**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**

**Oklahoma**

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 half of the compliance and performance indicators, Oklahoma improved or maintained its score from FFY 2018 (within one percentage point). More than half of the thirty measures also met target. Indicator 3 is not reported.   
  
Highlights include:  
• 91 percent of students with disabilities (ages 6 to 21) are incorporated into the general education classroom at least 40 percent of the time (100 percent minus Indicators 5B & 5C).  
• On every measure of early childhood outcomes (Indicator 7, Outcomes A, B & C), Oklahoma is near or exceeds the state targets, improving from the prior year.  
• Indicator 4A: The large increase is a result of a reduced number of districts that meet the minimum reporting requirement. Only 33 LEAs met or exceeded the minimum n-size of 10 students with more than 10 days of suspension or expulsion in 2018-2019, a substantial drop from the previous year of 176 districts. This dramatic year to year change has caused the rate of discrepancy to increase tenfold, though only 5 more districts were identified as significantly discrepant in the 18-19 school year.  
• Although Oklahoma increased the rate of preschool students who receive services in the general education classroom, the State is still well below target (Indicator 6).   
• According to the data collection survey results, fewer students who left high school while being served through IEPs were active one year later in higher education, competitive employment or other related activities (Indicator 14). The slippage may be due to the effects of the covid-19 pandemic.  
• The Covid-19 pandemic also negatively effected district compliance to timeliness requirements for initial evaluations and IEPs (Indicators 11 and 12).

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

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

544

**General Supervision System**

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

Oklahoma’s general supervision system is designed to ensure the implementation of the Individuals with Disabilities Education Improvement Act (IDEA) of 2004. The main purpose of the State system is to support and build capacity for effective implementation of the IDEA by the State and local education agencies (LEAs), in order to improve outcomes for students with disabilities in Oklahoma. This system is designed to: a) ensure compliance with federal and state regulations and b) improve services and results for students with disabilities.   
  
Policies, Procedures, and Effective Implementation  
Oklahoma’s special education policies and procedures support state and local implementation of the IDEA. Agencies responsible for special education and related services must abide by Oklahoma State law, policies, procedures, and the federal regulations for the IDEA Part B and C. Agencies having these responsibilities are: local educational agencies (LEA), public charter schools not otherwise included as LEAs, other public agencies (e.g., State schools for students with deafness and blindness and State and local juvenile and adult correctional facilities), and accredited private schools and facilities as described in the applicable federal regulations and established by Oklahoma State laws. The OSDE-SES has outlined specific strategies for implementation of the IDEA in the Oklahoma Special Education Handbook. Additional information about Oklahoma’s policies and procedures are included in the Oklahoma Special Education Policies and the Oklahoma Special Education Process Guide. LEAs are responsible for developing policies and procedures and ensuring effective implementation. LEAs are required annually to complete the Local Education Agency Agreement for Special Education in Oklahoma which ensures all eligible students in the LEA will have access to a free and appropriate public education (FAPE) (34 CFR § 300.17). In addition, LEAs are required to submit Local Education Agency Assurances which demonstrate that the LEA understands its responsibilities under the IDEA. All handbooks and guides are available on the OSDE-SES website at https://sde.ok.gov/documents-forms.  
  
IDEA B State Advisory Panel  
The OSDE-SES develops policies and procedures with the support of the IDEA B State Advisory Panel. The IDEA B State Advisory Panel for Special Education serves as an advisory group to the OSDE-SES on issues related to special education and related services for students with disabilities (34 CFR §300.167). The Panel includes the following stakeholders: parents of students with disabilities; individuals with disabilities; state and local education officials; state and local agency representatives; general and special education school administrators and teachers; advocacy groups; representatives of institutions of higher education that prepare special education and related services personnel; representatives of private schools and charter schools; representatives of vocational, community, and business organizations concerned with the provision of transition services to youth with disabilities; and representatives of state juvenile and corrections agencies (34 CFR §300.168). The Panel participates in the annual review and revision of the SPP/APR, including the development of state targets, the review of data of improvement activities, and making suggestions for updates to the activities and targets. More information, including the IDEA B State Advisory Panel Operating Guidelines, can be found here: http://ok.gov/sde/idea-b-advisory-panel.  
  
Integrated Monitoring  
Refer to http://sde.ok.gov/sde/compliance for the general supervision system manual that governs differentiated monitoring and compliance monitoring.  
  
Federal Fiscal Management  
Oklahoma’s system of general supervision includes a process to provide oversight in the distribution and use of IDEA funds at the State and local level. Information on these processes can be found in the Special Education Funding Manual for IDEA Part B found at http://sde.ok.gov/sde/finance. Each LEA must complete Assurances and Agreements annually at the beginning of each fiscal year. This activity must take place before the IDEA Consolidated Application is available for LEAs to budget IDEA Part B funds.   
  
Data on Processes and Results   
As part of Oklahoma’s general supervision responsibilities, data are used for decision making about program management and improvement. This process includes: (1) data collection and verification, (2) data examination and analysis, (3) public reporting of data, (4) status determination, and (5) improvement activities. The OSDE-SES posts information on its website to support LEAs as they work to improve their data collection and reporting capacity. Such information includes data collection and reporting guidance, definitions, timelines, and templates. (http://sde.ok.gov/sde/documents/2012-10-01/special-education-data-and-reporting-part-b-children-ages-3-through-21)  
  
Effective Dispute Resolution   
Several mechanisms are available through the OSDE to assist in resolving disputes (see http://sde.ok.gov/sde/special-education-dispute-resolution). These processes include IEP facilitation, mediation, formal complaints, due process hearings, facilitated resolution sessions and expedited due process hearings. The Special Education Resolution Center (SERC) manages the special education due process hearing system for the State of Oklahoma. SERC’s duties have been expanded to implement innovative programs to assist parents and LEAs to settle disputes at the earliest stage possible. At no cost to either party, SERC provides highly trained mediators to assist with disputes which may develop at any time during the relationship of the parties over special education issues and highly trained facilitators during required resolution sessions of due process. SERC also provides stakeholder training that supports mutual collaboration. More information on SERC can be located at https://ok.gov/abletech/Special\_Education\_Resolution\_Center/.

**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.**

Technical Assistance (TA) is designed to link directly to indicators in the SPP/APR and to improve the level of compliance in LEAs. The comprehensive approach to technical assistance enables the OSDE-SES to differentiate the scope of services provided for LEAs based on local needs. For example, the OSDE-SES makes TA available for all LEAs, such as meetings with local LEAs, webinars to support compliant implementation of the IDEA, updates via email, webinars, and in-person training on a variety of topics:   
• the Oklahoma Special Education Handbook,   
• best practices for the use and implementation of accommodations,  
• the special education online IEP system,  
• high quality data collection and reporting,  
• the differentiated monitoring process, and   
• high quality financial accountability and budgeting, among others.  
  
Basic TA includes providing documentation of evidence-based practices and disseminating examples of success to assist others in planning, implementation and use of tools to achieve positive outcomes. TA ranges from general levels, such as providing a review of best practices, to providing targeted technical assistance (TTA), which includes more focused levels of support such as the state directing root cause analysis and monitoring of CAP development and subsequent correction.  
  
TTA includes a purposeful and planned series of activities that result in changes to policy, program, or operations that support increased capacity at the state/system/school levels. LEAs can access resources for technical assistance on the OSDE-SES webpage and request technical assistance via a help desk form on the OSDE-SES webpage or by contacting via phone or email. The OSDE-SES has created multiple self-assessments based on OSEP indicators and other special education areas for use by LEAs in determining their level of compliance and/or best practice. The self-assessments can be used at the classroom, school, or district level. For more information please see http://sde.ok.gov/sde/ses-tech-assistance. LEAs may also conduct the School Level Technical Assistance Survey to help determine areas in need of assistance. The OSDE-SES’s role in this process is to: a) provide data and information as requested; b) provide technical assistance and professional development; c) provide guidance on the development and implementation of improvement plans; and d) ensure compliance with the IDEA and State regulations regarding the provision of special education services.

**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.**

Professional Development ranges from a basic level of providing general information to targeted and intensive PD, which is focused on data driven school improvement in LEAs, schools and classrooms. The OSDE-SES offers PD or suggests PD resources based on various concerns in collaboration with other divisions in the agency. PD is provided in three ways: 1) as requested by LEAs, school sites, teachers, or other interested stakeholders; 2) providing professional development resources for use by LEAs, school sites, teachers, or other interested stakeholders; and 3) as part of regional or statewide conferences hosted by the OSDE, other state agencies, or technical assistance centers. The OSDE-SES has also implemented an online professional development platform (PEPPER) accessible through the online IEP system and webpage and provides courses to teachers and the general public through OSDE's online training site. Special Education teachers and staff have access to additional modules and may be directed by district leadership or the OSDE-SES, through compliance monitoring, to complete selected modules.  
  
The OSDE-SES also offers PD resources through its webpage. The OSDE-SES has created Professional Development Modules for use by LEAs, schools, and other interested stakeholders (http://sde.ok.gov/sde/professional-development-directory). These modules are intended for use in a workshop or other professional development settings. When LEAs or schools identify a particular PD need for special education, they can easily access PD modules and provide local PD in a timely fashion. Importantly, these modules are intended to build coherence around best practices for the provision of special education services. Each module includes relevant background information, activities/materials, and a scripted PowerPoint presentation for a particular topic area. Requests for technical assistance and professional development form the OSDE-SES can be made through an online help desk. Requests are tracked to determine areas of district need.  
  
Additionally, the OSDE-SES contracts with other agencies and providers to ensure that service providers have the skills to effectively provide services that improve results for children with disabilities. A few examples are agreements with Oklahoma ABLE Tech, the Oklahoma Autism Center, and the Oklahoma Department of Rehabilitation Services. Oklahoma ABLE Tech (https://www.ok.gov/abletech/) provides training on developing AT teams and acquiring AT devices, and collaborates with the OSDE-SES on updates to technical assistance documents for AT and AEM. The Oklahoma Autism Center, through the University of Oklahoma Health Sciences Center, provides comprehensive professional development services to build the state’s capacity for educating children and youth with autism spectrum disorder and related disabilities. This includes providing services statewide to local education agencies, SoonerStart (Part C services), and pre-service educators in teacher and related service preparatory programs. Professional development is provided by maintaining an inclusive model demonstration and training site for observation and hands-on experience and by providing training and technical assistance, including demonstration, coaching and mentoring in the classroom, at LEA sites. Training and support to families is also incorporated into professional development activities. The OSDE-SES also collaborates with the Oklahoma Department of Rehabilitation Services to provide training and professional development regarding secondary transition services, to collaborate on updates to the technical assistance document on secondary transition, and to provide an annual conference on secondary transition.

**Stakeholder Involvement**

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

SPP/APR targets were not revised this year for any indicators.  
  
Regarding the SSIP, stakeholder involvement is specific to each improvement strategy. The stakeholder group to which SSIP results are reported regularly is the IDEA B Advisory Panel. This Panel consists of more than 50 members who represent a wide range of perspectives on special education, including parents and former students, teachers, districts, advocacy groups, service providers, and related agencies. Each strategic leadership team has also identified certain stakeholders to advise the team on best practices, evaluation and strategic improvement. These stakeholders are consulted on a regular basis through a variety of means, including one on one consultation, meetings, presentations and surveys.

**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.**

The State's performance plan is available on the OSDE-SES Part B data webpage located at http://sde.ok.gov/sde/documents/2012-10-01/special-education-data-and-reporting-part-b-children-ages-3-through-21, and is also distributed through public agencies. Each year, special education reporting dates are posted to build capacity for LEAs to report timely and accurate data. Additional information about the special education reports and due dates are included in the Oklahoma Special Education Data Manual. Oklahoma reports annually on the targets in the SPP/APR in writing to each LEA located in the State. Additionally, the State reports annually to the public on the performance of each LEA located in the State by posting current redacted DDPs and District Determinations on the OSDE Website. The FFY 2018 district performance reports ("FY 2019 Public Reporting") are located on the Part B data webpage listed above (and directly at the link provided). The FFY 2019 district performance reports will be posted in the same location by April 1.

## Intro - Prior FFY Required Actions

In the FFY 2019 SPP/APR, the State must provide a FFY 2019 target and report FFY 2019 data for the State-identified Measurable Result (SiMR) of record or provide a FFY 2019 target and FFY 2019 data for a new SiMR that is approvable and consistent with the requirements for the indicator in the Part B SPP/APR Indicator Measurement Table and OSEP’s guidance. 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.

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

This report will be completed through the April 2021 SSIP submission.

## Intro - OSEP Response

Due to the circumstances created by the COVID-19 pandemic, and resulting school closures, the State does not have any FFY 2019 data for indicator 17.

## Intro - Required Actions

# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of youth with Individualized Education Programs (IEPs) 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** |
| --- | --- |
| 2011 | 84.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 87.00% | 87.00% | 87.00% | 87.00% | 87.00% |
| Data | 77.23% | 75.55% | 74.44% | 76.97% | 58.34% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 87.00% |

**Targets: Description of Stakeholder Input**

**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 | 6,673 |
| 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 | 79.1%[[2]](#footnote-3) |

**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 | 6,673 | 58.34% | 87.00% | 79.1%2 | Did Not Meet Target | No Slippage |

**Graduation Conditions**

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

4-year ACGR

**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*.***

In order to graduate from a public high school accredited by the State Board of Education with a standard diploma, students shall either complete the requirements for the college preparatory/work ready curriculum or the core curriculum. Please see the following link for the graduation requirements checklists for both curriculum paths (https://sde.ok.gov/achieving-classroom-excellence-resources). The requirements vary slightly for students currently in 9th and 10th grades. Students with disabilities do not have different graduation requirements. No alternative diploma exists.

**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)**

The data for indicator 1 reflect school year 18-19, and were not affected by covid-19.

## 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 | 20.70% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 19.40% | 18.00% | 17.00% | 16.00% | 15.00% |
| Data | 20.30% | 19.75% | 16.60% | 14.25% | 14.45% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 15.00% |

**Targets: Description of Stakeholder Input**

**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) | 6,119 |
| 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) | 0 |
| 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) | 3 |
| 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) | 994 |
| 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) | 25 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 994 | 7,141 | 14.45% | 15.00% | 13.92% | Met Target | No Slippage |

**Provide reasons for slippage, if applicable**

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

A student who leaves an accredited public local education agency prior to graduation, without re-enrolling in another public LEA, is considered a drop-out for that academic year. Students who move to private institutions and homeschool are generally considered "return to regular education," and may or may not continue to be eligible for special education (depending on the nature of the exit). Students whose next educational agency is not known are also considered drop-outs, the equivalent of “Moved, not known to be continuing in a diploma-issuing agency.”

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

NO

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

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

The data for indicator 2 reflect school year 18-19, and were not affected by covid-19.

## 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 |  |  |

**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 | 98.60% | Actual | 98.68% | 98.93% | 98.69% | 97.97% | 98.56% |

**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 | 98.70% | Actual | 98.71% | 98.68% | 98.51% | 97.86% | 98.48% |

**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)**

NO

**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 |  |  | 98.56% | 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 |  |  | 98.48% | 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.**

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

No statewide assessments were conducted in spring 2020.

## 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 |  |  |

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2016 | Target >= | 54.00% | 55.00% | 14.03% | 14.25% | 14.50% |
| **A** | Overall | 14.03% | Actual | 33.03% | 33.02% | 14.03% | 12.60% | 12.53% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2016 | Target >= | 60.00% | 61.70% | 14.75% | 15.00% | 15.25% |
| **A** | Overall | 14.75% | Actual | 35.84% | 35.39% | 14.75% | 13.43% | 13.45% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Overall | 14.50% |
| Math | A >= | Overall | 15.25% |

**Targets: Description of Stakeholder Input**

**FFY 2019 Data Disaggregation from EDFacts**

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

NO

**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 |  |  | 12.53% | 14.50% |  | 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 |  |  | 13.45% | 15.25% |  | 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.**

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

No statewide assessments were conducted in spring 2020.

## 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 | 14.71% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 7.10% | 7.00% | 6.60% | 6.30% | 6.00% |
| Data | 8.42% | 1.45% | 14.71% | 14.71% | 3.98% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 6.00% |

**Targets: Description of Stakeholder Input**

**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.**

512

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Number of districts that have a significant discrepancy** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 12 | 33 | 3.98% | 6.00% | 36.36% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Only 33 LEAs met or exceeded the minimum n-size of 10 students for the count of students with more than 10 days of suspension or expulsion in 2018-2019, a very substantial drop from the previous year of 176 districts. This dramatic year to year change has caused the rate of discrepancy to increase tenfold, though only 5 more districts were identified as significantly discrepant in the 18-19 school year.

**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**

The OSDE-SES, with stakeholder input from its IDEA Part B Advisory Panel, has defined “significant discrepancy” as a risk ratio of suspension or expulsion of 2.5 or greater for students with disabilities in a LEA compared to students with disabilities among all LEAs in the State. Oklahoma used only students with IEPs (ages 3 to 21) to calculate significant discrepancy. The state rate for suspensions or expulsions for students with disabilities is used as the comparison group.  
  
To be included in the analysis, an LEA must have at least 10 students with disabilities who were suspended or expelled more than 10 days and at least 10 students with disabilities enrolled. 512 districts were excluded from the analysis because they did not meet the minimum n-size of students with disabilities who were suspended or expelled more than 10 days.   
  
Any findings of significant discrepancy generate an analysis of policies, procedures, and practices by SEA personnel. LEAs are also required to conduct this review (consistent with CFR § 300.170(b)). If appropriate, the LEAs will revise policies, practices, and procedures relating to any of the following topics: development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to comply with the requirements of the IDEA. Corrections will be reviewed for consistency with OSEP Memorandum 09-02 dated October 17, 2008.

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

The data for indicator 4 reflect school year 18-19, and were not affected by covid-19.

**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.**

Annually, districts are required to upload their policies, practices and procedures related to special education identification in their LEA Assurances and Agreement. Districts are notified of any disproportionality when they receive their annual District Data Profile. Those identified as being disproportionate as compared to the state average rate are subject to an in-depth review of their policies, procedures, and practices with attention to the development and implementation of IEPs, the use of PBIS practices, and procedural safeguards. These reviews are conducted by experienced and knowledgeable SEA personnel. A review of policies, procedures, and practices occurs during all general supervision and monitoring activities, also.  
  
In 2018-2019, twelve LEAs were found to have significant discrepancy in discipline rates among students with disabilities. The LEAs were notified of their discrepancy in October 2019 on their District Data Profiles. At that time, SEA personnel conducted detailed reviews of the policies, practices and procedures of these LEAs and determined that none demonstrated noncompliance.

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** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**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.**

521

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 4 | 0 | 24 | 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**

The OSDE-SES, with stakeholder input from its IDEA Part B Advisory Panel, has defined “significant discrepancy” as a risk ratio of suspension or expulsion of 2.5 or greater for students with disabilities in each racial/ethnic category in a LEA compared to students with disabilities among LEAs in the State in the same category. The OSDE has chosen the following comparison method (one of the methods recommended by the OSEP): The rates of expulsions and suspensions (in-school and out-of-school) that total more than 10 days in a school year for children with IEPs among LEAs in the State in each racial/ethnic category (34 CFR §300.170(a)). Oklahoma used only students with IEPs to calculate significant discrepancy.  
  
To be included in the analysis, a racial/ethnic group must have at least 10 students with disabilities who were suspended or expelled for more than 10 days by the LEA and at least 10 students with disabilities enrolled in that racial/ethnic category. If the district had at least 10 students with disabilities who were suspended or expelled for more than 10 days in all other racial/ethnic categories, this was used as the comparison group. Otherwise, the state rate for all other students with disabilities was used as the comparison group. 521 districts were excluded from the analysis because of their n-size at the subcategory level. This is a substantial increase in LEAs from the previous year.  
  
Any findings of significant discrepancy will generate an analysis of policies, procedures, and practices by SEA personnel. LEAs are also required to conduct this review (consistent with CFR § 300.170(b)). If appropriate, the LEAs will revise policies, practices, and procedures relating to each of the following topics: development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to comply with the requirements of the IDEA. Corrections will be reviewed for consistency with OSEP Memorandum 09-02 dated October 17, 2008.

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

The data for indicator 4 reflect school year 18-19, and were not affected by covid-19.

**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.**

Annually, districts are required to upload their policies, practices and procedures related to special education identification in their LEA Assurances and Agreement. Districts are notified of any disproportionality when they receive their annual District Data Profile. Those identified as being disproportionate in one or more racial and ethnic groups are subject to an in-depth review of their policies, procedures, and practices with attention to the development and implementation of IEPs, the use of PBIS practices, and procedural safeguards. These reviews are conducted by experienced and knowledgeable SEA personnel. A review of policies, procedures, and practices occurs during all general supervision and monitoring activities, also.  
  
In 2018-2019, four LEAs were found to have significant discrepancy in discipline rates by race and/or ethnicity. The LEAs were notified of their discrepancy in October 2019 on their District Data Profiles. At that time, SEA personnel conducted detailed reviews of the policies, practices and procedures of these LEAs and determined that none demonstrated noncompliance.

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** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**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 >= | 65.00% | 65.50% | 65.50% | 66.00% | 66.00% |
| A | 49.27% | Data | 65.89% | 66.76% | 70.87% | 67.98% | 68.96% |
| B | 2005 | Target <= | 9.84% | 9.50% | 9.50% | 9.25% | 9.25% |
| B | 9.70% | Data | 9.53% | 9.44% | 8.26% | 9.19% | 8.32% |
| C | 2005 | Target <= | 1.85% | 1.85% | 1.85% | 1.85% | 1.83% |
| C | 1.84% | Data | 1.31% | 1.23% | 0.79% | 0.64% | 0.70% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 66.00% |
| Target B <= | 9.25% |
| Target C <= | 1.83% |

**Targets: Description of Stakeholder Input**

**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 | 106,821 |
| 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 | 76,039 |
| 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 | 8,486 |
| 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 | 53 |
| 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 | 304 |
| 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 | 452 |

**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 | 76,039 | 106,821 | 68.96% | 66.00% | 71.18% | Met Target | No Slippage |
| B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 8,486 | 106,821 | 8.32% | 9.25% | 7.94% | 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] | 809 | 106,821 | 0.70% | 1.83% | 0.76% | Met Target | No Slippage |

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

NO

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

In 2019, all five year olds were included in the preschool/early childhood count (indicator 6 data). 5 year olds in kindergarten are not included in the totals reported here (the FS002 report).  
  
Because the child count report was collected in October 2019, this indicator was not affected by Covid-19 mitigation efforts.

## 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 >= | 41.25% | 42.00% | 42.50% | 43.00% | 43.75% |
| A | 39.29% | Data | 44.01% | 48.54% | 34.07% | 32.54% | 32.76% |
| B | 2011 | Target <= | 18.40% | 17.75% | 17.00% | 16.50% | 16.00% |
| B | 18.60% | Data | 13.91% | 13.01% | 15.03% | 16.75% | 16.79% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 43.75% |
| Target B <= | 16.00% |

**Targets: Description of Stakeholder Input**

**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 | 10,054 |
| 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 | 3,495 |
| 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 | 1,592 |
| 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 | 19 |
| 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 | 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

**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 | 3,495 | 10,054 | 32.76% | 43.75% | 34.76% | Did Not Meet Target | No Slippage |
| B. Separate special education class, separate school or residential facility | 1,624 | 10,054 | 16.79% | 16.00% | 16.15% | Did Not Meet Target | No Slippage |

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

NO

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

In 2019, all five year olds were included in the preschool/early childhood count (the FS089 report). 5 year olds in kindergarten are included in the totals reported here, and are not in the FS002 report (shown in indicator 5).  
  
Because the child count report was collected in October 2019, this indicator was not affected by Covid-19 mitigation efforts.

## 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 | 2008 | Target >= | 89.50% | 89.75% | 90.00% | 90.50% | 93.40% |
| A1 | 93.30% | Data | 93.92% | 93.10% | 92.95% | 93.43% | 93.53% |
| A2 | 2008 | Target >= | 58.00% | 58.25% | 58.50% | 58.75% | 59.00% |
| A2 | 54.50% | Data | 61.78% | 61.36% | 59.91% | 63.73% | 60.66% |
| B1 | 2008 | Target >= | 89.00% | 89.25% | 89.50% | 89.75% | 92.90% |
| B1 | 92.80% | Data | 92.97% | 92.25% | 92.57% | 91.65% | 92.66% |
| B2 | 2008 | Target >= | 57.30% | 57.30% | 57.30% | 57.30% | 58.30% |
| B2 | 55.00% | Data | 61.25% | 58.32% | 58.22% | 60.11% | 58.97% |
| C1 | 2008 | Target >= | 91.00% | 91.25% | 91.50% | 91.75% | 93.00% |
| C1 | 92.90% | Data | 94.23% | 93.27% | 92.78% | 93.86% | 93.78% |
| C2 | 2008 | Target >= | 72.00% | 72.00% | 72.00% | 72.00% | 73.00% |
| C2 | 67.70% | Data | 76.09% | 72.66% | 73.49% | 76.27% | 73.62% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1 >= | 93.40% |
| Target A2 >= | 59.00% |
| Target B1 >= | 92.90% |
| Target B2 >= | 58.30% |
| Target C1 >= | 93.00% |
| Target C2 >= | 73.00% |

**Targets: Description of Stakeholder Input**

**FFY 2019 SPP/APR Data**

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

5,743

**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 | 57 | 0.99% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 216 | 3.76% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,920 | 33.44% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,768 | 48.21% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 781 | 13.60% |

| **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)* | 4,688 | 4,961 | 93.53% | 93.40% | 94.50% | Met Target | No Slippage |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 3,549 | 5,742 | 60.66% | 59.00% | 61.81% | Met Target | No Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 55 | 0.96% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 245 | 4.27% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,995 | 34.74% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,676 | 46.60% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 772 | 13.44% |

| **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)* | 4,671 | 4,971 | 92.66% | 92.90% | 93.96% | Met Target | No Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 3,448 | 5,743 | 58.97% | 58.30% | 60.04% | Met Target | No Slippage |

**Outcome C: Use of appropriate behaviors to meet their needs**

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 47 | 0.82% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 184 | 3.20% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,275 | 22.20% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 2,949 | 51.36% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,287 | 22.41% |

| **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)* | 4,224 | 4,455 | 93.78% | 93.00% | 94.81% | Met Target | No Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.  *Calculation: (d+e)/(a+b+c+d+e)* | 4,236 | 5,742 | 73.62% | 73.00% | 73.77% | Met Target | No Slippage |

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

YES

| **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)**

YES

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

Program data for this indicator are collected through Oklahoma's online IEP record system, called EdPlan. LEAs use the system to create electronic records for all students with IEPs, including those in early childhood programs. The Child Outcome Summary Form is completed electronically for each child between the ages of three and five years of age if he or she has had at least six months of service. It is SEA practice that personnel first enter the COSF ratings and evaluation information when the student enters their district and again when the student turns 6 or soon after exit, whichever comes first. If a student moves districts between the ages of 3 and 5 (after receiving entry ratings), the district in which the child is enrolled will report the exit ratings. The online IEP system reminds personnel (via error notices) to enter the data if they neglect to do so in a timely manner.  
  
The State adjusted its exit rating reporting guidance this past year to reflect the changes in the child count reporting regarding 5 year olds in kindergarten. Districts are now expected to complete the COSF exit ratings in late spring when a child is four or five and is expected to enter Kindergarten the following school year. This will ensure that ECO scores reflect only the time spent in early childhood programs, rather than including kindergarten experiences.   
  
The data for this indicator are then pulled through reporting functions in the online system and cleaned to ensure that all relevant records are included.

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

Child outcomes do not appear to have been negatively affected by the covid-19 pandemic. Schools engaged in remote learning and service provision during the last month or so of the 18-19 school year to support student learning. The State did see a slight increase in the number of COSF exit ratings that were not completed timely. Districts completed those in the fall when students returned to school.

## 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**

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 82.11% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 88.25% | 89.50% | 90.50% | 91.75% | 93.00% |
| Data | 88.89% | 90.14% | 97.24% | 98.38% | 98.66% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 93.00% |

**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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 12,019 | | 12,262 | 98.66% | 93.00% | 98.02% | Met Target | No Slippage |

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

116,879

**Percentage of respondent parents**

10.49%

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

The Parent Survey used to calculate this indicator does not differentiate between preschool children and school age children. All families answer the same survey. Because preschool children are served in public schools, we believe that it is appropriate for parents of preschool children to answer the same survey as school-age children.

| **Sampling Question** | **Yes / No** |
| --- | --- |
| Was sampling used? | NO |

| **Survey Question** | **Yes / No** |
| --- | --- |
| Was a survey used? | YES |
| If yes, is it a new or revised survey? | NO |
| 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.**

All parents are supposed to have an opportunity to voluntarily response to the survey; a weighted sample is not used. As a result, a perfect representation of child count is unlikely to occur. Despite the pandemic (see the effects below), the response rate increased by more than one percent last year, reflecting the positive efforts made by the State and LEAs to increase parent responses.   
  
UPDATED: This year, the State continues to work with local districts to increase response rates, particularly those that are larger and have had low rates in the past. We have encouraged them to plan more deliberately when surveys are provided to families and to ensure that all families have the opportunity to respond. Because larger districts are more likely to have lower response rates while also serving a more diverse student population, by increasing response rates in these districts, representation should improve. In particular, we expect that working with larger districts to increase local response rates will result in a response pool that more adequately represents families of students in high school and/or who identify as Black and African-American or Hispanic/Latino.   
  
However, with the pandemic, districts have reported that it has been more difficult this current year to encourage parents to respond to the parent survey remotely. This is the case despite it being made available online and over the phone, in English and Spanish.

**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 gender distribution of the survey aligns very closely to that of child count. The “prefer not to answer” group accounts for the minor differences.  
  
Table 1: Gender Demographics SY 19-20  
Percentage of CC & Percentage of Respondents  
Male: 64.3% 62.1%  
Female: 35.7% 33.7%  
Prefer not to answer: 0.0% 4.2%  
  
The age distribution does not align with child count, but does match typical historical voluntary response patterns for the State's survey: parents of young children are more likely to respond than parents of older children, especially those in high school.  
  
Table 2: Age Demographics SY 19-20  
Percentage of CC & Percentage of Respondents  
3-5 years: 8.6% 12.8%  
6-10 years: 35.5% 37.9%  
11-13 years: 23.7% 22.5%  
14-18 years: 31.5% 23.6%  
19+ years old: 0.7% 0.5%  
Prefer not to answer: 0.0% 2.8%  
  
UPDATED: There are also a few meaningful differences in survey response frequencies across certain races (Table 3) and regions (Table 4). We believe the variation in these two demographic areas is based in the differential response rates of small and large districts. Small districts—those with a special education child count of 78 or fewer (78 was the median 2019 child count in Oklahoma)—have an average response rate of 18.8% while large districts (child counts of 79 or higher) have an average response rate of 9.6%. Small districts are more common in the outlying regions of the state and are more likely to have higher enrollments of white students, raising the overall participation rate for that group. As mentioned earlier, increasing response rates in larger districts to be even with smaller districts should balance representation across the state and among the various race and ethnic groups.  
  
Regarding race: Hispanics are under-represented in the survey response pool compared to child count, as are African-Americans, both by about 5 percent. White respondents are over-represented by about the same percentage, while "two or more races" are also over-represented, though by a smaller proportion. Native Americans, Asians and Pacific Islanders are present in the survey results in about the same proportions as child count.  
  
Table 3: Race Demographics SY 19-20  
Percentage of CC & Percentage of Respondents  
Asian: 0.9% 0.5%  
Black: 9.6% 4.8%  
Hispanic/Latino: 15.0% 10.4%  
Native American/Indian: 15.4% 15.8%  
Pacific Islander/Native Hawaiian: 0.2% 0.3%  
Two or More Races: 10.3% 11.4%  
White: 48.5% 54.1%  
Prefer not to answer: 0.0% 2.6%  
  
The regional response patterns are very similar to last year. The central region (which includes several of the largest districts in the state) is substantially under-represented in the survey response pool, while the Northwest and Southeast regions (areas of very small districts that emphasize survey participation) are substantially over-represented.  
  
Table 4: Region SY 19-20  
Percentage of CC & Percentage of Respondents  
Panhandle: 0.6% 1.1%  
Northwest: 4.2% 10.5%  
Northeast: 33.2% 37.0%  
Central: 37.8% 22.5%  
South Central: 5.9% 5.9%  
Southwest: 9.8% 10.7%  
Southeast: 8.5% 12.3%

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

The response rate was dramatically affected by the State's pandemic response. In March 2020, the Oklahoma State Dept of Education closed all schools and districts for two weeks after spring break ended, and classes did not resume until April 6. On April 6, no districts were conducting in-person education. Everyone was remote learning. As a result, parent survey responses dropped substantially beginning in March through the end of the state fiscal year.  
  
Percent of total responses received, by quarter (19-20):  
July to Sept: 23%  
Oct to Dec: 37%  
Jan to March: 34%  
April to June: 4%  
  
Compare this to 2018-2019 data, when the responses were more evenly distributed throughout the year. If parents responded at the same rate as they did in 18-19 between April and June, Oklahoma could have had 2000 more responses than were actually received.  
  
Percent of total responses received, by quarter (18-19):  
July to Sept: 23%  
Oct to Dec: 28%  
Jan to March: 27%  
April to June: 22%

## 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**

This has been completed in the demographic review in the previous section for 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.

# 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** |
| --- | --- |
| 2016 | 0.20% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 0% | 0% | 0% | 0% | 0% |
| Data | 0.00% | 0.00% | 0.20% | 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.**

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 5 | 0 | 513 | 0.00% | 0% | 0.00% | Met Target | No Slippage |

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

YES

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

The OSDE-SES has defined “disproportionate representation” as a risk ratio of 2.6 or greater (overrepresentation) in any given year (every one year). When disproportionate representation is determined for a district, the OSDE-SES will determine if the disproportionality is the result of inappropriate identification by reviewing policies, practices and procedures as submitted by the LEA. Data for each district and charter school were analyzed for all racial and ethnic groups.  
  
Calculating Disproportionate Representation  
OSDE-SES calculated a risk ratio for each of the seven racial/ethnic category in each LEA: overall risk of identification is determined by comparing the risk of any racial/ethnic group to the risk of all other racial/ethnic groups.   
  
To be included in the analysis, a group must have at least 10 students with disabilities of a particular racial/ethnic category and at least 10 students in the same racial/ethnic category in overall enrollment. That group risk is then compared to either the LEA or the state risk for all other students. For the LEA comparison group to be used, the LEA must have at least 10 students with disabilities in 'all other' racial/ethnic categories and at least 10 students in 'all other' racial/ethnic categories in overall enrollment; otherwise the statewide comparison group risk was used. OSDE-SES identified districts with a risk ratio of 2.6 or greater as disproportionate in the relevant racial/ethnic category or categories. The data source for Oklahoma’s analysis was Table 1 (Child Count) of Information Collection 1820-0043 (Report of Children with Disabilities Receiving Special Education under Part B of the IDEA) for all children with disabilities aged 6 through 21 served under the IDEA.

**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.**

Annually, districts are required to upload their policies, practices and procedures related to special education identification in the LEA Assurances and Agreement. Districts are notified of any disproportionality when they receive their annual District Data Profile. Those identified as being disproportionate in one or more racial and ethnic groups are subject to an in-depth review of their policies, procedures, and practices with attention to the development and implementation of a comprehensive referral and evaluation process, including procedural safeguards. These reviews are conducted by experienced and knowledgeable SEA personnel who flag problematic policies, practices and procedures for discussion and additional review. If any indicate inappropriate identification is a concern, OSDE-SES will work with the LEA for revision and improvement. A review of policies, procedures, and practices occurs during all general supervision and monitoring activities, also.

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

The data for indicator 9 reflect the child count collected on October 1, 2019, and were not affected by 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** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
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## 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** |
| --- | --- |
| 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 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.**

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|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 79 | 0 | 408 | 0.00% | 0% | 0.00% | Met Target | No Slippage |

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

YES

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

The OSDE-SES has defined “disproportionate representation” as a risk ratio of 2.6 or greater (overrepresentation) in any given year (every one year). When disproportionate representation is determined for a district, the OSDE-SES will determine if the disproportionality is the result of inappropriate identification by reviewing policies, practices and procedures as submitted by the LEA. Data for each district and charter school were analyzed for all racial and ethnic groups.  
  
Calculating Disproportionate Representation  
OSDE-SES calculated a risk ratio for each of the seven racial/ethnic category in each LEA: overall risk of identification is determined by comparing the risk of any racial/ethnic group to the risk of all other racial/ethnic groups.   
  
To be included in the analysis, a group must have at least 10 students with disabilities of a particular racial/ethnic category and at least 10 students in the same racial/ethnic category in overall enrollment. That group risk is then compared to either the LEA or the state risk for all other students. For the LEA comparison group to be used, the LEA must have at least 10 students with disabilities in 'all other' racial/ethnic categories and at least 10 students in 'all other' racial/ethnic categories in overall enrollment; otherwise the statewide comparison group risk was used. OSDE-SES identified districts with a risk ratio of 2.6 or greater as disproportionate in the relevant racial/ethnic category or categories. The data source for Oklahoma’s analysis was Table 1 (Child Count) of Information Collection 1820-0043 (Report of Children with Disabilities Receiving Special Education under Part B of the IDEA) for all children with disabilities aged 6 through 21 served under the IDEA.

**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.**

Annually, districts are required to upload their policies, practices and procedures related to special education identification in the LEA Assurances and Agreement. Districts are notified of any disproportionality when they receive their annual District Data Profile. Those identified as being disproportionate in one or more racial and ethnic groups are subject to an in-depth review of their policies, procedures, and practices with attention to the development and implementation of a comprehensive referral and evaluation process, including procedural safeguards. These reviews are conducted by experienced and knowledgeable SEA personnel who flag problematic policies, practices and procedures for discussion and additional review. If any indicate inappropriate identification is a concern, OSDE-SES will work with the LEA for revision and improvement. A review of policies, procedures, and practices occurs during all general supervision and monitoring activities, also.

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

The data for indicator 9 reflect the child count collected on October 1, 2019, and were not affected by 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** |
| --- | --- | --- | --- |
| 0 | 0 | 0 | 0 |

**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 | 90.89% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 95.32% | 96.69% | 98.09% | 97.65% | 98.77% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 18,705 | 17,893 | 98.77% | 100% | 95.66% | Did Not Meet Target | Slippage |

**Provide reasons for slippage**

Slippage is due to the effects of the covid-19 pandemic on districts' ability to conduct comprehensive evaluations. The State reviewed all reasons for late evaluations submitted by districts, and confirmed which were truly affected by the pandemic. Oklahoma confirmed 586 cases of delays resulting from the pandemic's effects on the availability of personnel and the ability of districts to hold in-person evaluations.   
  
In FFY 2018, Oklahoma reported 248 cases of evaluations delayed past the State-established timeline of 45 school days. This year, there were 812 delayed evaluations. Without the pandemic, we estimate that the final count of late evaluations would have been similar to FFY 2018.

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

812

**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.**

Max days beyond 45 school days needed to complete: 365  
  
Counts of reasons  
LEA failure to follow procedures: 133  
MEEGS team needed more data: 17  
Lack of resources: 20  
School calendar break & Staffing issues: 24  
Late Part C referral: 1  
Parents not showing or delayed meeting: 43  
Pandemic or other extreme events: 586  
Note that some districts reported more than one reason for a particular case. However, if a district reported a second reason along with "pandemic," the second reason was used. Pandemic reasons are unique.

**Indicate the evaluation timeline used:**

The State established a timeline within which the evaluation must be conducted

**What is the State’s timeline for initial evaluations? If the State-established timeframe provides for exceptions through State regulation or policy, describe cases falling within those exceptions and include in (b).**

45 school days. Exceptions are not allowed.

**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.**

Each LEA is required to report aggregated counts of "Total Referrals," "Evaluations completed within 45 school days from parent consent," "Evaluations not completed within 45 school days from parent consent" broken down by reason, "The maximum amount of days after 45 school days to complete the tardy evaluation", and "Reasons why evaluations were not completed with the 45 day timeline" through the online IEP system. The LEA must validate the End-of-Year report and certify the data being submitted is accurate and true. The SEA then monitors LEAs through District Data Profiles and on-site comprehensive monitoring. Technical assistance is provided by the compliance and program specialists.

**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** |
| --- | --- | --- | --- |
| 84 | 31 | 46 | 7 |

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

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

In July 2020 the OSDE-SES conducted Verification of Continuous Compliance (Prong II) procedures for FFY 2018 findings to ensure systemic compliance across each LEA for Indicator 11 data. Continuous compliance reviews are completed by using a random sampling process, by which student records are randomly selected for a compliance check. If all selected records are compliant, the LEA is resolved and removed from the compliance watch-list for the fiscal year. If the LEA does not yet demonstrate 100 percent compliance, additional sanctions are applied and records continue to be monitored.   
  
To check for compliance, an indicator-specific report was pulled from the online IEP system (in the same manner other data reviews are made) for each of the 84 LEAs identified with findings of non-compliance in FFY 2018. Each report included a representative, randomly-selected sample of student records (depending on the size of the district). These indicator-specific reports were reviewed by OSDE-SES specialists for systemic compliance in July 2020. 30 LEAs were verified as continuously compliant (100 percent compliant), and were removed from the compliance watch-list. One district has since closed permanently, and is no longer being monitored. 53 LEAs had not yet achieved 100 percent compliance.   
  
The LEAs that had additional findings of noncompliance were notified in October, 2020. They were required to examine their student records to determine the reason(s) for continued noncompliance. They identified SMART goals to improve problem areas and clarified internal monitoring processes and procedures. During a subsequent State review of records (in January 2021) for students in these LEAs whose parent consent was signed between Sept 1 and November 30, 2020, 46 LEAs demonstrated full compliance with Indicator 11. The other seven LEAs did not. These seven continue to be under review, and are receiving intensive technical assistance that includes corrective action planning and root cause analysis.   
  
Note: The random samples of student records selected for the prong II reviews are pulled from the LEA’s population of student records relevant to the indicator. Only records of students with initial evaluations in one quarter of the most recent fiscal year were sampled for indicator 11. OSDE-SES checked all records in LEAs with a total of 11 or fewer records that met this criterion. Otherwise, sample sizes ranged from 11 to 34, depending on the size of the LEA. The sample sizes are statistically representative, within the following assumptions:   
• Margin of error of 10 percent: this is the chance of missing (not finding) noncompliance in the sample when it exists.   
• Confidence level of 95 percent: this is the level of confidence that results found are true and representative.   
• Expected response distribution of minimum 90 percent compliance.

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

The OSDE-SES annually conducts monitoring activities for 100% of the State’s LEAs to determine if all LEAs are in compliance for Indicator 11. Non-compliance is identified through data submitted by LEAs through the annual June end-of-year data collection as well as specific monitoring activities such as desk audits and onsite visits.   
  
After analyzing data collected for Indicator 11 in June 2019, non-compliance was identified in 84 LEAs. The 84 LEAs identified as non-compliant were issued a letter of findings and required to make child-specific corrections within 30 days of receipt of the letter. All 84 LEAs were notified by November 15, 2019. Subsequently, LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed Parent Consent forms and Multidisciplinary Evaluation and Eligibility Group Summary (MEEGS) forms submitted by all LEAs through the statewide online IEP system (OK EdPlan) in order to determine that evaluations were conducted in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.   
  
The verification process was completed in December 2019 and January 2020. The 84 LEAs identified as being non-compliant demonstrated that they have corrected child specific (Prong I) noncompliance.

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Seven LEAs did not achieve 100 percent compliance in FFY 2018, and continue to receive intensive technical assistance that includes required corrective action planning and root cause analysis. These LEAs have had to develop targeted plans focused on improving compliance on Indicator 11. The LEAs were considered non-compliant for FFY 2019. These LEAs had to resolve child-specific findings of noncompliance for FFY 2019.

**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 | 2 | 1 | 1 |
| FFY 2016 | 2 | 2 | 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***

In the FFY 2018 SPP/APR submission, two LEAs continued to be under review for noncompliance from FFY 2017. In subsequent data reviews (random record checks January 2021), one LEA demonstrated 100 percent compliance. The second LEA continued to show noncompliance. This LEA is receiving continuing intensive technical assistance that includes required corrective action planning and root cause analysis, and the LEA has had to develop targeted plans focused on improving compliance on Indicator 11. The LEA was considered non-compliant in FFY 2019, also, because continuous compliance was not demonstrated during the prong 2 reviews completed, but was not counted as a new finding. These LEAs had to resolve child-specific findings of noncompliance for FFY 2019.

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

LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed Parent Consent forms and Multidisciplinary Evaluation and Eligibility Group Summary (MEEGS) forms submitted by all LEAs through the statewide online IEP system (OK EdPlan) in order to determine that evaluations were conducted in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.   
  
The verification process was completed in December 2019 and January 2020. The two LEAs identified as being non-compliant have since demonstrated that they have corrected all individual cases of noncompliance.

**FFY 2017**

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

**Actions taken if noncompliance not corrected**

One LEA has yet to achieve 100 percent compliance. This LEA continues to receive intensive technical assistance that include required corrective action planning and root cause analysis, and the LEA had had to develop targeted plans focused on improving compliance on Indicator 11. The LEA will undergo a subsequent continuous compliance check in summer 2021.

**FFY 2016**

**Findings of Noncompliance Verified as Corrected**

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

In the FFY 2018 SPP/APR submission, two LEAs continued to be under review for noncompliance from FFY 2016. In subsequent data reviews (random record checks in January 2021), both LEAs demonstrated 100 percent compliance in the time frame reviewed (parent consents signed after September 1, 2020).

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

LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed Parent Consent forms and Multidisciplinary Evaluation and Eligibility Group Summary (MEEGS) forms submitted by all LEAs through the statewide online IEP system (OK EdPlan) in order to determine that evaluations were conducted in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.   
  
The verification process was completed in July 2020. The two LEAs identified as being non-compliant have since demonstrated that they have corrected all individual cases of noncompliance.

## 11 - Prior FFY Required Actions

None

## 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. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining seven uncorrected findings of noncompliance identified in FFY 2018 and one uncorrected finding of noncompliance identified in 2017 were 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 each LEA with remaining noncompliance identified in FFY 2018 and 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 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** |
| --- | --- |
| 2005 | 86.72% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.84% | 99.06% | 98.52% | 95.94% | 95.38% |

**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. | 1,463 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 180 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 873 |
| 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. | 264 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 57 |
| 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. | 873 | 962 | 95.38% | 100% | 90.75% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Slippage is due to the effects of the covid-19 pandemic on districts' ability to conduct comprehensive evaluations and/or hold timely meetings with parents. The State reviewed all reasons for late evaluations submitted by districts, and confirmed which were truly affected by the pandemic. Oklahoma confirmed 58 cases of delays resulting from the pandemic's effects on the availability of personnel and the ability of districts to hold in-person evaluations and/or meet with parents to complete an eligibility and IEP prior to the child's third birthday.   
  
In FFY 2018, Oklahoma reported 45 cases of evaluations delayed past the 3rd birthday. This year, there were 89 delays. Without the pandemic, we estimate that the final count of late evaluations would have been better than FFY 2018 (closer to 31, or 89-58).

**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**

89

**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.**

Maximum days beyond the third birthday: 162  
  
Counts of Reasons for Delay  
LEA Failure to Follow Procedures: 7  
MEEGS Team Needed More Data: 3  
Lack of Resources: 4  
School Calendar Break/Lack of Staff: 3  
Late Part C Referral: 10  
Parent did not show or delayed meeting: 8  
Extreme weather or pandemic events: 58  
Note that some districts reported more than one reason for a particular case. However, if a district reported a second reason along with "pandemic," the second reason was used. Pandemic reasons are unique.

**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.**

All LEAs are required to enter specific data (including "Total referred from Part C", "Total determined 'Not Eligible'; Determination complete before 3rd birthday", "Total determined 'Eligible'; IEP completed before 3rd Birthday", "Total parents that declined services", "Total referred less than 90 days prior to 3rd birthday", "IEP not completed prior to 3rd birthday", "Maximum number of days beyond 3rd birthday IEP completed", as well as the reasons for delay) into the End-of-Year District Data Summary Report through the online IEP system.   
  
The district superintendent must login to the End-of-Year Report and certify the data being submitted is accurate and true. LEAs are monitored through District Data Profiles and comprehensive monitoring. Technical assistance is then provided by compliance and program specialists.

**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** |
| --- | --- | --- | --- |
| 34 | 30 | 2 | 2 |

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

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

In July 2020 the OSDE-SES began conducting Verification of Continuous Compliance (Prong II) procedures for FFY 2018 findings to ensure systemic compliance across each LEA for Indicator 12 data. Continuous compliance reviews are completed by using a random sampling process, by which student records are randomly selected for a compliance check. If all selected records are compliant, the LEA is resolved and removed from the compliance watch-list for the fiscal year. If the LEA does not yet demonstrate 100 percent compliance, additional sanctions are applied and records continue to be monitored.   
  
To check for subsequent noncompliance, an indicator-specific report was pulled from the online IEP system (in the same manner other data reviews are made) for each of the 34 LEAs identified with findings of noncompliance in FFY 2018. Each report included a representative, randomly-selected sample of student records (depending on district size). These indicator-specific reports were reviewed by OSDE-SES specialists for systemic noncompliance in July 2020. Twenty-nine LEAs were verified as continuously compliant (100 percent compliant), and were removed from the compliance watch-list. Once district has since closed permanently, and is no longer being monitored. Four LEAs had not yet achieved 100 percent compliance.   
  
The four LEAs that had additional findings of noncompliance was required to examine their student records to determine the reason(s) for continued noncompliance. They identified SMART goals to improve problem areas and clarified internal monitoring processes and procedures. During a subsequent State review of records for students in this LEA who transitioned from the Part C program to the Part B program since September 1, 2020, the State found two LEAs to be in 100 percent compliance with Indicator 12. Two LEAs did not achieve 100 percent compliance.  
  
Note: The random samples of student records selected for the prong II reviews are pulled from the LEA’s population of student records relevant to the indicator. Only records of students who turned 3 and were in transition from Part C to Part B in one quarter of the recent fiscal year were sampled for indicator 12. OSDE-SES checked all records in LEAs with a total of 11 or fewer records that met this criterion. Otherwise, sample sizes ranged from 11 to 34, depending on the size of the LEA. The sample sizes are statistically representative, within the following assumptions:   
• Margin of error of 10 percent: this is the chance of missing (not finding) noncompliance in the sample when it exists.   
• Confidence level of 95 percent: this is the level of confidence that results found are true and representative.   
• Expected response distribution of minimum 90 percent compliance.

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

The OSDE-SES annually conducts monitoring activities for 100% of the State’s LEAs to determine if all LEAs are in compliance for Indicator 12. Noncompliance is identified through data submitted by LEAs through the annual June end-of-year data collection as well as specific monitoring activities such as desk audits and onsite visits.   
  
After analyzing data collected for Indicator 12 in June 2019, non-compliance was identified in 34 LEAs. The 34 LEAs identified as non-compliant were issued a letter of findings and required to make child-specific corrections within 30 days of receipt of the letter. All 34 LEAs were notified by November 15, 2019. Subsequently, LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed eligibility and IEP documentation through the statewide online IEP system (OK EdPlan) in order to determine that both were completed in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.   
  
The verification process was completed in December 2019 and January 2020. The 34 LEAs identified as being non-compliant have since demonstrated that they have corrected child specific (Prong I) noncompliance.

**FFY 2018 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

Two LEAs did not achieve 100 percent compliance in FFY 2018, and continue to receive intensive technical assistance that includes required corrective action planning and root cause analysis. The LEAs have had to develop targeted plans focused on improving compliance on Indicator 12. The LEAs were considered non-compliant for FFY 2019. The LEAs have had to resolve child-specific findings of noncompliance for FFY 2019.

**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 | 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***

In the FFY 2018 SPP/APR submission, one LEA continued to be under review for noncompliance from FFY 2017. In a subsequent data review using the same sampling procedures described earlier (completed in July 2020), this LEA demonstrated 100 percent compliance.

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

LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed eligibility and IEP documentation through the statewide online IEP system (OK EdPlan) in order to determine that both were completed in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.   
  
The verification process was completed in December 2019 and January 2020. The LEA identified as non-compliant has since demonstrated that it has corrected all individual cases of noncompliance.

## 12 - Prior FFY Required Actions

None

## 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. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining two uncorrected findings of noncompliance identified in FFY 2018 were 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 each LEA with remaining noncompliance identified in FFY 2018: (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** |
| --- | --- |
| 2009 | 95.21% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 97.72% | 99.72% | 99.57% | 99.86% | 99.96% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 26,027 | 26,205 | 99.96% | 100% | 99.32% | Did Not Meet Target | No Slippage |

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

State database that includes data for the entire reporting year

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

Data on secondary transition is collected through the State's online IEP system. Secondary transition plans are required to be completed as part of the IEP process in the online system for all students above the age of 16 or prior to entering 9th grade (possibly as young as 14), whichever comes first. Since an LEA cannot complete an IEP within the system without a comprehensive secondary transition plan, the SEA monitors all LEAs that had IDEA-eligible students that did not have one or more compliant IEPs. These LEAs are in non-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 | 14 |

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

The rate of compliance dropped this FFY due to the covid-19 pandemic. Many districts reported difficulties with engaging families during the remote learning months to conduct IEP meetings.

**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** |
| --- | --- | --- | --- |
| 8 | 7 | 1 | 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***

In July 2020 the OSDE-SES began conducting Verification of Continuous Compliance (Prong II) procedures for FFY 2018 findings to ensure systemic compliance across each LEA for Indicator 13 data. Continuous compliance reviews are completed by using a random sampling process, by which student records are randomly selected for a compliance check. If all selected records are compliant, the LEA is resolved and removed from the compliance watch-list for the fiscal year. If the LEA does not yet demonstrate 100 percent compliance, additional sanctions are applied and records continue to be monitored.   
   
To check for subsequent noncompliance, an indicator-specific report was pulled from the online IEP system (in the same manner other data reviews are made) for each of the eight LEAs identified with findings of non-compliance in FFY 2018. Each report included a representative, randomly-selected sample of student records, depending on the size of the district. These indicator-specific reports were reviewed by OSDE-SES specialists for systemic non-compliance in July 2020. Seven LEAs were verified as continuously compliant (100 percent compliant), and were removed from the compliance watch-list. One LEA had not yet achieved 100 percent compliance.   
  
The one LEA that had additional findings of noncompliance was required to examine its student records to determine the reason(s) for continued noncompliance. It identified SMART goals to improve problem areas and clarified internal monitoring processes and procedures. During a subsequent State review of records of high school students in this LEA enrolled in the fall of 2020, the State found that the LEA was in 100 percent compliance with Indicator 13.   
  
Note: The random samples of student records selected for the prong II reviews are pulled from the LEA’s population of student records relevant to the indicator. Only records of active high school students with IEPs in one quarter of the recent fiscal year were sampled for indicator 13. OSDE-SES checked all records in LEAs with a total of 11 or fewer records that met this criterion. Otherwise, sample sizes ranged from 11 to 34, depending on the size of the LEA. The sample sizes are statistically representative, within the following assumptions:   
  
• Margin of error of 10 percent: this is the chance of missing (not finding) noncompliance in the sample when it exists.   
• Confidence level of 95 percent: this is the level of confidence that results found are true and representative.   
• Expected response distribution of minimum 90 percent compliance.

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

The OSDE-SES annually conducts monitoring activities for 100% of the State’s LEAs to determine if all LEAs are in compliance for Indicator 13. Noncompliance is identified through data submitted by LEAs through the annual June end-of-year data collection as well as specific monitoring activities such as desk audits and onsite visits.   
  
After analyzing data collected for Indicator 13 in June 2019, noncompliance was identified in eight LEAs. The eight LEAs identified as non-compliant were issued a letter of findings and required to make child-specific corrections within 30 days of receipt of the letter. All eight LEAs were notified by November 15, 2019. Subsequently, LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed IEP documentation through the statewide online IEP system (OK EdPlan) in order to determine that they were completed in accordance with the regulatory requirements. OSDE-SES staff reviewed the documentation to determine if the child-specific corrections had been made. In addition, when necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.   
  
The verification process was completed in December 2019 and January 2020. The eight LEAs identified as being non-compliant have since demonstrated that they have corrected child specific (Prong I) noncompliance.

**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 | 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***

In the FFY 2018 SPP/APR submission, one LEA continued to be under review for noncompliance from FFY 2017. In a subsequent data review using the sampling procedures outlined earlier (completed in July 2020), this LEA demonstrated 100 percent compliance.

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

LEAs were required to submit data showing evidence of completed documentation for identified students. The OSDE-SES reviewed IEP documentation through the statewide online IEP system (OK EdPlan) in order to determine that they were completed in accordance with the regulatory requirements for indicator 13. OSDE-SES staff also reviewed the documentation to determine if the child-specific corrections had been made. When necessary, the OSDE-SES conducted follow-up phone calls to ensure that education records were available for review through the online IEP system. If records were not available for review, LEAs were required to submit the documentation directly to the OSDE-SES.   
  
The verification process was completed in July 2020. The LEA identified as noncompliant has since demonstrated that it has corrected all individual cases of noncompliance.

## 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. 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 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 | 2009 | Target >= | 32.00% | 32.00% | 32.00% | 32.00% | 32.75% |
| A | 31.42% | Data | 26.53% | 24.27% | 22.32% | 24.56% | 26.42% |
| B | 2009 | Target >= | 47.00% | 47.25% | 47.50% | 48.00% | 49.00% |
| B | 46.45% | Data | 65.55% | 60.19% | 62.74% | 60.58% | 57.19% |
| C | 2009 | Target >= | 60.00% | 60.25% | 60.50% | 61.00% | 73.60% |
| C | 73.50% | Data | 85.59% | 82.28% | 74.74% | 76.60% | 73.36% |

**FFY 2019 Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 32.75% |
| Target B >= | 49.00% |
| Target C >= | 73.60% |

**Targets: Description of Stakeholder Input**

**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 | 1,100 |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 245 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 319 |
| 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) | 87 |
| 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). | 121 |

| **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) | 245 | 1,100 | 26.42% | 32.75% | 22.27% | Did Not Meet Target | Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 564 | 1,100 | 57.19% | 49.00% | 51.27% | 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) | 772 | 1,100 | 73.36% | 73.60% | 70.18% | Did Not Meet Target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A** | The State suspects that enrollment in higher education has been affected by the pandemic, given the timing of the survey, but students would have enrolled before the pandemic began. The State also believes that enrollment in higher education has been affected in recent years by rising costs in higher education and difficulty accessing available financial assistance. Oklahoma has a scholarship for students who come from low socioeconomic families, but students with disabilities do not often qualify because they do not meet the course requirements. The State is working to improve access to and use of this scholarship. |
| **C** | The State suspects that overall engagement in any employment or educational activity has been affected by the covid-19 pandemic. In our most recent survey, we queried respondents about the effects of the pandemic on employment. About a quarter of respondents said that they had been laid off as a result of the pandemic. Respondents who were first ready to seek out employment in spring 2020 may have experienced barriers that prevented them from working. |

**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? | NO |

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

| **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 | OK Survey Protocol 2019-20 |

**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 pool of respondents is a close representation of all leavers in all categories, with a few exceptions. The response rate is much higher than last year, increasing from 14.99 percent to 19.79 percent. The pool of possible respondents included all school leavers in SY 2018-2019 aged 17 years or older. 5557 individuals were included in the list and all contact information was shared with the contracted polling organization. Of these, 1100 could be contacted and were willing to respond. Though this is higher than last year, OSDE-SES recognizes that this rate may not be sufficient to ensure representation of all special education school leavers for the state or LEAs, reducing the validity and reliability of the data.   
  
Efforts are being made to improve low response rates due to inaccurate contact information and leavers’ unwillingness to respond to the survey request (1,682 of the 5,557 exiters had blocked, business, disconnected, fax/computer tone, unknown, or wrong phone numbers). Districts have begun to assist the state by updating contact information just prior to graduation and by raising awareness of the importance of the survey among personnel. And this year, seven districts opted to conduct the survey with their own students, resulting in much higher response rates (82% overall). OSDE-SES has also selected a new polling organization to conduct the survey, and this organization is able to survey students several months earlier in the year. OSDE-SES personnel and stakeholders such as the Oklahoma Transition Council are working to develop additional strategies to encourage participation.  
  
As shown in the demographic comparison below, the pool of respondents resembles the sampling frame in most categories. Significance tests were conducted to assess whether the differences in proportions between the entire population and the respondents were significant. Two comparisons stand out: Students who dropped out of school were substantially less likely to respond to the survey than graduates. Similarly, White students were much more likely to respond to the survey than African-American students. Students identifying with other racial groups were not significantly less likely to respond.   
  
Representation by groups:  
Females: 37.6% of exiters; 37.4% of respondents (no significant difference)  
  
Asians: 0.7% of exiters; 0.81% of respondents (no significant difference)  
African-Americans: 10.9% of exiters; 8.4% of respondents (significant difference)  
Hispanic/Latino: 11.7% of exiters; 10.1% of respondents (no significant difference)  
Native American: 19.4% of exiters; 19.5% of respondents (no significant difference)  
Pacific Islander/Native Hawaiian: 0.09% of exiters; 0.09% of respondents (no significant difference)  
Two or more races: 7.7% of exiters; 8.1% of respondents (no significant difference)  
White: 49.5% of exiters; 53.1% of respondents (significant difference)  
  
Dropouts: 4.2% of exiters; 1.6% of respondents (significant difference)  
Graduates: 88.3% of exiters; 95.4% of respondents (significant difference)  
Other: 8.5% of exiters; 3.0% of respondents (significant difference)

| **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.**

OSDE-SES has directed its polling organization to conduct surveys equitably, regardless of student demographics. All exiters are contacted in a variety of ways, and weighted sampling is not conducted. The polling organization attempts to contact students multiple times if the contact information is not "unreachable." We expect that if the response rate increases through the efforts described previously, then the respondent pool will continue to become more representative (as it did this year with regard to Hispanic students). Unfortunately, if under-represented students (such as drop-outs) are more likely to have their contact information change after exiting high school, those students will be less likely to respond to the survey, and those groups will continue to be under-represented.

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

The State does not believe that the quality or validity of the data collected for indicator 14 were affected by the pandemic.

## 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**

This has been completed in the demographic review in the previous section 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.   
  
OSEP notes that one or more of the attachments included in the State’s FFY 2019 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

# 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 is 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 | 8 |
| 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 | 7 |

**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**

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2012 | 62.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 65.00% | 65.00% | 0.00% | 65.00% - 70.00% | 65.00% - 70.00% |
| Data | 100.00% | 66.67% | 78.57% | 100.00% | 100.00% |

**Targets**

| **FFY** | **2019 (low)** | **2019 (high)** |
| --- | --- | --- |
| Target | 65.00% | 70.00% |

**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 (low)** | **FFY 2019 Target (high)** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 7 | 8 | 100.00% | 65.00% | 70.00% | 87.50% | Met Target | No Slippage |

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

The State does not believe the quality or validity of the data for indicator 15 were affected by the pandemic.

## 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 | 9 |
| 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 | 0 |
| 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 | 8 |

**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**

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 92.31% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 82.00% | 82.75% | 83.50% | 84.25% | 85.00% |
| Data | 95.65% | 75.00% | 85.71% | 60.00% | 84.62% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 85.00% |

**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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 8 | 9 | 84.62% | 85.00% | 88.89% | Met Target | No Slippage |

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

The State does not believe the quality or validity of the data for indicator 16 were affected by the pandemic.

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

The State reported fewer than ten mediations held in FFY 2019. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan



# Overall State APR Attachments



# 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.**

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04/29/21 10:46:54 AM

# ED Attachments

  

1. Data suppressed due to privacy protection [↑](#footnote-ref-2)
2. Percentage blurred due to privacy protection [↑](#footnote-ref-3)