in discussion regarding ESSA with more than 1,500 people across Colorado. From these listening events, more than 3,800 comments were gathered. Participants in the Listening Tour sessions represented a wide range of demographics and included stakeholders from the State Board of Education, the Colorado Education Association, Colorado Association of School Boards, Colorado Association of School Executives, school and district administrators (including superintendents and district Board of Education members), school staff (principals, teachers, paraprofessionals, etc.), college and university administrators, parents, and members of the community including those representing nonprofit organizations, advocacy groups, advisory groups, and other interested parties. CDE also engaged with specific constituency groups and liaisons, such as Head Start, McKinney-Vento, Gifted Education State Advisory Committee, Youth Council, Arts360, Adult Education, the Colorado Special Education Advisory Committee, IDEA, and Native Americans, for their thoughts, ideas, and feedback. The conversation with our Native American constituents has led to larger conversations and consultation with Colorado tribal groups (See the section on “Native American Tribal Consultation” for more information on this process.).   
  
Additional information can be found at:  
http://www.cde.state.co.us/fedprograms/essa   
  
<FFY2019 target update>  
Colorado’s SPP/APR FFY2019 target aligns with Colorado’s ESSA plan.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2018-19 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696) | 07/27/2020 | Number of youth with IEPs graduating with a regular diploma | \*[[1]](#footnote-2) |
| SY 2018-19 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696) | 07/27/2020 | Number of youth with IEPs eligible to graduate | 6,398 |
| SY 2018-19 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec FS150; Data group 695) | 07/27/2020 | Regulatory four-year adjusted-cohort graduation rate table | 76.50% |

**FFY 2019 SPP/APR Data**

| **Number of youth with IEPs in the current year’s adjusted cohort graduating with a regular diploma** | **Number of youth with IEPs in the current year’s adjusted cohort eligible to graduate** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| \*1 | 6,398 | 74.12% | 78.20% | 76.50% | Did Not Meet Target | No Slippage |

**Graduation Conditions**

**Choose the length of Adjusted Cohort Graduation Rate your state is using:**

Extended ACGR

**If extended, provide the number of years**

7

**Provide a narrative that describes the conditions youth must meet in order to graduate with a regular high school diploma and, if different, the conditions that youth with IEPs must meet in order to graduate with a regular high school diploma. If there is a difference, explain*.***

Under Colorado law, “each school district board of education retains the authority to develop its own unique high school graduation requirements, so long as those local high school graduation requirements meet or exceed any minimum standards or basic core competencies or skills identified in the comprehensive set of guidelines for high school graduation developed by the state board pursuant to this paragraph.” 22-2-106(1)(a.5) C.R.S. There are no specific courses, or numbers of courses, required by the state’s graduation guidelines, and there are no legislated course requirements other than one course in Civics: “Satisfactory completion of a course on the civil government of the United States and the state of Colorado . . . shall be a condition of high school graduation in the public schools of this state.” 22-1-104 (3)(a) C.R.S.   
Youth with IEPs must meet the same requirements as youth without IEPs in order to graduate with a regular high school diploma.

**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 dropping out of high school. (20 U.S.C. 1416 (a)(3)(A))

**Data Source**

OPTION 1:

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

OPTION 2:

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

**Measurement**

OPTION 1:

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 left high school (ages 14-21) in the denominator.

OPTION 2:

Use same data source and measurement that the State used to report in its FFY 2010 SPP/APR that was submitted on February 1, 2012.

**Instructions**

Sampling is not allowed.

OPTION 1:

Use 618 exiting data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019). Include in the denominator the following exiting categories: (a) graduated with a regular high school diploma; (b) received a certificate; (c) reached maximum age; (d) dropped out; or (e) died.

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.

OPTION 2:

Use the annual event school dropout rate for students leaving a school in a single year determined in accordance with the National Center for Education Statistic's Common Core of Data.

If the State has made or proposes to make changes to the data source or measurement under Option 2, when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012, the State should include a justification as to why such changes are warranted.

Options 1 and 2:

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 2019 SPP/APR, use data from 2018-2019), and compare the results to the target.

Provide a narrative that describes what counts as dropping out for all youth and, if different, what counts as dropping out for youth with IEPs. If there is a difference, explain.

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2011 | 30.02% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 25.20% | 25.20% | 25.20% | 24.20% | 23.20% |
| Data | 25.43% | 23.02% | 23.62% | 22.13% | 22.17% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 23.20% |

**Targets: Description of Stakeholder Input**

Stakeholder input was gathered from a variety of meetings and in multiple contexts across the state. To better focus and coordinate efforts, CDE established and expanded a comprehensive Unit of Dropout Prevention and Student Engagement. This unit is made up of six programs and initiatives including Colorado Graduation Pathways, Expelled and At-Risk Student Services, Foster Care Education, School Counselor Corps, 21st Century Community Learning Center, and McKinney-Vento Education for Homeless Youth. Staff members of the Exceptional Student Services Unit have been active participants in the efforts of the Dropout Prevention Unit by the sharing of information, resources, and alignment of the Individual Career and Academic Plan (ICAP) requirements with current IEP activities and practices, development and dissemination of materials, cross-training, and facilitating involvement of special education providers at the local level. Input has been gathered from the Dropout Prevention Unit regarding dropout rate for students with disabilities and establishing rigorous and attainable targets.  
  
Another Stakeholder group that provided input to the targets was the Secondary Initiatives Collaborative Group which met monthly. This group provided essential feedback regarding dropout prevention for students with disabilities and input regarding appropriate targets for students with disabilities. The group consisted of the following CDE Divisions, Offices, and Units: Dropout Prevention and Engagement, Language Culture & Equity, Standards and Instructional Support, Achievement and Strategy, Accountability and Data Analysis, the Assessment Unit, Improvement Planning, Federal Programs, Learning Supports, Teaching & Learning, Postsecondary Readiness, Innovation & Choice, Online & Blended Learning, and Exceptional Student Services Unit (ESSU).  
  
State Directors of Special Education also participated in discussions regarding dropout data, as well as a special committee that had met for 4 years, entitled Reinventing Special Education. This group consisted of members from Higher Education, the Parent Training and Information Center (PEAK Parent), Colorado Special Education Advisory Committee (CSEAC), Mountain Plains Resource Center, Directors of Special Education, and the Exceptional Student Services Unit (ESSU). Additionally, stakeholders from the Colorado Special Education Advisory Committee met in November 2014 and reviewed previous dropout data. An explanation of how dropout rates are calculated was provided to stakeholders. Targets were discussed and input was recorded. Stakeholders are encouraged to see dropout rates decreasing after the collaborative work regarding dropout prevention.  
  
The Colorado Department of Education engaged L. Morgan (2014) to conduct a literature review to "provide an update to the dropout prevention best practices from around the country, in order to better address the goals of the Colorado Department of Education as outlined in the January, 2014 strategic plan (CDE, 2014)" (p. 3). Since we strongly believe that students with disabilities are general education students first, the work of the Dropout Prevention and Re-engagement Unit certainly applies to students with disabilities as we continue to break down the silos between general education and special education.  
  
Morgan (2014) states, "The intervention strategies chosen from the field will directly apply to these goals and provide educators, counselors, and administrators with effective ways of providing support for diverse groups of students around the state" (p. 3). The review is attached and available at: http://www.cde.state.co.us/cgpbestpracticeguide   
  
Citation: Morgan, L. (2014). Review of the literature in dropout prevention. Colorado Department of Education, USDE High School Graduation Initiatives Project. Denver, CO: Colorado Department of Education.  
  
<FFY2019 target update>  
Given the 1-year extension of the current APP/APR, the CDE consulted with the state advisory panel, the Colorado Special Education Advisory Council (CSEAC) as well as an advisory group consisted of local directors of special education to extend the FFY2018 target for the FFY2019. They all agreed that the extension of the FFY2018 target for the FFY2019 would be appropriate.

**Please indicate the reporting option used on this indicator**

Option 1

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 4,354 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (b) | 100 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (c) | 64 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (d) | 1,096 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education as a result of death (e) | 27 |

**FFY 2019 SPP/APR Data**

| **Number of youth with IEPs who exited special education due to dropping out** | **Total number of High School Students with IEPs by Cohort** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,096 | 5,641 | 22.17% | 23.20% | 19.43% | Met Target | No Slippage |

**Provide reasons for slippage, if applicable**

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

By Colorado law, a dropout is defined as a "person who leaves school for any reason, except death, before completion of a high school diploma or its equivalent, and who does not transfer to another public or private school or enroll in an approved home study program." A student is not a dropout if he/she transfers to an educational program recognized by the district, completes a High School Equivalency Diploma (HSED) or registers in a program leading to a HSED, is committed to an institution that maintains educational programs, or is so ill that he/she is unable to participate in a homebound or special therapy program. Students who reach the age of 21 before receiving a diploma or designation of completion (“age-outs”) are also counted as dropouts.

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

YES

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

In Colorado, students who are considered as "exited from special education due to drop out" include students whose district reported them as one of the following: Transfer to a Career or Technical Education Program, Discontinued Schooling/Dropped Out, Expulsion, GED Transfer, Student Received GED from Non-District Program in the Same Year. The difference between the two is that while some students may still be engaged in educational pursuits (e.g., GED) they are no longer receiving district provided special education services in their new setting, thus they are "exited from special education." However, if they return to school prior to their 21st birthday, their IEP could be reinstated through conducting an updated evaluation.

**Provide additional information about this indicator (optional)**

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3B: Participation for Students with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Indicator 3A – Reserved

B. Participation rate for children with IEPs

C. Proficiency rate for children with IEPs against grade level and alternate 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 FS185 and 188.

**Measurement**

B. 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. 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 3B: Provide separate reading/language arts and mathematics participation rates, inclusive of all ESEA grades assessed (3-8 and high school), for children with IEPs. Account for ALL children with IEPs, in all grades assessed, 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.

## 3B - Indicator Data

**Reporting Group Selection**

**Based on previously reported data, these are the grade groups defined for this indicator.**

| **Group** | **Group Name** | **Grade 3** | **Grade 4** | **Grade 5** | **Grade 6** | **Grade 7** | **Grade 8** | **Grade 9** | **Grade 10** | **Grade 11** | **Grade 12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall | X | X | X | X | X | X | X | X | X | X | X |

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Overall | 99.40% | Actual | 85.80% | 86.78% | 87.73% | 89.27% | 88.97% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Overall | 99.40% | Actual | 85.68% | 87.33% | 87.75% | 89.37% | 89.10% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Overall | 95.00% |
| Math | A >= | Overall | 95.00% |

**Targets: Description of Stakeholder Input**

**FFY 2019 Data Disaggregation from EDFacts**

**Include the disaggregated data in your final SPP/APR. (yes/no)**

YES

**Data Source:**

SY 2019-20 Assessment Data Groups - Reading (EDFacts file spec FS188; Data Group: 589)

**Date:**

**Reading Assessment Participation Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards |  |  |  |  |  |  |  |  |  |  |  |

**Data Source:**

SY 2019-20 Assessment Data Groups - Math (EDFacts file spec FS185; Data Group: 588)

**Date:**

**Math Assessment Participation Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards |  |  |  |  |  |  |  |  |  |  |  |

**FFY 2019 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 88.97% | 95.00% |  | N/A | N/A |

**FFY 2019 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 89.10% | 95.00% |  | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

Reporting of the Colorado Measures of Academic Success data in accordance with 34 CFR §300.160(f) can be found at:  
http://www.cde.state.co.us/assessment/cmas-dataandresults  
   
Performance results for Colorado’s Alternate Assessment (CoAlt), based on alternate standards can be found on the CDE’s website at:  
http://www.cde.state.co.us/assessment/newassess-coaltelam  
http://www.cde.state.co.us/assessment/newassess-coaltsss   
http://www.cde.state.co.us/cdesped/sped\_data under “Participation and Achievement in the State Assessments”  
  
Additional district or individual school information can be found at   
http://www.cde.state.co.us/schoolview

**Provide additional information about this indicator (optional)**

No data to report in this indicator due to the cancellation of the SY2019-20 state assessments under the COVID 19 pandemic.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

The State was not required to provide any data for this indicator. Due to the circumstances created by the COVID-19 pandemic, and resulting school closures, the State received a waiver of the assessment requirements in section 1111(b)(2) of the ESEA, and, as a result, does not have any FFY 2019 data for this indicator.

## 3B - Required Actions

# Indicator 3C: Proficiency for Students with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Indicator 3A – Reserved

B. Participation rate for children with IEPs

C. Proficiency rate for children with IEPs against grade level and alternate 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 EDFacts file specifications FS175 and 178.

**Measurement**

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level and 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)]. Calculate separately for reading and math. 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 reading/language arts and mathematics assessments (combining regular and alternate) for children with IEPs, in all grades assessed (3-8 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

**Reporting Group Selection**

**Based on previously reported data, these are the grade groups defined for this indicator.**

| **Group** | **Group Name** | **Grade 3** | **Grade 4** | **Grade 5** | **Grade 6** | **Grade 7** | **Grade 8** | **Grade 9** | **Grade 10** | **Grade 11** | **Grade 12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall | X | X | X | X | X | X | X | X | X | X | X |

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2011 | Target >= | 33.86% | 33.86% | 33.86% | 33.86% | 33.86% |
| **A** | Overall | 22.86% | Actual | 10.49% | 8.50% | 9.02% | 9.97% | 11.03% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2011 | Target >= | 30.95% | 30.95% | 30.95% | 30.95% | 30.95% |
| **A** | Overall | 19.95% | Actual | 8.02% | 6.92% | 7.11% | 7.38% | 7.71% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Overall | 33.86% |
| Math | A >= | Overall | 30.95% |

**Targets: Description of Stakeholder Input**

**FFY 2019 Data Disaggregation from EDFacts**

**Include the disaggregated data in your final SPP/APR. (yes/no)**

YES

**Data Source:**

SY 2019-20 Assessment Data Groups - Reading (EDFacts file spec FS178; Data Group: 584)

**Date:**

**Reading Proficiency Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs who received a valid score and a proficiency was assigned |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |

**Data Source:**

SY 2019-20 Assessment Data Groups - Math (EDFacts file spec FS175; Data Group: 583)

**Date:**

**Math Proficiency Data by Grade**

| **Grade** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a. Children with IEPs who received a valid score and a proficiency was assigned |  |  |  |  |  |  |  |  |  |  |  |
| b. IEPs in regular assessment with no accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| c. IEPs in regular assessment with accommodations scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |
| f. IEPs in alternate assessment against alternate standards scored at or above proficient against grade level |  |  |  |  |  |  |  |  |  |  |  |

**FFY 2019 SPP/APR Data: Reading Assessment**

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 11.03% | 33.86% |  | N/A | N/A |

**FFY 2019 SPP/APR Data: Math Assessment**

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 7.71% | 30.95% |  | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

Reporting of the Colorado Measures of Academic Success data in accordance with 34 CFR §300.160(f) can be found at:   
http://www.cde.state.co.us/assessment/cmas-dataandresults  
   
Performance results for Colorado’s Alternate Assessment (CoAlt), based on alternate standards can be found on the CDE’s website at:  
http://www.cde.state.co.us/assessment/newassess-coaltelam  
http://www.cde.state.co.us/assessment/newassess-coaltsss   
http://www.cde.state.co.us/cdesped/sped\_data under “Participation and Achievement in the State Assessments”  
  
Additional district or individual school information can be found at   
http://www.cde.state.co.us/schoolview

**Provide additional information about this indicator (optional)**

No data to report in this indicator due to the cancellation of the SY2019-20 state assessments under the COVID 19 pandemic.

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

The State was not required to provide any data for this indicator. Due to the circumstances created by the COVID-19 pandemic, and resulting school closures, the State received a waiver of the assessment requirements in section 1111(b)(2) of the ESEA, and, as a result, does not have any FFY 2019 data for this indicator.

## 3C - 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 districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs

(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 districts that meet the State-established n size (if applicable) that have a significant discrepancy in the rates of suspensions and expulsions for greater than 10 days in a school year of children with IEPs) divided by the (# of districts in the State that meet the State-established n size (if applicable))] times 100.

Include State’s definition of “significant discrepancy.”

**Instructions**

If the State has established a minimum n size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n size. If the State used a minimum n size requirement, report the number of districts 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 2019 SPP/APR, use data from 2018-2019), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions 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:

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

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

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

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts that met the minimum n 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 district with discrepancies had policies, procedures or practices that contributed to the significant discrepancy 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 the Office of Special Education Programs (OSEP) Memorandum 09-02, dated October 17, 2008.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for 2018-2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 4A - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 3.50% | 3.50% | 3.50% | 0.00% | 0.00% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 0.00% |

**Targets: Description of Stakeholder Input**

2016 Stakeholder Input:  
During the 16-17 school year, the Exceptional Student Services Unit (ESSU) at the Colorado Department of Education (CDE) facilitated discussions about updating the current thresholds in 4A & 4B with the following advisory groups: the Colorado School Mental Health Advisory Council (CO MH), the Positive Behavioral Intervention and Supports (PBIS) state leadership team at CDE, the Serious Emotional Disturbance (SED) stakeholder group, the Administrative Unit (AU) Special Education Directors’ Leadership Team (SDLT), and the Colorado Special Education Advisory Committee (CSEAC). Majorities from the CO MH, SDLT, and the CSEAC advisory groups supported the proposed changes, with cautions around state-wide impacts to school discipline such as the Claire Davis Act https://www.colorado.gov/pacific/cssrc/claire-davis-school-safety-act. The SED taskforce appreciated the plan to incorporate supports for AUs, and expressed concern about Special Education Directors’ abilities to impact building level administrator’s discipline practices. The PBIS leadership team supported a less rigorous threshold for monitoring purposes, but made a commitment to partner in supporting AUs.   
  
Based upon stakeholder feedback, the ESSU amended the original proposed changes to compare AU data to the state rate, which as a result would be more responsive to state-wide changes and legislation that may impact school discipline. A final proposal was provided to the AU Special Education Directors’ Leadership Team (SDLT), whereas they stated that they thought that the ESSU did a good job listening to the stakeholders as feedback was well-reflected in the finalized rules, the rules were reasonable, and changes to the thresholds would be enacted.  
  
Ind4A: AU’s >10-day suspension/expulsion rate is significantly discrepant from the state if its suspension/expulsion rate is more than 4 times of the state’s rate for 3 consecutive years (includes 3 annual data collections).  
  
The stakeholders also made a decision on Indicator 4B: AU has a significant discrepancy in their >10-day suspension/expulsion rates from the state by race if 1) 5 or more students of a particular racial category received >10-day suspension/expulsion, and that race’s suspension/expulsion rate was more than 4 times the state’s rate for 3 consecutive years; 2) the policies, practices, and procedures were found problematic.  
  
Previous Stakeholder Input:  
For the development of the 2013-2018 SPP, Stakeholder input was gathered from internal Colorado Department of Education stakeholder groups, including the ESSU and the Office of Learning Supports which includes the Multi-Tiered System of Supports (RtI & PBIS), and the Indicator 4 Team. Longitudinal data was analyzed and targets were proposed. Additionally, representatives from the following groups participated in reviewing data and targets: the Directors of Special Education, the Colorado Special Education Advisory Council (CSEAC), and the Family, School & Community Partnering Community of Practice. Input from stakeholders was recorded and the targets finalized.   
  
Stakeholders discussed multi-year data and consistent compliance for several years. Also discussed were improvement activities with a continued focused on improving school climate through implementing MTSS as a whole-school, data-driven, prevention-based framework for improving learning outcomes for every student through a layered continuum of evidence-based practices and systems.  
  
<FFY2019 target update>  
Given the 1-year extension of the current APP/APR, the CDE consulted with the state advisory panel, the Colorado Special Education Advisory Council (CSEAC) as well as an advisory group consisted of local directors of special education to extend the FFY2018 target for the FFY2019 for Ind4A. They all agreed that the extension of the FFY2018 targets for the FFY2019 would be appropriate.

**FFY 2019 SPP/APR Data**

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

NO

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of districts that have a significant discrepancy** | **Number of districts in the State** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 0 | 63 | 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))**

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

**State’s definition of “significant discrepancy” and methodology**

Colorado identifies an AU as having a “significant discrepancy” if an AU’s out-of-school greater-than-10-day suspension/expulsion rate is more than 4 times of the State's out-of-school greater-than-10-day suspension/expulsion rate for 3 consecutive school years.

**Provide additional information about this indicator (optional)**

Three AUs (2 correctional facilities and 1 mental-health facility) were excluded from the calculation of this indicator; they do not participate in the discipline data collection because they cannot suspend/expel the students in their facilities.

**Review of Policies, Procedures, and Practices (completed in FFY 2019 using 2018-2019 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.**

Colorado did not conduct the review of policies, procedures, and practices, because there was no AU identified as significantly discrepant.

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 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 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:

B. Percent of districts that have: (a) a significant discrepancy, 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 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 districts that meet the State-established n size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy 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 districts in the State that meet the State-established n 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 size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n size. If the State used a minimum n size requirement, report the number of districts 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 2019 SPP/APR, use data from 2018-2019), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions 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

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

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

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

Indicator 4B: Provide the following: (a) the number of districts that met the State-established n size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) the number of those districts in which policies, procedures or practices contribute to the significant discrepancy 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 district with discrepancies had policies, procedures or practices that contributed to the significant discrepancy 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 the Office of Special Education Programs (OSEP) Memorandum 09-02, dated October 17, 2008.

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

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for 2018-2019), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2016 | 0.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 0% |

**FFY 2019 SPP/APR Data**

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

YES

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

40

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts that have a significant discrepancy, by race or ethnicity** | **Number of those districts that have policies procedure, or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 0 | 0 | 23 | 0.00% | 0% | 0.00% | Met Target | No Slippage |

**Were all races and ethnicities included in the review?**

YES

**State’s definition of “significant discrepancy” and methodology**

Colorado identifies an AU as having a “significant discrepancy” if 1) 5 or more students of a particular racial category received >10-day out-of-school suspension/expulsion, and that race’s suspension/expulsion rate was more than 4 times of the state’s rate for 3 consecutive school years; 2) the policies, practices, and procedures contributed to the significant discrepancy. The seven federal racial categories (i.e., White, Hispanic, Black, Native Americans, Pacific Islanders, Asians, and Two or more Races) are examined.

**Provide additional information about this indicator (optional)**

Three AUs (2 correctional facilities and 1 mental-health facility) were excluded from the calculation of this indicator; they do not participate in the discipline data collection because they cannot suspend/expel the students in their facilities.

**Review of Policies, Procedures, and Practices (completed in FFY 2019 using 2018-2019 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.**

Colorado did not conduct the review of policies, procedures, and practices, because there was no AU identified as significantly discrepant.

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 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Findings of Noncompliance Verified as Corrected**

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

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

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

## 4B- Required Actions

# Indicator 5: Education Environments (children 6-21)

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Education environments (children 6-21): Percent of children with IEPs 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 EDFacts file specification FS002.

**Measurement**

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

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

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

**Instructions**

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

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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2005 | Target >= | 71.50% | 71.50% | 71.50% | 71.70% | 71.70% |
| A | 70.50% | Data | 72.82% | 73.62% | 73.56% | 74.69% | 75.46% |
| B | 2005 | Target <= | 7.30% | 7.30% | 7.30% | 7.30% | 7.20% |
| B | 8.50% | Data | 7.02% | 6.68% | 6.39% | 6.07% | 5.67% |
| C | 2005 | Target <= | 3.50% | 3.50% | 3.50% | 3.50% | 3.40% |
| C | 3.70% | Data | 2.51% | 2.37% | 2.35% | 2.32% | 2.42% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 71.70% |
| Target B <= | 7.20% |
| Target C <= | 3.40% |

**Targets: Description of Stakeholder Input**

During FFY 2012 multiple discussions took place regarding the least restrictive environment for students with disabilities. After stakeholder groups reviewed trend data and discussed current concerns, the targets were extended for this indicator through FFY 2018. Stakeholders included staff from the ESSU, the Office of Learning Supports, local special education directors, and the Colorado Special Education Advisory Committee (CSEAC).   
  
In Colorado, more than two-thirds of students with disabilities are served in the general education classroom for most of the day. The IEP Team takes into account each student’s individualized needs when making LRE decisions and the best setting is selected. Longitudinal data indicates a relatively high level of stability over time.  
  
<FFY2019 target update>  
Given the 1-year extension of the current APP/APR, the CDE consulted with the state advisory panel, the Colorado Special Education Advisory Council (CSEAC) as well as an advisory group consisted of local directors of special education to extend the FFY2018 target for the FFY2019. They all agreed that the extension of the FFY2018 targets for the FFY2019 would be appropriate.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | Total number of children with IEPs aged 6 through 21 | 94,247 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day | 72,398 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 5,020 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c1. Number of children with IEPs aged 6 through 21 in separate schools | 1,837 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c2. Number of children with IEPs aged 6 through 21 in residential facilities | 133 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements | 195 |

**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 2019 SPP/APR Data**

| **Education Environments** | **Number of children with IEPs aged 6 through 21 served** | **Total number of children with IEPs aged 6 through 21** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day | 72,398 | 94,247 | 75.46% | 71.70% | 76.82% | Met Target | No Slippage |
| B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 5,020 | 94,247 | 5.67% | 7.20% | 5.33% | Met Target | No Slippage |
| C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 2,165 | 94,247 | 2.42% | 3.40% | 2.30% | Met Target | No Slippage |

**Use a different calculation methodology (yes/no)**

NO

**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:** Preschool environments: Percent of children aged 3 through 5 with IEPs 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.

(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 EDFacts file specification FS089.

**Measurement**

Percent = [(# of children aged 3 through 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 aged 3 through 5 with IEPs)] times 100.

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

**Instructions**

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

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.

## 6 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2011 | Target >= | 85.50% | 85.50% | 85.75% | 86.00% | 86.25% |
| A | 84.18% | Data | 86.41% | 84.48% | 86.50% | 87.36% | 86.79% |
| B | 2011 | Target <= | 6.30% | 6.30% | 6.30% | 6.20% | 6.10% |
| B | 6.18% | Data | 5.36% | 5.21% | 3.45% | 3.91% | 3.77% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 86.80% |
| Target B <= | 3.80% |

**Targets: Description of Stakeholder Input**

Colorado is a national leader in inclusive practices for preschool children with disabilities. Since the inception of the preschool special education mandate, the primary model for providing FAPE, including access to the general curriculum, in the LRE for young children with disabilities in Colorado has been a blended preschool classroom approach. These blended classrooms include children from special education, the Colorado Preschool Program (CPP), Title I, Head Start and private pay tuition and may be established and supervised on public school property or as partnerships with private or Head Start Programs. Some sites place or maintain placement of preschoolers with disabilities in community settings on a child by child basis.   
  
The Colorado Preschool Special Education Advisory Committee and the Exceptional Student Services Unit met to establish targets. Knowing that Colorado stakeholders place a high value on inclusion, the research on the efficacy of inclusive preschool programming, and the benefits of providing services within the child’s daily routines were a part of the discussion related to new targets. The discussion also included topics related to inclusion, half day and full day preschool opportunities, the inclusion of Kindergarten students in this indicator, and the average number of students being served. The previous two years of data was reviewed and targets were finalized.  
  
<FFY2019 target update>  
Colorado Preschool Special Education Advisory Committee and the CDE met to establish targets for FFY2019. A consensus among the stakeholder group was that Colorado has advocated and achieved high rates of inclusion in early childhood. The next focus is the quality of the inclusion rather than the rates of inclusion. Stakeholders suggested and CDE agreed to set the FFY2019 targets to mirror our current Ind6A&B rates, while working on improving the quality of inclusion.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | Total number of children with IEPs aged 3 through 5 | 15,029 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | 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 | 13,137 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b1. Number of children attending separate special education class | 327 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b2. Number of children attending separate school | 152 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b3. Number of children attending residential facility | 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

**FFY 2019 SPP/APR Data**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 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 | 13,137 | 15,029 | 86.79% | 86.80% | 87.41% | Met Target | No Slippage |
| B. Separate special education class, separate school or residential facility | 479 | 15,029 | 3.77% | 3.80% | 3.19% | Met Target | No Slippage |

**Use a different calculation methodology (yes/no)**

NO

**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 2 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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A1 | 2013 | Target >= | 81.09% | 81.09% | 82.60% | 84.00% | 81.30% |
| A1 | 81.09% | Data | 81.34% | 80.85% | 80.44% | 75.32% | 76.16% |
| A2 | 2013 | Target >= | 67.76% | 67.76% | 69.50% | 71.20% | 67.76% |
| A2 | 67.76% | Data | 68.55% | 67.49% | 66.30% | 63.25% | 64.79% |
| B1 | 2013 | Target >= | 82.11% | 82.11% | 83.50% | 84.90% | 82.11% |
| B1 | 82.11% | Data | 80.62% | 80.06% | 80.62% | 78.87% | 79.16% |
| B2 | 2013 | Target >= | 69.34% | 69.34% | 71.10% | 72.80% | 69.34% |
| B2 | 69.34% | Data | 69.00% | 68.52% | 67.90% | 66.95% | 68.23% |
| C1 | 2013 | Target >= | 82.08% | 82.08% | 83.50% | 84.90% | 82.08% |
| C1 | 82.08% | Data | 77.97% | 74.89% | 78.19% | 67.56% | 75.87% |
| C2 | 2013 | Target >= | 72.12% | 72.12% | 73.80% | 75.40% | 72.12% |
| C2 | 72.12% | Data | 71.23% | 70.84% | 84.30% | 58.51% | 60.73% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1 >= | 81.30% |
| Target A2 >= | 67.77% |
| Target B1 >= | 82.12% |
| Target B2 >= | 69.35% |
| Target C1 >= | 82.09% |
| Target C2 >= | 72.13% |

**Targets: Description of Stakeholder Input**

We received consultation from the national DaSy Center, who advised us to use their Meaningful Differences Calculator, and consider realistically how long it might take to see movement in our targets as a result of improvement activities.   
  
We also consulted with the state Preschool Special Ed Advisory Council, Data Specialists in the ESSU, CDE Indicator 7 team members, and Colorado Preschool Program/Results Matter team members.  
  
In five of six summary statements (A1, A2, B1, B2, C2), we have observed overall downward trends in the last few years. For those summary statements, we extrapolated 2014 targets using a logarithmic trend line drawn from the last three years’ worth of observed data. We did not extrapolate using earlier data as the quality prior to 2011 was relatively poor.   
  
C1 target was not extrapolated since we have observed a smaller upward trend in the last few years and the same model did not fit.   
  
For the C1 2014 targets, we assumed the 2013 observed data.  
  
Targets for 2014-2016 will remain the same as we do not expect a significant change in outcomes resulting from our improvement activities until 2017. We used the DaSy Center’s Meaningful Differences Calculator, which calculates statistically significant differences between two values with a 10% confidence interval. 2017 targets were determined by calculating the threshold for statistically significant differences from 2014 extrapolated targets. N-size was assumed to grow at an annual rate of 1%.  
  
These targets seem ambitious yet realistic considering current national data trends and Colorado’s past performance in comparison to the nation, as well as continual improvements in inter-rater reliability among teachers. Targets were presented, discussed, and finalized at the CSEAC stakeholder meeting in November 2014.  
  
<FFY2019 target update>  
Due to the unexpected one-year extension of the current SPP/APR cycle, and the fact that we are not meeting targets in most Summary Statement indicators, Colorado decided to keep 2019 targets the same as in 2018. We consulted with, and received approval from, the Preschool Special Education Advisory Committee, the Results Driven Accountability Unit at the CO Department of Education and, Results Matter assessment specialists.

**FFY 2019 SPP/APR Data**

**Number of preschool children aged 3 through 5 with IEPs assessed**

4,475

**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 | 276 | 6.17% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 684 | 15.28% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 990 | 22.12% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,458 | 32.58% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,067 | 23.84% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 2,448 | 3,408 | 76.16% | 81.30% | 71.83% | 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. *Calculation: (d+e)/(a+b+c+d+e)* | 2,525 | 4,475 | 64.79% | 67.77% | 56.42% | 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 | 291 | 6.50% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 629 | 14.06% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 900 | 20.11% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,635 | 36.54% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,020 | 22.79% |

| **Outcome B** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation: (c+d)/(a+b+c+d)* | 2,535 | 3,455 | 79.16% | 82.12% | 73.37% | Did Not Meet Target | Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 2,655 | 4,475 | 68.23% | 69.35% | 59.33% | 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 | 337 | 7.53% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 718 | 16.04% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,158 | 25.88% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,541 | 34.44% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 721 | 16.11% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.  *Calculation:(c+d)/(a+b+c+d)* | 2,699 | 3,754 | 75.87% | 82.09% | 71.90% | Did Not Meet Target | Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.  *Calculation: (d+e)/(a+b+c+d+e)* | 2,262 | 4,475 | 60.73% | 72.13% | 50.55% | Did Not Meet Target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A1** | Due to the disruption of in-person learning in March 2020 due to COVID-19, the end-of-year checkpoint within Colorado’s assessment systems was suspended and data were not collected at the state level at the end of the 2019-20 school year. This impacted indicator 7 reporting as Colorado relies upon the algorithms within the assessment systems to calculate exit scores for preschool-aged children on IEPs. However, since Colorado also requires progress monitoring throughout the year, the mid-year checkpoint was able to be utilized to inform exit scores. Consequently, while slippage is seen on this outcome, children may have made additional gains beyond the mid-year checkpoint which were not recorded due to the suspension of the end-of-year checkpoint. |
| **A2** | Due to the disruption of in-person learning in March 2020 due to COVID-19, the end-of-year checkpoint within Colorado’s assessment systems was suspended and data were not collected at the state level at the end of the 2019-20 school year. This impacted indicator 7 reporting as Colorado relies upon the algorithms within the assessment systems to calculate exit scores for preschool-aged children on IEPs. However, since Colorado also requires progress monitoring throughout the year, the mid-year checkpoint was able to be utilized to inform exit scores. Consequently, while slippage is seen on this outcome, children may have made additional gains beyond the mid-year checkpoint which were not recorded due to the suspension of the end-of-year checkpoint. |
| **B1** | Due to the disruption of in-person learning in March 2020 due to COVID-19, the end-of-year checkpoint within Colorado’s assessment systems was suspended and data were not collected at the state level at the end of the 2019-20 school year. This impacted indicator 7 reporting as Colorado relies upon the algorithms within the assessment systems to calculate exit scores for preschool-aged children on IEPs. However, since Colorado also requires progress monitoring throughout the year, the mid-year checkpoint was able to be utilized to inform exit scores. Consequently, while slippage is seen on this outcome, children may have made additional gains beyond the mid-year checkpoint which were not recorded due to the suspension of the end-of-year checkpoint. |
| **B2** | Due to the disruption of in-person learning in March 2020 due to COVID-19, the end-of-year checkpoint within Colorado’s assessment systems was suspended and data were not collected at the state level at the end of the 2019-20 school year. This impacted indicator 7 reporting as Colorado relies upon the algorithms within the assessment systems to calculate exit scores for preschool-aged children on IEPs. However, since Colorado also requires progress monitoring throughout the year, the mid-year checkpoint was able to be utilized to inform exit scores. Consequently, while slippage is seen on this outcome, children may have made additional gains beyond the mid-year checkpoint which were not recorded due to the suspension of the end-of-year checkpoint. |
| **C1** | Due to the disruption of in-person learning in March 2020 due to COVID-19, the end-of-year checkpoint within Colorado’s assessment systems was suspended and data were not collected at the state level at the end of the 2019-20 school year. This impacted indicator 7 reporting as Colorado relies upon the algorithms within the assessment systems to calculate exit scores for preschool-aged children on IEPs. However, since Colorado also requires progress monitoring throughout the year, the mid-year checkpoint was able to be utilized to inform exit scores. Consequently, while slippage is seen on this outcome, children may have made additional gains beyond the mid-year checkpoint which were not recorded due to the suspension of the end-of-year checkpoint. |
| **C2** | Due to the disruption of in-person learning in March 2020 due to COVID-19, the end-of-year checkpoint within Colorado’s assessment systems was suspended and data were not collected at the state level at the end of the 2019-20 school year. This impacted indicator 7 reporting as Colorado relies upon the algorithms within the assessment systems to calculate exit scores for preschool-aged children on IEPs. However, since Colorado also requires progress monitoring throughout the year, the mid-year checkpoint was able to be utilized to inform exit scores. Consequently, while slippage is seen on this outcome, children may have made additional gains beyond the mid-year checkpoint which were not recorded due to the suspension of the end-of-year checkpoint. |

**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 Form (COS) process? (yes/no)**

NO

**If no, provide the criteria for defining “comparable to same-aged peers.”**

Colorado is one of a few states/territories who use their assessment publishers’ online systems to automatically produce OSEP progress categories and summary statements. Ratings are made on the tools’ standard objectives which have been cross walked with the Global Child Outcomes 1-3 (please refer to the ECTA Center’s Instrument Crosswalk for more detail at http://ectacenter.org/eco/pages/crosswalks.asp.)

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

The online system pulls Outcomes data from the assessment checkpoints corresponding to the preschool IEP entry and exit dates to produce each progress category. The Center for IDEA Data Systems (DaSy), in collaboration with assessment publisher researchers and the Colorado Department of Education, have established cut points that are carefully calibrated to reflect children in each progress category. In 2018-2019, 98% of children in the Indicator 7 report had an exit assessment from Teaching Strategies GOLD® while 2% had an exit assessment from HighScope COR Advantage.

**Provide additional information about this indicator (optional)**

The targets for FFY2017 are incorrectly shown in the table above.   
The correct targets are:  
A1 = 81.09%  
A2 = 67.76%  
B1 = 82.11%  
B2 = 69.34%  
C1 = 82.08%  
C2 = 72.12%

## 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 2 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.

Include the State’s analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services. States should consider categories such as race and ethnicity, age of the student, disability category, and geographic location in the State.

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

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

## 8 - Indicator Data

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

**Targets: Description of Stakeholder Input**

In May 2011, the CDE brought together a stakeholder group tasked with defining parent involvement in the context of Indicator 8. The stakeholder group included school and district based educational practitioners, representatives from the Parent Training and Information Center, parents of students with disabilities, and state department of education personnel. The meeting was facilitated by the Mountain Plains Regional Resource Center.  
The stakeholder group defined parent involvement as follows:  
In Colorado using the term family emphasizes all primary caretakers, not only parents, who perform essential parental functions in a student's life and also includes the students (Lines, Miller, & Arthur-Stanley, 2011).  
Family involvement for improving services and results for children with disabilities means that:  
• Students are the center of all problem-solving.  
• Family input is actively sought and valued.  
• Representation of families from diverse backgrounds is evident at all levels of decision-making at the school and district level.  
• All families and stakeholders (e.g., educators, other school staff, administrators, community members, etc.) have access to relevant and useful information in a variety of formats, e.g., meetings, phone calls, emails, interpreted language.  
• Effective, ongoing relationships between families and schools are based on mutual trust, respect and acceptance.  
• Families and professionals seek to understand and use the different perspectives and experiences they bring to the table.  
As a result of this definition, a new survey was developed to better measure Indicator 8 and a new baseline was established for FFY 2011. Based on the analyses of the survey results the survey was adjusted from the original yes/no (i.e., all or nothing) response, to a Likert-based measure. These adjustments were based upon expert consultation outside of the department, input from the ESSU, the Community of Practice for Family, School, and Community Partnerships, and a representative from Colorado's PTI, the PEAK Parent Center and the Indicator 8 Team.  
  
<FFY2019 target update>  
Given the 1-year extension of the current APP/APR, the CDE consulted with the state advisory panel, the Colorado Special Education Advisory Council (CSEAC) as well as an advisory group consisted of local directors of special education to extend the FFY2018 target for the FFY2019. They all agreed that the extension of the FFY2018 target for the FFY2019 would be appropriate.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2006 | 41.90% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 52.00% | 54.00% | 56.00% | 58.00% | 60.00% |
| Data | 62.80% | 65.29% | 66.06% | 71.37% | 77.79% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 60.00% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1,237 | | 1,416 | 77.79% | 60.00% | 87.36% | Met Target | No Slippage |

**The number of parents to whom the surveys were distributed.**

6,752

**Percentage of respondent parents**

20.97%

**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.**

Colorado uses one type of survey for parents of all grade levels including parents of preschool children. Before the start of the survey, Colorado randomly samples parents of students whom we ask to participate in the survey. The pool of students includes both preschool and school-age children. Thus, parents of preschool children and parents of school-age children have an equal chance of being selected in the survey sample. In fact, FFY 2019 survey respondents included 165 parents of preschool children, which corresponded to 11.6% of survey respondents. Since preschool students accounted for 10.1% of students with disabilities in Colorado, preschool parents’ voice was well-represented in the survey results.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used? | YES |
| If yes, has your previously-approved sampling plan changed? | NO |

**Describe the sampling methodology outlining how the design will yield valid and reliable estimates.**

A stratified sampling was used, with AU being the stratum. Then, a random sample was drawn from each AU. AUs received a list of 100 randomly chosen students to survey their parents, except for the largest 4 AUs which received a list of 200 students instead. This method makes it possible to reduce sample size required to achieve randomness, while making the proportionate representation in the sample more likely. It also ensures that the department hears from parents from each AU.

| **Survey Question** | **Yes / No** |
| --- | --- |
| Was a survey used? | YES |
| If yes, is it a new or revised survey? | YES |
| If yes, provide a copy of the survey. |  |
| The demographics of the parents responding are representative of the demographics of children receiving special education services. | 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.**

We are currently considering a new administration process of the parent survey that aligns better with our monitoring process. We hope to address the issue of representativeness in the design of this new process.  
While this process is being developed, we will use the following strategies to increase our parent survey response rates to be representative of their demographics:  
1. CDE’s Special Education Specialists and Directors will follow up individually with the AUs that need to increase their parent survey return rates, especially of the under-represented groups.  
2. CDE will use its Special Education Director Mentors to make sure all new Directors of Special Education understand the importance of increasing the parent survey responses and using the data to improve better outcomes for students.  
3. CDE will engage our State Special Education Advisory Committee (CSEAC) members to work with local Special Education Advisory Committees (SEAC) to communicate the importance of completing the parent survey. CSEAC will help us create a “Communication Blitz” through our Parent Training and Information Center (PTI), state conferences, and by working with other Parent Centers in Colorado to distribute flyers on the importance of completing the Parent Surveys.  
4. We will utilize Directors of Special Education from AUs that have outstanding parent survey return rates, to explain to other Directors of Special Education, especially of AUs with large population of the under-represented groups, the importance of the parent data and how to use the data to improve outcomes for students with disabilities.

**Include the State’s analyses of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.**

The following demographic categories were examined for their representativeness in the parent survey: child’s gender, child’s race/ethnicity, child’s disability, child’s grade, and attending AUs’ geographic region within the state. The chart below summarizes the results of the representativeness analysis. When the demographic group’s representation in the special education population and representation among the survey respondents were greater than ±3%, the representativeness was considered inadequate.   
The demographic categories that were not well-represented among the survey respondents were race/ethnicity and geographic region. Hispanic or Latino parents were underrepresented among the survey respondents, which together with non-significant underrepresentation of other minority groups, lead to the overrepresentation of White parents. Denver metro AUs had extremely poor survey responses, which lead to the overrepresentation of other regions including North Central, Northwest, and Pikes Peak. Denver metro AUs has the highest enrollment of students with disabilities who are Black and Hispanic in the state. The poor participation from the Denver metro districts’ parents seemed to have exacerbated the poor representation of the region as well as of Black and Hispanic racial categories.  
  
Category ------------------------– Population Representation –-- Survey Respondents –-- ±Difference –-- Representative (±3%)?  
  
Child’s Gender   
Male …………………………………………………………. 65.6% …………..………… 66.1% …………...... 0.50% …….……… Yes  
Female ……………………………………………………… 34.4% …………….………. 33.9% ………..…... -0.50% ………….… Yes  
  
Child’s Race/Ethnicity   
American Indian or Alaska Native …….........… 1.0% ………………………. 0.6% ………..…... -0.36% …….……… Yes  
Asian …………………………………………………………. 1.8% ………………………. 1.3% ………..…... -0.54% …….……… Yes  
Black or African American …………………………. 5.3% ………………………. 2.6%……............ -2.66% …….……… Yes  
Hispanic or Latino ……………………………….…... 37.5% …………...….…… 33.4% ....….....….. -4.12% …….….…… No  
Native Hawaiian or Other Pacific Islande....... 0.2% ………………………. 0.0% ….….....….. -0.18% …….……… Yes  
Two or More Races ……………………………….…… 4.4% ………………………. 4.2% .……...….... -0.18% …….……… Yes  
White …………………………………………………….... 49.9% …………...……..…. 57.9% …..…...…... 8.06% …….….…… No  
  
Child’s Disability   
Autism Spectrum Disorder …………..…………… 7.9% …………………….… 8.6% …….…......... 0.70% …….……… Yes  
Deaf/Blind …………………………………….…………… 0.0% …………………….… 0.1% …………...... 0.04% …….……… Yes  
Developmental Delay ………………………………. 10.9% ……….….…..….… 10.8% ………..…... -0.11% …….……… Yes  
Hearing Impairment ……………………………..…... 1.3% …………………….… 2.6% …………...... 1.29% …….……… Yes  
Intellectual Disability ……………………….…..…….. 2.0% …………………….… 2.0% …………...... 0.02% …….……… Yes  
Multiple Disability ………………………….…………… 3.5% …………………….… 4.2% …………...... 0.60% …….……… Yes  
Other Health Impairment ………..………………. 11.2% …………….….….… 10.8% …………..... -0.41% …………… Yes  
Orhtopedic Impairment …………………………….. 0.4% …………………….… 0.2% …………..... -0.18% …….……… Yes  
Serious Emotional Disability ………………………. 5.2% …………………….… 3.4% …………..... -1.74% …….……… Yes  
Specific Learing Disability ………………………... 38.6% …………….….….… 35.6% …………..... -2.96% …….……… Yes  
Speech or Language Impairment ...………….. 18.3% ……………..…….… 20.2% …………...... 1.94% …….……… Yes  
Traumatic Brain Injury …………………………..…... 0.4% …………………….… 0.5% …………....... 0.06% …….……… Yes  
Visual Impairment …………………………….……….. 0.3% …………………….… 1.1% …………....... 0.75% …….……… Yes  
  
Child’s grade (as of December 2018)  
Preschool ………………………………………………..… 10.1% ……………………… 11.6% …………...... 1.50% …….……… Yes  
Half-day Kindergarten …………………………….…... 1.3% ………………………. 1.1% …………...... -0.20% …….……… Yes  
Full-day Kindergarten …………………………..……… 5.3% ………………………. 5.2% …………...... -0.06% …….…...… Yes  
Grade 1 …………………………………………………...…… 6.8% ………………………. 8.0% …………...... 1.25% …….……… Yes  
Grade 10 …………………………………………………..….. 6.9% ………………………. 6.5% …………..... -0.35% …….……… Yes  
Grade 11 …………………………………………………….... 5.9% ………………………. 5.6% …………..... -0.27% …….……… Yes  
Grade 2 ……………………………………………………….. 7.3% ………………….…. 10.0% …………...... 2.69% …….………. Yes  
Grade 3 ……………………………………………………… ..7.9% ………………………. 8.3% …………....... 0.39% …….……… Yes  
Grade 4 ………………………..……………………………....8.5% ………………………. 8.4% …………...... -0.12% …….……… Yes  
Grade 5 ………………………………………………..……… 8.7% ………………………. 8.2% …………...... -0.44% …….……… Yes  
Grade 6 ……………………………………………….....…… 8.4% ………………………. 7.4% …………...... -1.04% …….……… Yes  
Grade 7 ……………………………………………………..… 8.0% ………………………. 8.0% …………...... -0.02% …….……… Yes  
Grade 8 ……………………………………………………..… 7.6% ………………………. 5.8% …………...... -1.78% …….……… Yes  
Grade 9 ……………………………………………………..… 7.4% ………………………. 5.8% …………...... -1.53% …….……… Yes  
  
Region  
Denver Metro …………………………………….……… 52.6% …………………....... 20.8% ......………. -31.79% …….....… No  
North Central …………………….……………………… 13.8% ……….….…………... 26.6% ……………. 12.81% ……...…… No  
Northeast …………………………….……………………… 2.1% ….……………………. 3.2% ..…...……….. 1.13% …….……… Yes  
Northwest …………………………………………………… 3.7% ….…………………... 12.7% ……...………. 8.96% …….…..… No  
Pikes Peak ……………………………….………………… 17.2% ……………………... 21.6% ……...………. 4.42% …….……… No  
Southeast …………………………………….……………… 1.6% ………………………. 4.5% …………….…. 2.93% …….…...… Yes  
Southwest …………………………………………………… 2.8% ………………………. 4.3% …………….…. 1.45% …….……… Yes  
West Central ……………………………………..………… 4.8% ………………………. 4.8% ……...…….… -0.01% …….……… Yes  
Other (online, multi-site charter) …..……....…… 1.5% ….……………………. 1.5% ….…..…….…. 0.09% …….……… Yes

**Provide additional information about this indicator (optional)**

The survey is distributed in English and Spanish.

## 8 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether its FFY 2019 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

**Response to actions required in FFY 2018 SPP/APR**

These requirements are addressed in the FFY2019 submission of Indicator 8.

## 8 - OSEP Response

## 8 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether its FFY 2020 data are from a response group that is representative of the demographics of children receiving special education services, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the demographics of the parents responding are representative of the demographics of children receiving special education services.

## 8 - State Attachments



# 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 FFY 2018, 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, etc. 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 2019 reporting period (i.e., after June 30, 2020).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of 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, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 9 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 1.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 0% |

**FFY 2019 SPP/APR Data**

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

YES

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

3

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial and ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 0 | 0 | 64 | 0.00% | 0% | 0.00% | Met Target | No Slippage |

**Were all races and ethnicities included in the review?**

YES

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

1) the calculation method(s) being used: Weighted risk ratio method  
2) the threshold at which disproportionate representation is identified: 3.0 and above  
3) The number of years of data used in the calculation: 1 year  
4) minimum cell and/or n-sizes:  
minimum cell (risk numerator) size = 10  
minimum n (risk denominator) size = 30  
  
Three AUs (2 correctional facilities and 1 mental-health facility) were excluded from the calculation of this indicator due to not meeting the minimum n-size in any of the racial categories.

**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.**

None of the AUs exceeded the weighted risk ratio threshold while meeting the minimum cell/n-sizes, thus, none was investigated for inappropriate identification for Indicator 9 purposes.

**Provide additional information about this indicator (optional)**

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

## 9 - Required Actions

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

Based on its review of the 618 data for FFY 2019, 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, etc. 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 2019 reporting period (i.e., after June 30, 2020).

**Instructions**

Provide racial/ethnic disproportionality data for all children aged 6 through 21 served under IDEA, aggregated across all disability categories.

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of 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, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 10 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 1.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 0% |

**FFY 2019 SPP/APR Data**

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

YES

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

4

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 0 | 0 | 63 | 0.00% | 0% | 0.00% | Met Target | No Slippage |

**Were all races and ethnicities included in the review?**

YES

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

1) the calculation method(s) being used: Weighted risk ratio method  
2) the threshold at which disproportionate representation is identified: 3.0 and above  
3) the number of years of data used in the calculation: 1 year  
4) minimum cell and/or n-sizes  
minimum cell (risk numerator) size = 10  
minimum n (risk denominator) size = 10  
  
Four AUs (2 correctional facilities, 1 mental-health facility, and 1 school for deaf and blind) were excluded from the calculation of this indicator due to not meeting the minimum cell/n-size.

**Describe how the State made its annual determination as to whether the disproportionate overrepresentation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification.**

None of the AUs exceeded the weighted risk ratio threshold while meeting the minimum cell and n-sizes, thus, none was investigated for inappropriate identification for Indicator 10 purposes.

**Provide additional information about this indicator (optional)**

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **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 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

## 10 - Required Actions

# Indicator 11: Child Find

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Child Find

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

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

**Data Source**

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

**Measurement**

a. # of children for whom parental consent to evaluate was received.

b. # of children whose evaluations were completed within 60 days (or State-established timeline).

Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

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

**Instructions**

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

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

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

Targets must be 100%.

Provide detailed information about the timely correction of 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, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 84.60% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.90% | 97.91% | 98.00% | 98.03% | 98.39% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 17,624 | 16,867 | 98.39% | 100% | 95.70% | Did Not Meet Target | Slippage |

**Provide reasons for slippage**

Due to COVID 19 pandemic, Colorado schools suspended all in-person instructions per Governor’s Executive Order in March 2020. This COVID-related school-building closures throughout the state caused the slippage in the number of evaluations completed on-time from SY2018-19 to SY2019-20. We had 614 children whose evaluations were delayed due to COVID-related school-building closures. If it were not for COVID, our Indicator 11 rate could have been 99% compliant – comparable to historical rates.

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

757

**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.**

Out of the 757 children whose evaluations were not completed within the timeline, the shortest number of days beyond the timeline was 1 day and the longest was 139 days. The median number of days beyond the timeline was 16 days.  
  
757 children’s evaluations were delayed due to:  
• Additional evaluations or special valuations were needed  
• Staff missed the timeline  
• COVID-related school closures  
• Moved into the district after the evaluation was initiated in another district, yet the evaluation was never completed  
• Mutual written agreement extending time for SLD identification, yet evaluation was never completed  
• Other no valid reasons (e.g., weather/school cancellation, no personnel were available for evaluation)

**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.**

Data for Indicator 11 are reported by every AU through the online Special Education End-of-Year data collection. The data elements and definitions with the relevant information for Indicator 11 are defined as: Date of Parental Consent to Evaluate, Date Evaluation Completed, and Reason for Delay in Completing the Evaluation.  
AUs report data for all children for whom Parental Consent to Evaluate have been received. When the evaluation is not completed within 60 calendar days, a reason for delay must be provided.

**Provide additional information about this indicator (optional)**

Due to COVID 19 pandemic, the CDE provided the following guidance to AUs regarding initial evaluations:  
  
Q1: Are the timelines for initial evaluations waived due to the suspension of in person learning?  
  
At this time, there are no waivers for initial evaluation timelines. As a result, AUs are encouraged to complete evaluations that do not require face-to-face assessment in a timely manner. Schools and parents may also work together to reach mutually agreeable extensions of time to allow for the completion of a sufficiently comprehensive initial evaluation for which a face-to-face assessment is necessary. Any agreement to extend the timeline for the completion of the initial evaluation should be well documented by the AU and shared with the parent.  
If the child’s parents do not agree to an extension, the IEP team may convene virtually to review the existing evaluation data. The IEP team may then determine if there is sufficient evaluation data to make an eligibility decision. If sufficient data exists, the IEP team should make a determination, and, if the child qualifies, develop an IEP. If there is insufficient evaluation data to make a determination, the IEP team will be unable to determine eligibility at this time. The AU may need to seek consent for an initial evaluation when school building operations return to normal at a future date. The CDE will work with both AUs and other educational stakeholders to develop specific guidance around procedures for ensuring the completion of sufficiently comprehensive initial evaluations when it is not feasible due to measures required to protect the health and safety of students and school staff.  
  
http://www.cde.state.co.us/cdesped/special\_education\_faqs   
Special Education Evaluations Q1  
  
In response to the pandemic, the CDE added a delay reason code of “COVID-related school closures” to the data collection. This addition made it possible for AUs to report the initial evaluation records that were delayed due to the COVID-related school closures. These delays were considered non-compliant and included in the Indicator 11 reporting as “not on-time.”  
  
In addition to the formal Q&A guidance document from the CDE, we supported the practitioners in the field by:   
• Providing disability specific evaluation resources   
• Holding office Hours focused on evaluations during COVID-19  
• Practical Strategies for Special Education Evaluations during COVID-19 Webinar  
• Consulting with districts individually on their process for special education evaluations during COVID-19  
• Held regional meetings for each of the eight regions that provided resources and support, which included special education evaluations during COVID-19

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 31 | 31 | 0 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The previously noncompliant Administrative Units (AUs) submitted 2.5-months-worth of initial evaluation records that took place since the noncompliance was found. The CDE then reviewed a part of the newly submitted data via desk audit and verified that all children reported during the timeframe were evaluated within the timeline. By reviewing and verifying the updated data, CDE ensured that the AUs were correctly implementing the regulatory requirements related to Indicator 11.

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

The CDE verified that each individual case of noncompliance was corrected by having AUs that failed to meet compliance with Indicator 11 follow the below process:  
1. AUs received a pre-populated Indicator 11 Demonstration of Correction tracking form which lists each case of delayed initial evaluation record.  
2. AUs verified/reported the reason for the delay.  
3. If the IEP was finalized more than 90 days following the parental consent, AUs reported how they addressed the delay of services to ensure FAPE.  
 a. If the AU did not address the delay and the student was still within the AU, then the AU reported how it planned to address the delay of services to ensure FAPE.  
4. The CDE conducted a desk audit of the Indicator 11 Correction Trackers submitted by every noncompliant AU. The CDE reviewed and verified that each individual case of noncompliance was corrected and informed the AUs of the results.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 32 | 32 | 0 |
| FFY 2016 | 1 | 1 | 0 |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

The 32 previously noncompliant Administrative Units (AUs) submitted 2.5-months-worth of initial evaluation records that took place since the noncompliance was found. The CDE then reviewed a part of the newly submitted data via desk audit and verified that all children reported during the timeframe were evaluated within the timeline. By reviewing and verifying the updated data, CDE ensured that the AUs were correctly implementing the regulatory requirements related to Indicator 11.

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

The CDE verified that each individual case of noncompliance was corrected by having AUs that failed to meet compliance with Indicator 11 follow the below process:  
1. AUs received a pre-populated Indicator 11 Demonstration of Correction tracking form which lists each case of delayed initial evaluation record.  
2. AUs verified/reported the reason for the delay.  
3. If the IEP was finalized more than 90 days following the parental consent, AUs reported how they addressed the delay of services to ensure FAPE.  
 a. If the AU did not address the delay and the student was still within the AU, then the AU reported how it planned to address the delay of services to ensure FAPE.  
4. The CDE conducted a desk audit of the Indicator 11 Correction Trackers submitted by every noncompliant AU. The CDE reviewed and verified that each individual case of noncompliance was corrected and informed the AUs of the results.

**FFY 2016**

**Findings of Noncompliance Verified as Corrected**

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

Since this 1 AU was found noncompliant in FFY2016, the AU went through a corrective action plan which included a number of requirements such as trainings and additional data reporting. This AU submitted new initial evaluation records that took place since the noncompliance was found as part of the corrective action plan during FFY2019. The CDE then reviewed this newly submitted data via desk audit and verified that all children reported during the timeframe were evaluated within the timeline. By reviewing and verifying the updated data, CDE ensured that the AU was correctly implementing the regulatory requirements related to Indicator 11.

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

The CDE verified that each individual case of noncompliance was corrected by having the AU follow the below process:  
1. The AU received a pre-populated Indicator 11 Demonstration of Correction tracking form which lists each case of delayed initial evaluation record.  
2. The AU verified/reported the reason for the delay.  
3. If the IEP was finalized more than 90 days following the parental consent, the AU reported how they addressed the delay of services to ensure FAPE.  
 a. If the AU did not address the delay and the student was still within the AU, then the AU reported how it planned to address the delay of services to ensure FAPE.  
4. The CDE conducted a desk audit of the Indicator 11 Correction Tracker submitted by the AU. The CDE reviewed and verified that each individual case of noncompliance was corrected and informed the AU of the results.

## 11 - Prior FFY Required Actions

OSEP notes that the State described one AU as having longstanding noncompliance that is systemic. However, the State did not report any AU as having findings of noncompliance identified prior to FFY 2017 that were not yet verified as corrected. Therefore, the State needs to explain the reference to longstanding noncompliance.

**Response to actions required in FFY 2018 SPP/APR**

As submitted to OSEP during the clarification period of SPP/APR FFY2018, Colorado omitted to report 1 AU as “Findings Not Yet Verified as Corrected” under “Correction of Findings of Noncompliance Identified Prior to FFY2017” in the SPP/APR FFY2018. This AU was found noncompliant in FFY2016. Since then, the AU went through a corrective action plan which included a number of requirements such as trainings and additional data reporting. In order for the CDE to verify that the source of noncompliance is correctly implementing the regulatory requirements, the AU submitted new initial evaluation records that took place since the noncompliance was found as part of the corrective action plan during FFY2019. The CDE then reviewed this newly submitted data via desk audit and verified that all children reported during the timeframe were evaluated within the timeline. By reviewing and verifying the updated data, CDE ensured that the AU was correctly implementing the regulatory requirements related to Indicator 11.  
  
In addition, the CDE verified that each individual case of noncompliance was corrected by having the AU follow the below process:  
1. The AU received a pre-populated Indicator 11 Demonstration of Correction tracking form which lists each case of delayed initial evaluation record.  
2. The AU verified/reported the reason for the delay.  
3. If the IEP was finalized more than 90 days following the parental consent, the AU reported how they addressed the delay of services to ensure FAPE.  
 a. If the AU did not address the delay and the student was still within the AU, then the AU reported how it planned to address the delay of services to ensure FAPE.  
4. The CDE conducted a desk audit of the Indicator 11 Correction Tracker submitted by the AU. The CDE reviewed and verified that each individual case of noncompliance was corrected and informed the AU of the results.  
  
Given the verifications that each individual case of noncompliance had been corrected and that the source of noncompliance was correctly implementing the regulatory requirements related to Indicator 11, the CDE deemed this AU’s correction of noncompliance to be complete in FY2019.

## 11 - OSEP Response

## 11 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

**Monitoring Priorit**y: 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.

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.

Targets must be 100%.

Provide detailed information about the timely correction of 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, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 12 - Indicator Data

**Not Applicable**

**Select yes if this indicator is not applicable.**

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2006 | 96.10% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.16% | 97.01% | 96.89% | 98.25% | 98.19% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination. | 3,358 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 511 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 1,524 |
| 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. | 1,085 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 100 |
| 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 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. | 1,524 | 1,662 | 98.19% | 100% | 91.70% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

COVID-related school closures throughout the state caused the slippage. 73 children’s C-to-B transitions were delayed due to COVID-related school closures. 26 additional delays were reported due to staff issues. Some of these staff issues included COVID-related staff issues (e.g., staff not being available to process the C-to-B transition forward because the staff had to quarantine).

**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**

138

**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.**

Out of the 138 children whose IEPs were not developed or implemented by their third birthdays, 21 children were found ineligible for services and 5 children’s eligibility was never determined during SY2019-20. Among the remaining 112 children, the shortest number of days beyond the 3rd birthday to implementation of IEPs was 1 day and the longest was 128 days. The median number of days beyond the 3rd birthday was 18 days.  
  
C-to-B transitions were delayed due to:  
• Additional evaluations or special evaluations were needed  
• Staff missed the timeline  
• COVID 19-related school closures  
• Other no valid reasons (e.g., non-COVID-related school closure)

**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 for Indicator 12 are reported by every AU through the online Special Education End-of-Year data collection. The data elements and definitions with the relevant information for Indicator 12 are defined as: Child’s Date of Birth, Date of Parental Consent to Evaluate, Date of Initial Eligibility Meeting, Date IEP was Implemented, and Reason for delay in implementing IEP.  
AUs report data for all children who were served in a Part C program and evaluated for Part B services. When the IEP was not developed or implemented by the child’s third birthday, a reason for delay must be provided.

**Provide additional information about this indicator (optional)**

Due to COVID 19 pandemic, the CDE provided the following guidance to AUs regarding transitions from Part C to Part B services:  
  
As children transition from Part C to Part B services are we expected to have the child's IEP in place by their third birthday?  
  
Yes, similar to evaluation timelines, OSEP has not waived or changed this IDEA requirement related to Indicator 12. Subsequently, as children transitioning from Part C to Part B are evaluated and found eligible during this time, it is the expectation of AUs to complete those activities and start the IEP services on or before the child's third birthday. Keep in mind that instances in which parents choose to delay the evaluation or IEP start date constitute allowable use of delay codes.  
  
http://www.cde.state.co.us/early/preschoolthrough3rdgrade-covid19-faqs#childfindSpecial   
under “Child Find”   
  
In response to the pandemic, the CDE added a delay reason code of “COVID-related school closures” to the data collection. This addition made it possible for AUs to report the C-to-B transition records that were delayed due to the COVID-related school closures. These delays were considered non-compliant and included in the Indicator 12 reporting as “not on-time.”

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 11 | 11 | 0 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

The previously noncompliant Administrative Units (AUs) submitted recent C-to-B transition records (new data) that took place since the noncompliance was found. The CDE then reviewed the newly submitted data via desk audit and verified that all children reported in the new data transitioned within the timeline. By reviewing and verifying the updated data, CDE ensured that the AUs were correctly implementing the regulatory requirements related to Indicator 12.

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

The CDE verified that each individual case of noncompliance was corrected by having AUs that failed to meet compliance with Indicator 12 follow the below process:  
  
1. AUs received a pre-populated Indicator 12 Demonstration of Correction tracking form which listed each case of delayed C-to-B transition records.  
2. AUs verified/reported the reason for the delay.  
3. AUs provided an explanation for how they ensured the delay did not result in denial of FAPE.  
 a. If the AU did not address the delay of services and the student was still within the AU, then the AU reported how it planned to address the delay.  
4. The CDE conducted a desk audit of the Indicator 12 Correction Trackers submitted by every noncompliant AU. The CDE reviewed and verified that each individual case of noncompliance was corrected and informed the AUs of the results.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 12 | 12 | 0 |
| FFY 2016 | 1 | 1 | 0 |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

The previously noncompliant Administrative Units (AUs) submitted recent C-to-B transition records (new data) that took place since the noncompliance was found. The CDE then reviewed the newly submitted data via desk audit and verified that all children reported in the new data transitioned within the timeline. By reviewing and verifying the updated data, CDE ensured that the AUs were correctly implementing the regulatory requirements related to Indicator 12.

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

The CDE verified that each individual case of noncompliance was corrected by having AUs that failed to meet compliance with Indicator 12 follow the below process:  
  
1. AU received a pre-populated Indicator 12 Demonstration of Correction tracking form which listed each case of delayed C-to-B transition records.  
2. AU verified/reported the reason for the delay.  
3. AU provided an explanation for how they ensured the delay did not result in denial of FAPE.  
 a. If the AU did not address the delay of services and the student was still within the AU, then the AU reported how it planned to address the delay.  
4. The CDE conducted a desk audit of the Indicator 12 Correction Trackers submitted by every noncompliant AU. The CDE reviewed and verified that each individual case of noncompliance was corrected and informed the AUs of the results.

**FFY 2016**

**Findings of Noncompliance Verified as Corrected**

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

Since this 1 AU was found noncompliant in FFY2016, the AU went through a corrective action plan which included a number of requirements such as trainings and additional data reporting. This AU submitted recent C-to-B transition records (new data) that took place since the noncompliance was found. The CDE then reviewed the newly submitted data via desk audit and verified that all children reported in the new data transitioned within the timeline. By reviewing and verifying the updated data, CDE ensured that the AU was correctly implementing the regulatory requirements related to Indicator 12.

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

The CDE verified that each individual case of noncompliance was corrected by having the AU follow the below process:  
  
1. AU received a pre-populated Indicator 12 Demonstration of Correction tracking form which listed each case of delayed C-to-B transition records.  
2. AU verified/reported the reason for the delay.  
3. AU provided an explanation for how they ensured the delay did not result in denial of FAPE.  
 a. If the AU did not address the delay of services and the student was still within the AU, then the AU reported how it planned to address the delay.  
4. The CDE conducted a desk audit of the Indicator 12 Correction Tracker submitted by the AU. The CDE reviewed and verified that each individual case of noncompliance was corrected and informed the AU of the results.

## 12 - Prior FFY Required Actions

OSEP notes that the State described one AU as having longstanding noncompliance that is systemic. However, the State did not report any AU as having findings of noncompliance identified prior to FFY 2017 that were not yet verified as corrected. Therefore, the State needs to explain the reference to longstanding noncompliance.

**Response to actions required in FFY 2018 SPP/APR**

AU was found noncompliant in FFY2016. Since then, the AU went through a corrective action plan which included a number of requirements such as trainings and additional data reporting. In order for the CDE to verify that the source of noncompliance is correctly implementing the regulatory requirements, the AU submitted recent C-to-B transition records (new data) during FFY2019. The CDE then reviewed the newly submitted data via desk audit and verified that all children reported in the new data transitioned within the timeline. By reviewing and verifying the updated data, CDE ensured that the AU was correctly implementing the regulatory requirements related to Indicator 12.  
  
In addition, the CDE verified that each individual case of noncompliance was corrected by having the AU follow the below process:  
1. AU received a pre-populated Indicator 12 Demonstration of Correction tracking form which listed each case of delayed C-to-B transition records.  
2. AU verified/reported the reason for the delay.  
3. AU provided an explanation for how they ensured the delay did not result in denial of FAPE.  
 a. If the AU did not address the delay of services and the student was still within the AU, then the AU reported how it planned to address the delay.  
4. The CDE conducted a desk audit of the Indicator 12 Correction Tracker submitted by the AU. The CDE reviewed and verified that each individual case of noncompliance was corrected and informed the AU of the results.  
  
Given the verifications that each individual case of noncompliance had been corrected and that the source of noncompliance was correctly implementing the regulatory requirements related to Indicator 12, the CDE deemed this AU’s correction of noncompliance as complete in FY2019.

## 12 - OSEP Response

## 12 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 13: Secondary Transition

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Effective Transition

**Compliance indicator**: Secondary transition: 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 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 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 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, etc.) and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2017 | 93.18% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 70.94% | 93.45% | 100.00% | 93.18% | 89.39% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target | 100% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 441 | 442 | 89.39% | 100% | 99.77% | Did Not Meet Target | No Slippage |

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

State monitoring

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

Annually, CDE conducts review of transition IEPs by tasking AUs to self-audit their transition IEPs independently and by conducting face-to-face or virtual transition IEP reviews in partnership with AUs. Prior to the school year, CDE randomly select students of transition age for AUs to review. AUs’ assigned number of IEPs to review vary between 5 and 10, depending on the student population size in the AU. AUs are required to self-review the selected IEPs by a due date within the Exceptional Student Services (ESSU) Data Management System (DMS), a web-based tool developed to provide AUs with a secure web-based location for managing and monitoring all business required for the implementation of IDEA. DMS prompts teams to review the transition IEPs using NTACT’s Indicator 13 review checklist. AUs are required to conduct the transition IEP reviews in partnership with CDE rather than self-reviewing when AUs are in the following circumstances:  
1. New AUs are required to participate in side-by-side Indicator 13 IEP reviews in the year they are established.  
2. AUs who self-report less than 100% compliance for Indicator 13 in a given year are required to participate in side-by-side reviews the following year.  
3. AUs who are selected to participate in the general supervision/monitoring visits are required to participate in side-by-side reviews.  
All transition IEP review results are compiled on the due date to determine the level of state’s and each AU’s compliance with Indicator 13.

| **Question** | **Yes / No** |
| --- | --- |
| Do the State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16? | YES |
| If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age? | YES |
| If yes, at what age are youth included in the data for this indicator | 15 |

**Provide additional information about this indicator (optional)**

**Correction of Findings of Noncompliance Identified in FFY 2018**

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 14 | 14 | 0 | 0 |

**FFY 2018 Findings of Noncompliance Verified as Corrected**

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

To verify that the Administrative Units (AUs) who reported noncompliance for Indicator 13 were correctly implementing regulatory requirements related to Indicator 13, the CDE’s Secondary Transition team in partnership with the AU special education team, conducted side-by-side compliance reviews of the required number of Transition IEPs during the 2018-2019 school year. The IEPs selected for this side-by-side compliance review were a different set of IEPs than the ones found noncompliant, in accordance with OSEP memo 09-02. These collaborative reviews were done face-to-face or virtually and involved reviewing and discussing each of the compliance elements of IEP to build capacity and inter-rater reliability within the AU staff until the IEP met the compliance target of 100%. The CDE verified that the IEPs reviewed were 100% compliant on-site with the AU and recorded this data in the ESSU Data Management System. If further corrections were identified as necessary for compliance during the side-by-side collaborative reviews, the CDE verified 100% compliance by reviewing the IEP through a desk audit process once changes were made in the ESSU Data Management System.

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

The CDE ensured that each AU corrected all individual cases of noncompliance related to Indicator 13, unless the child was no longer within the jurisdiction of the AU, through the following process for each individual case of noncompliance:  
  
1. AUs were provided a pre-populated indicator 13 Demonstration of Correction tracking form including the student name, IEP date and reason for noncompliance  
2. AUs determined the root cause of the noncompliance   
3. AUs determined if each of the students was still in their jurisdiction.   
 a. If NO – no further correction was needed   
 b. If YES – AUs uploaded the student’s current IEP into the ESSU Data Management System  
4. AUs completed the IEP compliance record review of the student’s current IEP   
5. AUs completed the tracking form by recording the date the current IEP was reviewed and the reviewer’s name.   
  
The CDE verified correction via a desk audit process and confirmed the results to the AU.

**Correction of Findings of Noncompliance Identified Prior to FFY 2018**

| **Year Findings of Noncompliance Were Identified** | **Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2018 APR** | **Findings of Noncompliance Verified as Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| FFY 2017 | 1 | 0 | 1 |
|  |  |  |  |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

The CDE Secondary Transition and Monitoring team, in collaboration with the AU special education team, completed in-person IEP compliance reviews of Transition IEPs written in SY2019-20. In addition to this review of updated data, the AU is required to participate in individualized professional development in the area(s) of Secondary Transition IEP development based on information from the collaborative reviews and areas of need identified by the AU team. Following the side-by-side reviews, the CDE and AU team worked together to identify area(s) of need, develop an agenda for the required professional development, and set a date for the training to be provided by the CDE.  
Three months after the required professional development, the CDE conducted a desk audit of IEPs written after the training to verify improvement in the identified area(s) of need. The AU’s compliance was still less than 100%. Further monitoring activities will be required. The CDE is working with the AU to develop meaningful improvement activities based on the results of the desk audit. In addition, the AU will be required to participate in collaborative IEP reviews for the SY2020-21.

## 13 - Prior FFY Required Actions

None

## 13 - OSEP Response

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining one uncorrected finding of noncompliance identified in FFY 2017 was corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with findings of noncompliance identified in FFY 2019 and the LEA with remaining noncompliance identified in FFY 2017: (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 Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

**Monitoring Priority**: Effective General Supervision Part B / Effective Transition

**Results indicator:** Post-school outcomes: Percent 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.

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

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

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

**Data Source**

State selected data source.

**Measurement**

A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100.

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

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

**Instructions**

*Sampling****of youth who had IEPs and are no longer in secondary school****is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates of the target population. (See General Instructions on page 2 for additional instructions on sampling.)*

Collect data by September 2020 on students who left school during 2018-2019, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2018-2019 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” in the FFY 2019 SPP/APR, due February 2021:

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, as amended by Workforce Innovation and Opportunity Act (WIOA), and 34 CFR §361.5(c)(9). For the purpose of defining the rate of compensation for students working on a “part-time basis” under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

*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, etc.).

**II. *Data Reporting***

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.

**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 should consider categories such as race and ethnicity, disability category, and geographic location in the State.

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** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2014 | Target >= | 32.50% | 32.50% | 32.75% | 32.75% | 33.00% |
| A | 24.62% | Data | 24.62% | 25.63% | 26.10% | 27.10% | 26.49% |
| B | 2014 | Target >= | 61.00% | 61.00% | 61.25% | 61.25% | 61.50% |
| B | 56.43% | Data | 56.43% | 60.44% | 61.85% | 68.70% | 67.64% |
| C | 2014 | Target >= | 69.00% | 69.00% | 69.25% | 69.25% | 69.50% |
| C | 73.60% | Data | 73.60% | 77.48% | 74.80% | 79.60% | 80.01% |

**FFY 2019 Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 27.70% |
| Target B >= | 56.50% |
| Target C >= | 81.40% |

**Targets: Description of Stakeholder Input**

Indicator 14 data was presented to stakeholders at a Re-invent Special Education meeting, representing Directors of Special Education, PEAK Parent Center, CSEAC, Higher Education, ESSU consultants and the Leadership team. The discussions primarily focused on trend data and current goals. This was followed by another stakeholder meeting in August 2014 where there were additional discussion regarding the vendor contracted by CDE as well as consideration of changes regarding who would be making the phone calls to high school exiters one year after graduating from high school. Additional discussions continued with Directors and Transition Coordinators throughout the fall of 2014.  
The decision was made to have targets remain static for two additional years, with incremental increases through FFY 2018.  
  
<FFY2019 target update>  
Throughout SY2018-19, stakeholders including secondary transition coordinators and directors of special education from AUs gathered to provide input for the FFY2019 target. Stakeholders discussed the current state of post-school outcomes in Colorado, former students’ participation in the interviews, and the impact of applying WIOA’s definition of “competitively employed” to Measurement B. Stakeholders and CDE came to a conclusion that although we should expect historical growth for Measurement A and C for FFY2019, the target for Measurement B needs to accommodate the impact of WIOA’s definition of competitive employment.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 2,137 |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 514 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 955 |
| 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) | 88 |
| 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). | 132 |

| **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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. Enrolled in higher education (1) | 514 | 2,137 | 26.49% | 27.70% | 24.05% | Did Not Meet Target | Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 1,469 | 2,137 | 67.64% | 56.50% | 68.74% | 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) | 1,689 | 2,137 | 80.01% | 81.40% | 79.04% | Did Not Meet Target | No Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A** | A variety of factors lead to slippage in Measurement A. Colorado is an Employment First state. This means that employment is considered a first option for all students, including students with the most significant support needs. We place high value on students graduating postsecondary and workforce ready. In the recent years, the state and districts are have been working to increase opportunities to develop skills that lead to employment through a variety of work-based learning, career and technical education, concurrent enrollment, Accelerating Students through Concurrent Enrollment (ASCENT), internships, and workplace credentialing opportunities. Partnerships are occurring through local community colleges, school districts, and employers to build skills that lead to immediate employment upon graduating. In addition, due to the high cost of college tuition, some students take time off to work before attending college. Lastly, attending postsecondary education is not the postsecondary goal for some students. Some students want to build skills to get a good job through programs offered through the district or those that can be learned through on-the-job training. These initiatives have been accelerating Colorado’s trend of increased competitive employment rates and decreased higher-ed rates. We observed a slippage this year presumably due to these initiatives spreading more widely throughout Colorado districts at a faster pace in the past years. |

**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.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used? | YES |
| If yes, has your previously-approved sampling plan changed? | NO |

**Describe the sampling methodology outlining how the design will yield valid and reliable estimates.**

Depending on the number of high school exiters in the Administrative Unit (AU), Colorado uses a combination of census and stratified sampling for indicator 14 data collection. When AUs have 100 or fewer students who are no longer in secondary school and had IEPs in effect at the time they left school, the AUs interview all exiters (i.e., census). When AUs have 100-200 exiters, they receive a list of 100 randomly selected former students to interview. AUs with more than 200 exiters receive a list of 200 randomly selected former students to interview. If the AU wishes to interview all former students, rather than a sample, the state accommodates for that.   
  
Colorado had 5,462 secondary school exiters with IEPs in SY2018-19. Out of them, 3,825 were selected as interviewees, following the methodology described above. Out of the 3,825 former students, 56 were found to be deceased, returned to high schools, or could not be reached due to incarceration. Out of the remaining 3,769 students, 2,137 students participated in the interview. This means that the interviewed former students accounted for approximately 40% of all former students who had IEPs at the time of leaving secondary school.  
  
Colorado's sampling methodology made it possible to reduce the sample size required to achieve randomness, and made the proportionate representation in the sample more likely.

| **Survey Question** | **Yes / No** |
| --- | --- |
| Was a survey used? | YES |
| If yes, is it a new or revised survey? | YES |
| If yes, attach a copy of the survey |  |

**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.**

The following demographic categories were examined for their representativeness in the post-school outcome interviews: former students’ gender, race/ethnicity, disability, reasons for exiting secondary school, and attending AUs’ geographic region within the state. The chart below summarizes the results of the representativeness analysis. When the demographic group’s representation in the special education population and representation among the interview respondents were greater than ±3%, the representativeness was considered inadequate.   
The demographic categories that were not well-represented among the survey respondents were race/ethnicity, disability, reasons exiting secondary school, and geographic region. White former students were overrepresented among the interview respondents, which seemed to be driven by the underrepresentation of Black and Hispanic former students. Former students with specific learning disability were slightly underrepresented among the survey respondents. Former students who exited secondary schools due to graduating with regular high school diplomas were overrepresented among the interview participants, which seemed to be driven by the underrepresentation of former students who exited secondary schools due to dropping out of high schools. Finally, former students from the Denver metro region were significantly underrepresented among the interview respondents, while former students from North Central and Pikes Peak were overrepresented. Denver metro AUs has the highest enrollment of students with disabilities who are Black and Hispanic in the state. The poor participation from the Denver metro districts’ former students seemed to have exacerbated the poor representation of the regions as well as racial categories.  
  
Category -------------------------– Population Representation –-- Interview Respondents –-- ±Difference –-- Representative (±3%)?  
  
Former Students’ Gender   
Male …………………………………………………………. 63.93% …………..………… 63.55% ………….... -0.39% …….……… Yes  
Female ……………………………………………………… 36.07% …………….………. 36.45% ………..…... 0.39% ………….… Yes  
  
Race/Ethnicity   
American Indian or Alaska Native ……………… 1.52% ………………………. 1.50% ………..…... -0.02% …….……… Yes  
Asian …………………………………………………………. 1.35% ………………………. 1.26% ………..…... -0.09% …….……… Yes  
Black or African American …………..……………. 7.96% ………………………. 5.38%……............. -2.58% …….……… Yes  
Hispanic or Latino ………………………………….. 40.15% …………...………… 38.51% ....….....….. -1.64% ……….…… Yes  
Native Hawaiian or Other Pacific Islander.... 0.24% ………………………. 0.14% ….….....….. -0.10% …….………. Yes  
Two or More Races …………………………………… 3.33% ………………………. 3.37% .……...…..... 0.04% …….………. Yes  
White ……………………………………………………... 45.44% …………...……..…. 49.84% …..…....…... 4.39% …….….…… No  
  
Disability   
Autism Spectrum Disorder ………………..……… 7.27% …………………….… 8.56% …….…......... 1.30% …….……… Yes  
Hearing Impairment ………………………..………... 1.57% …………………….… 2.34% …………...... 0.77% …….….…… Yes  
Intellectual Disability ……………………..………….. 4.32% …………………….… 4.54% …………...... 0.22% …….….…… Yes  
Multiple Disability ……………………………………… 5.40% …………………….… 6.36% …………...... 0.96% …….….…… Yes  
Other Health Impairment ……………..…………. 13.27% …………….….….… 14.51% …………..... 1.23% …………..… Yes  
Serious Emotional Disability ………………………. 9.14% …………………….… 7.53% …………..... -1.60% …….…….… Yes  
Specific Learing Disability ………………………... 55.91% …………….….….… 52.88% …………..... -3.04% …….…….… No  
Speech or Language Impairment …………….... 0.99% ……………....…….… 0.89% …………..... -0.10% …….……… Yes  
Traumatic Brain Injury ………………..……………... 1.35% …………………….… 1.40% …………....... 0.05% …….……… Yes  
Other ………………………………………………..……….. 0.77% …………………….… 0.98% …………....... 0.21% …….……… Yes  
  
Reasons Exiting Secondary School  
Regular Diploma ………………………….………..… 79.79% …………..………… 85.68% …………....... 5.89% …….…….… No  
Certificate ………………………………………………..... 1.85% ………………………. 2.53% …………....... 0.68% …….……… Yes  
Reached Maximum Age ……………………..……… 1.17% ………………………. 1.22% …………....... 0.04% …….…...… Yes  
Dropped Out ………………………………….………… 17.19% ………….…………. 10.58% …………...... -6.68% ………….… No  
  
Region  
Denver Metro …………………………………………… 56.10% …………………....... 37.62% ....………. -18.47% ……….…… No  
North Central …………………….………………...…… 11.79% ……………………... 16.99% ……….…….. 5.20% …….……… No  
Northeast …………………………….……………………… 2.00% ….……………………. 4.07% ..…..……..... 2.08% …………… Yes  
Northwest …………………………………………………… 4.60% ….…………..…….... 5.76% ……...…..…. 1.16% …….……… Yes  
Pikes Peak ……………………………….…………...…… 15.60% ………………..…... 22.88% …….....……. 7.28% ……….….… No  
Southeast …………………………………….……………… 1.78% ……………….………. 1.64% ……………. -0.14% …..……….. Yes  
Southwest …………………………………………………… 2.67% ……………….………. 4.35% ………….…. 1.68% …..……….. Yes  
West Central ………………………………………………… 3.99% ……………….…….. 4.59% ……...…..… 0.59% ………..…… Yes  
Other (online, multi-site charter) …..……...….… 1.48% ….…………….………. 2.11% ….…..….…. 0.62% ….………… Yes

| **Question** | **Yes / No** |
| --- | --- |
| Are the response data representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school? | 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 lack of participation of Black and Hispanic students and the poor participation of former students who exited from Denver metro districts are related issues with which Colorado has struggled for a long time. The Denver metro region accounted for 75.6% of Black former students who exited from high school with IEPs, and also accounted for 59% of Hispanic former students who exited from high school with IEPs. Thus, increasing the participation rates among former students who exited from Denver metro districts has been an utmost concern in the recent years. In fact, CDE met with district leaders to discuss factors that may have contributed to the underrepresentation of identified groups. The over-representation of the graduates and under-representation of dropouts have been another long-term issue, and it has to do with the limited information on whereabouts of students who dropped out.  
CDE will continue to provide training and accessible resources to all districts regarding strategies to increase student and family participation for all demographic groups. In addition, all AUs will receive the list of students to interview in advance of the start of the data collection period to enable them to review the list and update contact information. CDE will host PSO data discussions, root cause analysis and follow up coaching sessions for all AUs. In addition, CDE will convene AU special education administrators in the targeted AUs in the Denver metro region to discuss strategies to improve response rates from Hispanic, African American, and students who dropped out. AUs in the Denver Metro region that have been successful in obtaining responses from these groups of students will be invited to discuss barriers and share the strategies they employ. AU special education administrators will leave the convening with a plan for how to increase response rates i.e., how to educate students and parents about the post-school outcome interview process, identify multiple means to contact families, and a plan to train staff. Additionally, CDE will provide targeted TA for those AUs identified in the analysis of the data that have lower response rates.

**Provide additional information about this indicator (optional)**

## 14 - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must report whether the FFY 2019 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

**Response to actions required in FFY 2018 SPP/APR**

These requirements are addressed in the FFY2019 submission for Indicator 14.

## 14 - OSEP Response

## 14 - Required Actions

In the FFY 2020 SPP/APR, the State must report whether the FFY 2020 data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school, and, if not, the actions the State is taking to address this issue. The State must also include its analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.

## 14 - State Attachments





# 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 (E*MAPS*)).

**Measurement**

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

**Instructions**

Sampling is not allowed.

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

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline, targets and improvement activities, 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 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1 Number of resolution sessions | 9 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1(a) Number resolution sessions resolved through settlement agreements | 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

**Targets: Description of Stakeholder Input**

Targets were re-established and extended for this indicator through FFY 2018 following a stakeholder meeting of local special education directors, special education service providers, parents of students with disabilities in Colorado, and the state PTI (PEAK Parent Center). This stakeholder group reviewed trend data and set the targets based upon discussions around the fact that there is no mediator present at Resolution Sessions. The outcome of this measure is based on the disposition of the parties at the table and therefore there is little ability by CDE to affect the outcome of this indicator.   
  
The CDE is engaged in educating parties about resolution sessions and collecting data on when the resolution session occurred and if agreement was reached.  
  
<FFY2019 target update>  
Given the 1-year extension of the current APP/APR, the CDE consulted with the state advisory panel, the Colorado Special Education Advisory Council (CSEAC) to extend the FFY2018 target for the FFY2019. They all agreed that the extension of the FFY2018 target for the FFY2019 would be appropriate.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 100.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 49.00% | 50.00% | 51.00% | 52.00% | 53.00% |
| Data | 83.33% | 50.00% | 62.50% | 54.55% | 54.55% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 53.00% |

**FFY 2019 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 5 | 9 | 54.55% | 53.00% | 55.56% | Met Target | No Slippage |

**Provide additional information about this indicator (optional)**

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

The State reported fewer than ten resolution sessions held in FFY 2019. The State is not required to meet its 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 EDFacts Metadata and Process System (E*MAPS*)).

**Measurement**

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

**Instructions**

Sampling is not allowed.

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

States are not required to establish baseline or targets if the number of resolution sessions is less than 10. In a reporting period when the number of resolution sessions reaches 10 or greater, develop baseline, targets and improvement activities, 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 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1 Mediations held | 44 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.a.i Mediations agreements related to due process complaints | 12 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.b.i Mediations agreements not related to due process complaints | 13 |

**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**

Targets were re-established and extended for this indicator through FFY 2018 following a stakeholder meeting of local special education directors, special education service providers, parents of students with disabilities in Colorado, and the state PTI (PEAK Parent Center). Mediation is made available at no cost to parties who have disputes involving any matter under Part B. Mediation is a voluntary process on the part of the parties and is not used to deny or delay any of the parent’s rights under Part B. If a mediation agreement is reached, it is reduced to writing in the form of a binding mediation agreement which is enforceable in any court of competent jurisdiction.  
  
<FFY2019 target update>  
Given the 1-year extension of the current APP/APR, the CDE consulted with the state advisory panel, the Colorado Special Education Advisory Council (CSEAC) to extend the FFY2018 target for the FFY2019. They all agreed that the extension of the FFY2018 target for the FFY2019 would be appropriate.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 88.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 60.00% | 61.00% | 62.00% | 63.00% | 64.00% |
| Data | 60.00% | 72.73% | 65.52% | 62.96% | 54.35% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 64.00% |

**FFY 2019 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 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 12 | 13 | 44 | 54.35% | 64.00% | 56.82% | Did Not Meet Target | No Slippage |

**Provide additional information about this indicator (optional)**

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan



# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

**Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.**

**Name:**

Paul Foster

**Title:**

Executive Director of Exceptional Student Services

**Email:**

foster\_p@cde.state.co.us

**Phone:**

720-660-4253

**Submitted on:**

04/28/21 12:51:35 PM

# ED Attachments

  

1. Data suppressed due to privacy protection [↑](#footnote-ref-2)