**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**

**Oregon**

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**

The Oregon Department of Education’s (ODE) Office of Enhancing Student Opportunities is responsible for Oregon’s 197 school districts and 35 Early Intervention/Early Childhood Special Education (EI/ECSE) programs that serve students eligible for IDEA services. ODE works collaboratively with districts and programs to support improved academic and functional results for students and youth experiencing disability. During FFY 2019, ODE implemented IDEA Part B through a system of coordinated General Supervision activities.  
  
Part B indicator data presented in this Annual Performance Report demonstrate the continued need for Oregon to improve outcomes for students and youth experiencing disability.   
  
The following sections present Oregon’s processes for ensuring IDEA Part B school age general supervision, technical assistance, professional development, stakeholder engagement, and reporting to the public.

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

All activities in the State’s General Supervision system were impacted starting in March 2020 due to COVID-19. The State incurred additional challenges during FFY 2019 with Oregon’s wildfires beginning September 7, 2020. Unless otherwise noted, data reported for indicators were collected during the 2019-2020 school year. Any slippage or changes to past trajectories for these indicators may be due to these unprecedented statewide challenges.

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

197

**General Supervision System**

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

The State works collaboratively with 197 school districts, as well as nine contractors that implement 35 Early Intervention/Early Childhood Special Education (EI/ECSE) county programs on comprehensive data collection and analysis, performance reporting, improvement planning, implementation, and progress reporting.  
  
The State’s general supervision system is coordinated by the Office of Enhancing Student Opportunities. Within this Office are data, monitoring, and legal components designed to identify noncompliance. The general supervision system components are organized as follows:  
  
System Performance Review & Improvement (SPR&I): All school districts and EI/ECSE programs in the State are required to participate in this annual accountability and performance reporting process. This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. Districts and programs conduct individual child file reviews annually to collect procedural compliance data. These data are collected on a specified number of child files determined by the State. Individual child procedural compliance data is collected by districts and programs and submitted to the State electronically through the SPR&I database. The SPR&I system provides the State with the mechanism for review of district/program policies, procedures, and systems, to ensure the requirements set forth in 34 CFR § 300.600-609.  
  
Complaints and dispute resolution: While the State oversees complaints, due process hearings, mediations, and other alternative dispute resolution activities as part of its general supervision responsibilities, only complaints and due process hearings result in findings of noncompliance.  
The State uses independent contractors to conduct mediations and complaint investigations, with support, coordination, and additional assistance by the State’s special education legal specialist. The State provides training and oversight for these complaint contractors. When a complaint final order identifies noncompliance and orders corrective action, State staff work with district and program staff to ensure completion of corrective action within required timelines. The State uses the same complaint resolution system and complaint contractors for Part B and Part C.  
  
The State has a one-tier due process hearing system. All special education due process hearings are conducted by Office of Administrative Hearings (OAH) administrative law judges. OAH and the State have trained OAH administrative law judges to conduct special education hearings. When a due process hearing final order identifies noncompliance and orders corrective action, State staff work with district and program staff to ensure completion of corrective action within required timelines. The State uses the same due process hearing system and complaint contractors for Part B and Part C.

**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.**

The State has a Technical Assistance System that utilizes technology and personnel to provide districts and programs timely access to data and activities that ensure compliance, as well as improved academic and functional outcomes for students experiencing disabilities. The State uses a statewide, web-based mechanism to implement a cycle of continuous improvement called System Performance Review & Improvement (SPR&I). This web-based mechanism gives districts and programs access to data so that monitoring compliance/noncompliance can occur with regularity and accuracy and allows for timely corrective action to occur.   
  
The State provides Technical Assistance (TA) to the 197 school districts in several ways. An assigned Education Specialist provides technical assistance on a range of topics as requested by the district. TA to districts and programs includes the following: advice by experts; assistance in identifying and implementing professional development, instructional strategies or methods of instruction that are based on scientifically based instruction and using experienced program coordinators and specialists to provide advice, technical assistance, and support; and collaboration with institutions of higher education, educational service agencies, national centers of technical assistance, and private TA providers.   
  
During FFY 2019, the State provided web-based and on-site training on data collection and compliance and performance issues as well as trainings for new district and program participants as part of the SPR&I mechanism.   
  
The State website provides up-to-date forms, statutes and regulations, policies and procedures, and program operation guidelines at the following link: https://www.oregon.gov/ode/students-and-family/SpecialEducation/GeneralSupervision/Pages/default.aspx.  
  
The State uses email distribution lists and virtual events such as webinars to provide timely information and support to programs ensuring that critical information is provided.

**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.**

The State has several systems in place to provide professional development to its 197 school districts. As the State undergoes reorganization, the State continues to work to braid multiple federal programs to improve outcomes for students historically and currently marginalized, including students experiencing disability.   
  
For example, the State allocates IDEA discretionary funds and State Personnel Development Grant (SPDG) funds to offer targeted professional development focusing on the implementation of evidence based practices for students experiencing disability. The ORTIi (Oregon Response to Instruction and Intervention) project continues to provide coaching support to district teams working to implement a multi-tiered system of supports (MTSS) for academics in elementary and middle schools. Through the SPDG, the SWIFT Education Center supports a network of regional MTSS coaches working with districts to implement an MTSS.   
  
Additionally, the State maintains relationships with a number of partners working directly with districts, students, and families to deliver professional learning in local contexts. The State contracts with FACT Oregon to provide workshops each year for families in both English and Spanish. Topics include procedural safeguards and navigating the IEP or IFSP. The Statewide Transition Technical Assistance Network (TTAN) supports districts with secondary and post-secondary students experiencing disabilities. The TTAN includes professional development and technical assistance for teachers, administrators, and other educational service providers regarding transition-related curricula/instructional approaches, outcome-based transition planning approaches, facilitation interagency teams and resources.  
  
The State Advisory Council for Special Education (SACSE) brings together a variety of partners to provide a channel for information to be shared among programs and stakeholders. SACSE membership includes families, representatives from higher education, state and local officials, administrators, private school representatives and charter school representatives.  
  
The State coordinates with the Coalition of Oregon School Administrators (COSA) to develop and offer professional learning for district special education administrative teams on a wide variety of topics. Engagement mechanisms include conferences, virtual events, and individual supports with Agency staff. The Office of Enhancing Student Opportunities provided leadership for a multi-day event focusing on topics in special education leadership during October 2019. During this reporting period, the State began offering monthly support calls for new special education directors, providing a foundation for standards of practice statewide.

**Stakeholder Involvement**

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

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

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

YES

**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 produces At-A-Glance Special Education Profiles for each of the 197 school districts and 35 Early Intervention/Early Childhood Special Education (EI/ECSE) county programs. An additional EI/ECSE profile is produced for the Confederated Tribes of Warm Springs and a combined report card for Sherman, Gilliam, and Wheeler counties. These report cards display the indicators on the Annual Performance Report that are required for public reporting.   
  
The State reports on Indicators B6, B7, B8, and B12 to the public on the EI/ECSE profiles. The State requires that districts distribute the profiles to all parents of students with IFSPs or IEPs. At-A-Glance Special Education Profiles are released to the public within 120 days of the APR submission to the Office of Special Education Programs (OSEP).   
  
The At-A-Glance Special Education Profiles are available alongside the accountability reports required through ESSA for each LEA: https://www.ode.state.or.us/data/reportcard/ReportList.aspx. Additional information about the At-A-Glance Special Education Profiles (e.g., technical assistance documents) is available at: https://www.oregon.gov/ode/schools-and-districts/reportcards/SpEdReportCards/Pages/default.aspx.  
  
The State’s SPP is posted at: https://www.oregon.gov/ode/reports-and-data/SpEdReports/Pages/State-Performance-Plan-and-Annual-Performance-Report-for-Special-Education.aspx.  
  
The State did publicly report on the FFY 2018 (July 1, 2018-June 30, 2019) performance of each LEA located in the State on the targets in the State's performance plan as required by sections 616(b)(2)(C)(ii)(I) and 642 of the IDEA. Instructions for accessing the report card are provided in the “Public Reporting” section of the Introduction.   
  
The following two paragraphs are noted in the “Reporting to the Public Section”:  
  
The format of the public report (Special Education Profiles) has changed, and the State understands that further clarification of the format is required. Given the time required to make these format changes, they will not be completed prior to the end of clarification week.  
  
Targets:  
The State is attaching an “At-A-Glance Profile IDEA Indicator Crosswalk” to the introduction section. The targets are displayed on the published profiles and the state will add numbers to the Profiles published for the next SPP/APR.

## Intro - Prior FFY Required Actions

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

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

As per OSEP’s determination, Oregon engaged with TA centers to focus on the following areas of results and compliance.  
  
Results   
1. Indicator 1: Percentage of Children with Disabilities who Graduated with a Regular High School Diploma  
  
Compliance  
1. Indicator 4B: Significant discrepancy, by race and ethnicity, in the rate of suspension and expulsion, and policies, procedures or practices that contribute to the significant discrepancy and do not comply with specified requirements.  
  
The State received technical assistance from the following organizations targeting the above areas of results and compliance:  
  
1. Center for IDEA Early Childhood Data Systems (DaSy)   
2. IDEA Data Center (IDC)  
3. National Center for Systemic Improvement (NCSI)  
4. Center for IDEA Fiscal Reporting (CIFR)  
5. Early Childhood Technical Assistance Center (ECTA)  
6. National Center for Intensive Intervention (NCII)  
7. The CEEDAR Center  
  
As a result of technical assistance from the above organizations, the State:   
  
1. Increased internal capacity for priority-driven improvement planning including data collection and analysis  
2. Adapted LEA monitoring and support activities to continue work with LEAs begun prior to COVID-19 to reduce discrepancy and disproportionate representation in IDEA’s equity indicators, including indicator 4B  
3. Installed new mechanisms for LEA procedural compliance review  
4. Reduced burden on LEAs through streamlining improvement plan submissions  
5. Revised protocols related to State and LEA use of IDEA funds  
6. Increased State staff capacity to effectively monitor district use of IDEA funds   
7. Continued developing internal State organizational structures to allow for successful collaboration among programs supporting similar needs in LEAs  
8. Rebalanced the State’s human and fiscal resources to support increased State organization and collaboration  
9. Developed plans to implement new strategies for increasing participation of underrepresented populations in parent involvement data collections  
10. Adapted LEA monitoring and support activities to continue work with LEAs begun prior to COVID-19 to reduce discrepancy and disproportionate representation in IDEA’s equity indicators

## Intro - OSEP Response

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

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

## Intro – State Attachments

 

# Indicator 1: Graduation

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of youth with Individualized Education Programs (IEPs) graduating from high school with a regular high school diploma. (20 U.S.C. 1416 (a)(3)(A))

**Data Source**

Same data as used for reporting to the Department of Education (Department) under Title I of the Elementary and Secondary Education Act (ESEA).

**Measurement**

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

**Instructions**

Sampling is not allowed.

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

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

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

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

## 1 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 42.43% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 72.00% | 75.00% | 78.00% | 81.00% | 84.00% |
| Data | 51.11% | 52.74% | 55.50% | 58.81% | 60.57% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 86.00% |

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**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 | 6,568 |
| 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 | 63.4%[[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 | 6,568 | 60.57% | 86.00% | 63.4%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*.***

The State offers two different regular diplomas available to K-12 students in Oregon: the regular Oregon Diploma and a modified version of the Oregon Diploma. The requirements for a student to earn either the regular or modified Oregon Diploma are the same for all students, regardless of whether they receive special education support through an IEP.  
  
Graduation Requirements for the regular Oregon Diploma are comprised of three distinct components: (1) High Academic Expectations, (2) Essential Skills, and (3) Personalized Learning. A student can demonstrate that they have met the requirement for high academic expectations through completion of at least 24 credits, with specific requirements for different subject areas. Students are also required to demonstrate proficiency in the Essential Skills of reading, writing, and math. Proficiency can be demonstrated in a number of ways, including through statewide standardized assessments or through locally determined measures. Students are also expected to personalize their learning pathway through the development and implementation of an education plan and education profile. Personalized Learning requirements also include career-related learning experiences and the ability and opportunity for students to apply and extend their knowledge in skills in ways that help them pursue their post-school goals.  
  
The Modified version of the Oregon Diploma may be earned by students who have demonstrated an inability to meet the full set of academic content standards required for the regular Oregon Diploma, even with reasonable accommodations. To earn a Modified Diploma in Oregon, students are required to earn 24 credits in courses modified per student need, complete the Personalized Learning Requirements, and demonstrate proficiency in the required Essential Skills. To be eligible for the Modified Diploma, a student must have a documented history of an inability to maintain grade level achievement due to significant learning and instructional barriers or a documented history of a medical condition that creates a barrier to achievement. These graduation requirements apply to all students, including those students with IEPs.

**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)**

COVID-19 did not impact this indicator.

## 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** |
| --- | --- |
| 2008 | 3.57% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 3.40% | 3.40% | 3.30% | 3.20% | 3.10% |
| Data | 6.10% | 5.79% | 5.65% | 5.00% | 4.86% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 3.10% |

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

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

Option 2

**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) | 3,518 |
| 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) | 464 |
| 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) | 154 |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (d) | 1,003 |
| 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) | 12 |

**Has your State made or proposes to make changes to the data source under Option 2, when compared to the information reported in its FFY 2010 SPP/APR submitted on February 1, 2012? (yes/no)**

NO

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

YES

**Change numerator description in data table (yes/no)**

NO

**Change denominator description in data table (yes/no)**

NO

**If use a different calculation methodology is yes, provide an explanation of the different calculation methodology**

Dropout Rates in Oregon High Schools  
The State collects dropout data in the Annual Cumulative Average Daily Membership (ADM) Data Collection each year at the end of the school year, which identifies students' enrollment dates and status as of the last day of enrollment for the year.  
  
The 2018-19 report presents dropout rates by school and district for students who dropped out of grades 9 through 12 between July 1, 2018 and June 30, 2019, along with rates for specific student groups measured against the count of enrolled students at the beginning of the school year (Fall Membership for most schools or ADM enrollment for schools providing only hourly instruction).  
  
A student is counted towards the dropout rate if they withdrew from school and did not graduate or transfer to another school to work towards graduation. A number of reasons exist for which students may have withdrawn from school, or not be attending school, but not be included in the dropout rate. These reasons include students who:  
• are deceased  
• are being home-schooled  
• are enrolled in an alternative school or hospital  
• are enrolled in a foreign exchange program  
• are temporarily absent because of suspension, a family emergency, or severe health problems that prevent attendance at school  
• received a GED certificate, or  
• received an adult high school diploma from a community college.  
  
Rules developed by the State ensure a complete accounting of students who drop out during the school year and students who drop out between school years.  
  
The State’s dropout reporting procedures are consistent with the procedures developed by the National Center for Education Statistics (NCES) for uniform and comparable reporting of dropout rates by the states. The State uses the NCES data in its methodology. For FFY 2019, the reported data is from 2018-2019. The one-year statewide dropout rate calculation uses the NCES formula: the number of students (in grades 9-12) who have dropped out divided by the number of students (in grades 9-12) reported on the October ADM Collection, multiplied by 100.  
  
The ADM is the number of students enrolled as of the first school day in October. The enrollment count includes fifth-year seniors (shown as 12th graders) and students placed in an alternative program, regardless of where the student attends school.

**FFY 2019 SPP/APR Data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Number of youth with IEPs who exited special education due to dropping out | Total number of High School Students with IEPs by Cohort | **FFY** **2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 1,285 | 27,319 | 4.86% | 3.10% | 4.70% | Did Not Meet Target | No Slippage |

**Provide reasons for slippage, if applicable**

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

A student is counted towards the dropout rate if they withdrew from school and did not graduate or transfer to another school to work towards graduation. There are a number of reasons for which students may have withdrawn from school, or not be attending school, but not be included in the dropout rate. These reasons include students who:  
• are deceased,  
• are being home schooled  
• are enrolled in an alternative school or hospital  
• are enrolled in a foreign exchange program  
• are temporarily absent because of suspension, a family emergency, or severe health problems that prevent attendance at school  
• received a GED certificate, or  
• received an adult high school diploma from a community college.

**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)**

COVID-19 did not impact this indicator.

## 2 - Prior FFY Required Actions

None

## 2 - OSEP Response

## 2 - Required Actions

# Indicator 3B: Participation for Students with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Indicator 3A – Reserved

B. Participation rate for children with IEPs

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

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

**Data Source**

3B. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS185 and 188.

**Measurement**

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

**Instructions**

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

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

Indicator 3B: Provide separate reading/language arts and mathematics participation rates, inclusive of all ESEA grades assessed (3-8 and high school), for children with IEPs. Account for ALL children with IEPs, in all grades assessed, including children not participating in assessments and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3B - Indicator Data

**Reporting Group Selection**

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

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

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Overall | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Overall | 96.10% | Actual | 93.59% | 92.19% | 90.21% | 88.79% | 89.82% |

**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 | 97.30% | Actual | 93.16% | 91.43% | 89.43% | 87.98% | 89.05% |

**Targets**

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

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**FFY 2019 Data Disaggregation from EDFacts**

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

YES

**Data Source:**

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

**Date:**

**Reading Assessment Participation Data by Grade**

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

**Data Source:**

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

**Date:**

**Math Assessment Participation Data by Grade**

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

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

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 89.82% | 95.00% |  | N/A | N/A |

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

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Overall |  |  | 89.05% | 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.**

https://www.oregon.gov/ode/educator-resources/assessment/Pages/Assessment-Results.aspx

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

COVID-19 impacted this indicator.  
  
The impact on data completeness, validity, and reliability for the indicator  
COVID-19 impacted data completeness, validity, and reliability for Indicator B3 in the following ways: The State received a waiver from the U.S. Department of Education that allowed the state to suspend statewide summative assessments in English language arts, mathematics, and science.  
  
An explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator  
On March 12, 2020, Governor Brown implemented a mandate that closed all schools. The purpose of this mandate was to lessen the spread of the COVID-19 virus. Beginning on April 13, 2020, school districts were mandated to provide only distance learning instruction for all students. In-person interactions between school district personnel and students were not permitted.   
  
COVID-19 specifically impacted the State’s ability to collect the data for B3 because the state received a testing waiver from the U.S. Department of Education, and suspended statewide summative assessments in English language arts, mathematics, and science for the 2019-2020 school year.  
  
Any steps the State took to mitigate the impact of COVID-19 on the data collection  
The State received a testing waiver from the U.S. Department of Education that allowed Oregon to suspend statewide assessments in English language arts and mathematics for the 2019-2020 school year. There is no mitigation when data are not available.  
  
Assessment participation data was not collected due to COVID-19. For more information, see the section called File Specifications Not Collected Due to COVID-19 at the following URL: https://www2.ed.gov/about/inits/ed/edfacts/sy-19-20-nonxml.html  
  
This Department's public webpage includes documentation that the 2019-2020 Statewide Assessment was suspended: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Pages/Adapted-At-A-Glance-1920.aspx.   
  
The Statewide Assessment Technical manual also specifies that statewide assessment was suspended https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Documents/Adapted\_At-A-Glance\_Technical\_Manual\_1920.pdf.

## 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** | Elementary | X | X | X |  |  |  |  |  |  |  |  |
| **B** | Middle |  |  |  | X | X | X |  |  |  |  |  |
| **C** | HS |  |  |  |  |  |  |  |  | X |  |  |

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Elementary | 2016 | Target >= | 54.50% | 54.50% | 28.00% | 35.00% | 41.00% |
| **A** | Elementary | 23.15% | Actual | 29.70% | 24.79% | 23.15% | 24.74% | 24.12% |
| **B** | Middle | 2016 | Target >= | 54.50% | 54.50% | 28.00% | 35.00% | 41.00% |
| **B** | Middle | 18.41% | Actual | 22.25% | 19.86% | 18.41% | 19.16% | 18.20% |
| **C** | HS | 2016 | Target >= | 54.50% | 54.50% | 28.00% | 35.00% | 41.00% |
| **C** | HS | 29.33% | Actual | 31.73% | 29.17% | 29.33% | 30.48% | 26.97% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Elementary | 2016 | Target >= | 40.00% | 40.00% | 25.00% | 32.00% | 39.00% |
| **A** | Elementary | 20.91% | Actual | 26.10% | 21.89% | 20.91% | 20.80% | 20.59% |
| **B** | Middle | 2016 | Target >= | 40.00% | 40.00% | 25.00% | 32.00% | 39.00% |
| **B** | Middle | 13.57% | Actual | 17.01% | 14.39% | 13.57% | 12.20% | 12.14% |
| **C** | HS | 2016 | Target >= | 40.00% | 40.00% | 25.00% | 32.00% | 39.00% |
| **C** | HS | 10.39% | Actual | 11.79% | 10.24% | 10.39% | 8.46% | 9.02% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Elementary | 41.00% |
| Reading | B >= | Middle | 41.00% |
| Reading | C >= | HS | 41.00% |
| Math | A >= | Elementary | 39.00% |
| Math | B >= | Middle | 39.00% |
| Math | C >= | HS | 39.00% |

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**FFY 2019 Data Disaggregation from EDFacts**

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

YES

**Data Source:**

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

**Date:**

**Reading Proficiency Data by Grade**

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

**Data Source:**

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

**Date:**

**Math Proficiency Data by Grade**

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

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

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Elementary |  |  | 24.12% | 41.00% |  | N/A | N/A |
| **B** | Middle |  |  | 18.20% | 41.00% |  | N/A | N/A |
| **C** | HS |  |  | 26.97% | 41.00% |  | 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** | Elementary |  |  | 20.59% | 39.00% |  | N/A | N/A |
| **B** | Middle |  |  | 12.14% | 39.00% |  | N/A | N/A |
| **C** | HS |  |  | 9.02% | 39.00% |  | 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.**

https://www.oregon.gov/ode/educator-resources/assessment/Pages/Assessment-Results.aspx

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

COVID-19 impacted this indicator.  
  
The impact on data completeness, validity, and reliability for the indicator  
COVID-19 impacted data completeness, validity, and reliability for Indicator B3 in the following ways: The State received a waiver from the U.S. Department of Education that allowed the state to suspend statewide summative assessments in English language arts, mathematics, and science.  
  
An explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator  
On March 12, 2020, Governor Brown implemented a mandate that closed all schools. The purpose of this mandate was to lessen the spread of the COVID-19 virus. Beginning on April 13, 2020, school districts were mandated to provide only distance learning instruction for all students. In-person interactions between school district personnel and students were not permitted.   
  
COVID-19 specifically impacted the State’s ability to collect the data for B3 because the state received a testing waiver from the U.S. Department of Education, and suspended statewide summative assessments in English language arts, mathematics, and science for the 2019-2020 school year.  
  
Any steps the State took to mitigate the impact of COVID-19 on the data collection  
The State received a testing waiver from the U.S. Department of Education that allowed Oregon to suspend statewide assessments in English language arts and mathematics for the 2019-2020 school year. There is no mitigation when data are not available.  
  
Assessment participation data was not collected due to COVID-19. For more information, see the section called File Specifications Not Collected Due to COVID-19 at the following URL: https://www2.ed.gov/about/inits/ed/edfacts/sy-19-20-nonxml.html  
  
This Department's public webpage includes documentation that the 2019-2020 Statewide Assessment was suspended: https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Pages/Adapted-At-A-Glance-1920.aspx.   
  
The Statewide Assessment Technical manual also specifies that statewide assessment was suspended https://www.oregon.gov/ode/schools-and-districts/reportcards/reportcards/Documents/Adapted\_At-A-Glance\_Technical\_Manual\_1920.pdf.

## 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 | 62.96% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 7.20% | 6.70% | 68.65% | 68.15% | 67.65% |
| Data | 13.71% | 8.63% | 62.96% | 66.67% | 53.13% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 62.00% |

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**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.**

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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 21 | 31 | 53.13% | 62.00% | 67.74% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Multiple factors contributed to slippage in this category. The count of Districts with a significant discrepancy grew in 2018-19 from 17 districts to 21 districts. Six of the districts from 2017-18 were no longer identified with a significant discrepancy. Of the 21 districts currently identified, ten were newly identified and eleven were districts previously identified in 2017-18. For the eleven repeater districts, six demonstrated a reduction in their risk ratio. Seven of the repeater eleven districts either stayed the same or varied in their count by one to two individual students.  
  
Although slippage occurred in this indicator, the statewide special education discipline rate for B4A reduced from 0.57% in APR 2019 to 0.54% in APR 2020. The State has a low suspension/expulsion incidence rate among students receiving special education services. Slight changes will cause wide differences in the resulting data and year-to-year variation in the number and frequency of districts that are flagged, as these are small numbers to start.   
  
During statewide training and when providing guidance to districts regarding discipline, the State emphasized the importance of accurately reporting all out-of-school suspensions (e.g., assuring documentation of a removal event in the event that parents/guardians are asked to pick up early for behavioral infractions). Specifically, school districts have been better trained to formally document all removals from classrooms and/or schools. This additional training and guidance resulted in more accurate reporting of disciplinary exclusions.  
  
Finally, districts described increased challenges in supporting the social, emotional and behavioral needs of students experiencing disabilities, as well as those students experiencing disabilities who have been impacted by trauma. Oregon districts have variability in effectiveness of identifying the need for, and then supporting the appropriate interventions for students, beginning at the universal Tier I level of support. As Tier I serves as the universal foundation upon which all other tiers are built, Tier II and III supports are consequently impacted. The State continues to work with districts to support: (a) team structures, data analysis, application of consistent interventions/supports and program evaluation; and (b) the delivery of meaningful professional development to ensure instructional alternatives to exclusionary discipline that include positive behavior interventions and supports, healing-centered/trauma-informed, racial equity-centered, strengths-based, social emotional learning practices that are deployed systemically with effectiveness.

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

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

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

The State defines significant discrepancy as a rate of suspension/expulsion for greater than 10 days based on a rate ratio greater than 2.0 and more than three IDEA-eligible students with greater than 10 days suspension/expulsion. Only districts that meet both of these criteria are flagged for significant discrepancy. The State compares the rates of suspensions and expulsions for children with IEPs to children without IEPs within the district. Data is collected from all school districts through the State discipline incidents collection.  
  
The standard operating procedures for this indicator include:  
  
1. Preparing and disseminating to all districts a discipline report for students with and without disabilities.  
  
2. Identifying districts that exceed the threshold with a significant discrepancy.  
  
3. Requiring districts with a significant discrepancy to answer questions about district policies, procedures, and practices related to this indicator. Questions regard the development and implementation of IEPs, the use of positive behavioral interventions & supports (PBIS) and strategies, the use of manifestation determination processes, professional development, and procedural safeguards to ensure compliance with IDEA, as required by 34 CFR § 300.170(b).  
  
4. Providing written notification of noncompliance to districts that have policies, procedures, and practices that contribute to the significant discrepancy.  
  
5. Requiring districts that have policies, procedures, or practices contributing to the significant discrepancy to submit an action plan to address significant discrepancies in the areas of behavior intervention and disciplinary removal.  
  
6. Reviewing district action plans and accompanying documentation to ensure correction of noncompliance with this indicator. In the event that a submitted plan does not adequately address noncompliance, the State provides guidance to the district and requests revisions to ensure compliance or appropriate corrective action.  
  
7. The State’s procedural compliance review system requires districts that exceed the threshold for this indicator to complete and submit additional file reviews specific to students with discipline incidences, to assure compliance.  
  
\*166 of the State's 197 districts were excluded from the calculation because they did not meet the State's minimum n-size.

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

The State used 2016 as the baseline year for this indicator.  
The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2019 SPP/APR report.

**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.**

During FFY 2019, the State reviewed plans for 21 districts identified with significant discrepancy based on 2018-2019 data. The planning process includes a review of three main areas:  
(1) district data decision-making;   
(2) school/district processes; and   
(3) procedural safeguards.   
  
Related sub-components that are reviewed across these three areas include manifestation determination, functional behavior assessment and behavior intervention planning, district professional development, special factors consideration, and other relevant factors as appropriate. Based on this review, the 21 identified districts either developed a behavior intervention and disciplinary removal action plan or reviewed their existing action plan and noted progress or made plan adjustments, as necessary.

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

**If YES, select one of the following:**

The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

**Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008*.***

In FFY 2019, ODE reviewed plans for 21 (21/31) districts identified with significant discrepancy. The planning process includes a review of three main areas: (1) district data decision-making; (2) school/district processes; and (3) procedural safeguards. Related sub-components that are reviewed across these three areas include manifestation determination, functional behavior assessment and behavior intervention planning, district professional development, special factors consideration, and other relevant factors as appropriate. Districts flagged for noncompliance developed a behavior intervention and disciplinary removal action plan, as well as the process by which they will review subsequent data to ensure there are no other systemic issues of noncompliance, pursuant to OSEP memo 09-02. Districts that already had an action plan reviewed their existing action plan and note progress or make plan adjustments, as necessary. All plans were submitted to the State. Plans that did not meet State requirements were amended and resubmitted by the district until each met the State's established requirements.

**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** |
| --- | --- | --- | --- |
| 17 | 17 | 0 | 0 |

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

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

In FFY 2018, using 2017-2018 data, the State identified 17 (17/32) districts as having significant discrepancies in the rates of suspensions/expulsions of greater than 10 days for more than three children with IEPs. The State reviewed plans for the 17 districts identified with significant discrepancy. The planning process includes a review of three main areas: (1) district data decision-making; (2) school/district processes; and (3) procedural safeguards. Related sub-components that are reviewed across these three areas include manifestation determination, functional behavior assessment and behavior intervention planning, district professional development, special factors consideration, and other relevant factors as appropriate.  
  
Based on these extensive reviews, each of the 17 districts developed a behavior intervention and disciplinary removal action plan and corrected all identified non-compliance within one year. Each district developed, submitted, and obtained State approval for their plans. The State verified, by review of revised policies and procedures and a review of documentation from district Procedural Compliance Review (PCR) file reviews on files from the discipline incidents collection, that each LEA with non-compliance identified in FFY 2018 was correctly implementing the specific regulatory requirements and that 100% (17/17) of findings of noncompliance in FFY 2018 were corrected within one year. Districts with noncompliance demonstrated correction of practices that contributed to the noncompliance as well as current compliance with 34 C.F.R. §300.170(b) based on a State review of updated district plans.

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

The following steps were completed for the verification process for each individual noncompliance:  
Individual cases of noncompliance were identified through the State’s review process. Districts flagged for noncompliance articulated a plan for correcting noncompliance, as well as the process by which they reviewed subsequent data to ensure there are no other systemic issues of noncompliance. All plans were submitted to the State.  
  
In FFY 2018, the State reviewed plans for each of the 17 districts identified with significant discrepancy. Plans that did not adequately address compliance were amended and resubmitted by the district until each met the State's established requirements.  
  
Additionally, within the Systems Performance Review & Improvement (SPR&I) system B4 report tab, flagged districts are able to view discipline incident details for any students suspended/expelled greater than 10 days as part of their required data review.   
  
Additionally, file reviews specific to students with discipline incidences are triggered into the PCR system for identified districts. Districts completed file reviews on individual student discipline files to assure compliance. Districts with noncompliance completed additional reviews of further student discipline files to assure any non-compliance is not systemic in nature. At this stage, if any of the additional files reviewed were to be found non-compliant, districts completed a systemic correction. Utilizing the State file review system, the State was able to ensure that any noncompliance was corrected as soon as possible, but in no case more than one year from identification.

**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

The State must report, in the FFY 2020 SPP/APR, on the correction of noncompliance that the State identified in FFY 2019 as a result of the review it conducted pursuant to 34 C.F.R. § 300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (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 district, 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.

# 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 | 1.52% | 5.58% | 0.00% | NVR | NVR |

**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.**

183

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 10 | 0 | 14 | NVR | 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 State defines significant discrepancy as the rates of expulsions and suspensions of greater than 10 days in a school year for children with IEPs in each LEA compared to the rates for all children without IEPs in the same LEA and flags districts where:  
• The rate ratio analysis shows a value greater than 2.0 in the same race/ethnic category.  
• At least five IDEA eligible students received long-term suspension/expulsions in a specific race/ethnic category.  
  
Only districts that meet both of these criteria are flagged for significant discrepancy.

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

COVID-19 did not directly impact ODE’s ability to collect the initial data for this indicator, or the data completeness, validity, and reliability of that initial data.  
Follow-up interviews with districts to determine compliance status were delayed when the State paused its monitoring due to COVID-19. Follow-up interviews were completed by April 2, 2021.

**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.**

The State conducted follow-up interviews with the ten districts identified with significant discrepancy using 2018-2019 data. Part of the State’s process is to conduct the follow-up interviews to determine compliance status. Of Oregon's 197 districts, 183 were excluded from the calculation because of not meeting the State's minimum n-size. The State conducted follow-up interviews with the ten districts identified with significant discrepancy in Indicator B4B to determine compliance status and, if necessary, verify correction of noncompliance. Although the data are pulled from the correct reporting year, these follow-up interviews were delayed due to COVID-19. Follow-up interviews with districts to determine compliance status were delayed when the State paused its monitoring due to COVID-19. Follow-up interviews were completed by April 2, 2021.  
  
The interviews included a review of each district’s policies, procedures, and practices related to three main areas:  
1. The development and implementation of IEPs;  
2. The use of positive behavioral interventions and supports;  
3. Procedural safeguards, including the manifestation determination review process established within each district.  
  
Based on these interviews with the ten districts, the State was able to finalize identification and verification of correction of noncompliance. In discussing the data with the districts, the State has determined that they are compliant with the Act. The State has determined that the flagging for this indicator was not indicative of noncompliance for the ten identified districts.  
  
The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

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** |
| --- | --- | --- | --- |
| 12 | 12 | 0 | 0 |

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

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

In FFY 2018, using 2017-2018 data, the State identified 12 districts that had a significant discrepancy by race or ethnicity and policies, procedures, or practices that contributed to significant discrepancy. Each district addressed each individual case of noncompliance through a planning process. This process included a review of three main areas: (1) district data decision-making; (2) school/district processes; and (3) procedural safeguards. Related sub-components that were reviewed across these three areas included manifestation determination, interim services, special factors consideration, functional behavioral assessment and behavior intervention planning, and other relevant factors as appropriate.  
  
These 12 districts to completed a corrective action plan to address the discrepancy regarding the development and implementation of IEPs, the use of positive behavioral interventions and supports, and the use of procedural safeguards. For noncompliance identified in FFY 2018, the State verified that these districts showed 100% (12/12) compliance one year after the initial noncompliance was identified based on a review of the required plans. Districts with noncompliance demonstrated correction of practices that contributed to the noncompliance as well as current compliance with 34 C.F.R. §300.170(b) based on a State review of updated district plans.

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

Individual cases of noncompliance were identified through the planning process required for each district identified with a significant discrepancy. The planning process included a review of three main areas: (1) district data decision-making; (2) school/district processes; and (3) procedural safeguards. Related sub-components that were reviewed across these three areas included manifestation determinations, staff training, special factors consideration, functional behavioral assessment and behavior intervention planning, and other relevant factors as appropriate. Plans submitted by districts were reviewed to determine noncompliance. Districts flagged for noncompliance were required to articulate a plan for correcting individual cases of noncompliance, as well as the process by which they will review subsequent data to ensure there are no other systemic issues of noncompliance.  
  
In FFY 2018, the State reviewed corrective action plans for each of the twelve districts identified with significant discrepancy. These plans discussed policies, procedures, or practices that could have contributed to their significant discrepancy. Districts evaluated their data and decision-making processes and corrected instances of noncompliance and made adjustments, as warranted. All plans were submitted to the State. Plans that did not adequately address compliance were amended and resubmitted by each district to ODE until each met the State's established requirements. Although the districts were flagged for noncompliance, they were able to show through their district plan that systemic policies, procedures, or practices did not contribute to significant discrepancy. The State verified that these districts showed 100% (12/12) compliance corrected within one year after the initial noncompliance was identified based on a review of the required plans.  
  
Additionally, file reviews specific to students with discipline incidences are triggered into the Procedural Compliance Review (PCR) system for identified districts. File reviews were completed by districts on student discipline files to assure compliance. Districts with noncompliance completed additional reviews of further files to assure any non-compliance is not systemic in nature. At this stage, if any of the additional files reviewed were to be found non-compliant, districts completed a systemic correction. Utilizing the State file review system, the State was able to ensure that any noncompliance was corrected as soon as possible, but in no case more than one year from identification.

**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

The State did not provide valid and reliable data for FFY 2018. The State must provide valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR.

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

The State has provided valid and reliable data for FFY 2019 in the FFY 2019 SPP/APR.

## 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 >= | 72.00% | 72.00% | 72.00% | 73.00% | 73.00% |
| A | 70.60% | Data | 72.92% | 73.37% | 73.49% | 73.66% | 73.93% |
| B | 2005 | Target <= | 10.80% | 10.70% | 10.70% | 10.60% | 10.60% |
| B | 11.30% | Data | 10.57% | 10.15% | 9.90% | 9.84% | 9.64% |
| C | 2005 | Target <= | 1.80% | 1.80% | 1.80% | 1.80% | 1.80% |
| C | 2.20% | Data | 1.42% | 1.19% | 1.20% | 1.44% | 1.73% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 75.00% |
| Target B <= | 10.60% |
| Target C <= | 1.80% |

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**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 | 82,484 |
| 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 | 61,528 |
| 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 | 7,888 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | c1. Number of children with IEPs aged 6 through 21 in separate schools | 1,135 |
| 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 | 52 |
| 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 | 286 |

**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 | 61,528 | 82,484 | 73.93% | 75.00% | 74.59% | Did Not Meet Target | N/A |
| B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 7,888 | 82,484 | 9.64% | 10.60% | 9.56% | Met Target | N/A |
| C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3] | 1,473 | 82,484 | 1.73% | 1.80% | 1.79% | Met Target | N/A |

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

NO

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

COVID-19 did not impact this indicator.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

Reporting requirements for the IDEA section 618 data collection (specifically, IDEA Part B Child Counts and Educational Environments) were updated to allow States to include five-year-olds in Kindergarten in file specification FS002 - Children with Disabilities (IDEA) School Age and exclude these children from file specification FS089 - Children with Disabilities (IDEA) Early Childhood for School Year (SY) 2019-20. SY 2019-20 (i.e., FFY 2019) was the transition year for this change; States had the option to report five-year-olds in Kindergarten in FS002 in their SY 2019-20 submission or wait to do so with their SY 2020-21 submission, when the change becomes permanent. The State transitioned to reporting five-year-olds in Kindergarten in FS002 for its SY 2019-20 submission under IDEA section 618. This change impacts the State’s data for SPP/APR Indicators 5 and 6, because the required data source for SPP/APR Indicators 5 and 6 is the same data as used for reporting to the Department under IDEA section 618. Therefore, the State’s slippage status indicates “NA” for this indicator. However, the State must revise the baseline for this indicator, using FFY 2019 data.

## 5 - Required Actions

The State did not revise the baseline for this indicator, as required due to the change in the data source. The State must revise its baseline using data from FFY 2019.

# 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 >= | 35.00% | 35.50% | 35.50% | 36.00% | 36.00% |
| A | 32.70% | Data | 37.00% | 39.91% | 45.25% | 45.05% | 44.57% |
| B | 2011 | Target <= | 24.60% | 24.00% | 24.00% | 23.50% | 23.50% |
| B | 25.60% | Data | 22.93% | 23.30% | 19.80% | 19.03% | 19.17% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 36.00% |
| Target B <= | 23.50% |

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**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 | 9,009 |
| 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 | 4,339 |
| 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 | 2,168 |
| 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 | 40 |
| 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 | 1 |

**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 | 4,339 | 9,009 | 44.57% | 36.00% | 48.16% | Met Target | N/A |
| B. Separate special education class, separate school or residential facility | 2,209 | 9,009 | 19.17% | 23.50% | 24.52% | Did Not Meet Target | N/A |

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

NO

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

The COVID-19 pandemic had no impact on the data for this indicator for the FFY 19 SPP/APR report.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

Reporting requirements for the IDEA section 618 data collection (specifically, IDEA Part B Child Counts and Educational Environments) were updated to allow States to include five-year-olds in Kindergarten in file specification FS002 - Children with Disabilities (IDEA) School Age and exclude these children from file specification FS089 - Children with Disabilities (IDEA) Early Childhood for School Year (SY) 2019-20. SY 2019-20 (i.e., FFY 2019) was the transition year for this change; States had the option to report five-year-olds in Kindergarten in FS002 in their SY 2019-20 submission or wait to do so with their SY 2020-21 submission, when the change becomes permanent. The State transitioned to reporting five-year-olds in Kindergarten in FS002 for its SY 2019-20 submission under IDEA section 618. This change impacts the State’s data for SPP/APR Indicators 5 and 6, because the required data source for SPP/APR Indicators 5 and 6 is the same data as used for reporting to the Department under IDEA section 618. Therefore, the State’s slippage status indicates “NA” for this indicator. However, the State must revise the baseline for this indicator, using FFY 2019 data.

## 6 - Required Actions

The State did not revise the baseline for this indicator, as required due to the change in the data source. The State must revise its baseline using data from FFY 2019.

# 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 | 2015 | Target >= | 74.80% | 75.00% | 76.10% | 76.10% | 76.10% |
| A1 | 75.62% | Data | 73.96% | 75.62% | 76.17% | 79.61% | 77.90% |
| A2 | 2015 | Target >= | 32.80% | 33.00% | 60.50% | 60.50% | 60.50% |
| A2 | 60.20% | Data | 29.79% | 60.20% | 58.53% | 56.21% | 54.69% |
| B1 | 2015 | Target >= | 61.00% | 61.50% | 74.20% | 74.20% | 74.20% |
| B1 | 73.66% | Data | 53.40% | 73.66% | 71.45% | 74.18% | 74.06% |
| B2 | 2015 | Target >= | 23.90% | 24.00% | 58.10% | 58.10% | 58.10% |
| B2 | 57.84% | Data | 24.34% | 57.84% | 55.71% | 54.46% | 52.61% |
| C1 | 2015 | Target >= | 45.30% | 45.50% | 74.10% | 74.10% | 74.10% |
| C1 | 73.63% | Data | 38.80% | 73.63% | 73.40% | 76.35% | 75.15% |
| C2 | 2015 | Target >= | 32.00% | 32.20% | 61.50% | 61.50% | 61.50% |
| C2 | 61.21% | Data | 28.83% | 61.21% | 59.74% | 57.30% | 54.54% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1 >= | 76.10% |
| Target A2 >= | 60.50% |
| Target B1 >= | 74.20% |
| Target B2 >= | 58.10% |
| Target C1 >= | 74.10% |
| Target C2 >= | 61.50% |

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**FFY 2019 SPP/APR Data**

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

**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 | 67 | 1.85% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 465 | 12.81% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,206 | 33.22% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 585 | 16.12% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,307 | 36.01% |

| **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)* | 1,791 | 2,323 | 77.90% | 76.10% | 77.10% | 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)* | 1,892 | 3,630 | 54.69% | 60.50% | 52.12% | Did Not Meet Target | Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 61 | 1.68% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 569 | 15.67% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,197 | 32.98% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 422 | 11.63% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,381 | 38.04% |

| **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)* | 1,619 | 2,249 | 74.06% | 74.20% | 71.99% | Did Not Meet Target | Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 1,803 | 3,630 | 52.61% | 58.10% | 49.67% | Did Not Meet Target | Slippage |

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

| **Outcome C Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 47 | 1.29% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 506 | 13.94% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,184 | 32.62% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 539 | 14.85% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 1,354 | 37.30% |

| **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)* | 1,723 | 2,276 | 75.15% | 74.10% | 75.70% | 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)* | 1,893 | 3,630 | 54.54% | 61.50% | 52.15% | Did Not Meet Target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A2** | The State uses the AEPS I and II as its one statewide tool for determining the B7 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the COVID-19 pandemic, administering an exit AEPS was not possible. Subsequently, the annual IFSP AEPS score was used as the exit score for these children or some of the exiting children’s data were not available because they were in service for less than a year. These factors resulted in depressing the child outcome data for B7: A2. |
| **B1** | The State uses the AEPS I and II as its one statewide tool for determining the B7 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the COVID-19, administering an exit AEPS was not possible. Subsequently, the annual IFSP AEPS score was used as the exit score for these children or some of the exiting children’s data were not available because they were in service for less than a year. These factors resulted in depressing the child outcome data for B7: B1. |
| **B2** | The State uses the AEPS I and II as its one statewide tool for determining the B7 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the COVID-19 pandemic, administering an exit AEPS was not possible. Subsequently, the annual IFSP AEPS score was used as the exit score for these children or some of the exiting children’s data were not available because they were in service for less than a year. These factors resulted in depressing the child outcome data for B7: B2. |
| **C2** | The State uses the AEPS I and II as its one statewide tool for determining the B7 child outcome data. The AEPS is administered at eligibility or the initial IFSP, at least at the annual IFSP, and at the time of exiting from ECSE. Due to the COVID-19 pandemic, administering an exit AEPS was not possible. Subsequently, the annual IFSP AEPS score was used as the exit score for these children or some of the exiting children’s data were not available because they were in service for less than a year. These factors resulted in depressing the child outcome data for B7: C2. |

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

YES

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

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

NO

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

Beginning in 2008 for all children qualifying for early childhood special education services, all State EI/ECSE programs are required to enter child the Assessment, Evaluation, and Programming System (AEPS) data into the Early Childhood Web (ecWeb) system, starting with all children qualifying for early childhood special education services in May of 2008.   
  
Criteria for defining “comparable to same-aged peers":   
In 2015, using a national AEPS data set from typically developing children, a review team considered 90%, 85%, and 80% percentile cut offs against the national data results to decide the cut off level that best reflected the State’s children in ECSE programs. The review team, State staff, the EI/ECSE Contractors and the EI/ECSE stakeholder group were all asked to analyze the percentile cut offs and determine the cut off level that the State should use for reporting to the ECSE child outcomes. The consensus was to use the 80% cut off level. This most closely represents the children who are eligible for Early Childhood Special Education programs and receive services in Oregon.   
  
Child progress is measured using the following rubric:   
If a child enters with a score below the normal range and stays the same or regresses at the next test administration, the child is categorized as (a) does not improve functioning. If the child makes progress and the ratio of how far below the normal level of development increases between test administrations, the child is categorized as (b) improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers. If the child makes progress but the ratio of how far below the normal level of development decreases between test administrations, the child is categorized as (c) improved functioning to a level nearer to the functioning of same-aged peers, but did not reach it. If a child enters with a score below the normal range and increases to reach or exceed the normal range at the next test administration, the child is categorized as (d) improved functioning sufficient to reach a level comparable to same-aged peers. If a child enters with a score at or above the normal range and maintains their score at or above the normal range at the next test administration, the child is categorized as (e) maintains functioning at or above same age peers.

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

As of 2008, all EI/ECSE programs in the State are required to enter individual child assessment results from the Assessment, Evaluation, and Programming System (AEPS) into the Early Childhood Web (ecWeb). The aggregate results are utilized for reporting on this indicator.

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

Impact of COVID -19 on data completeness, validity, and reliability for the indicator  
As documented in the slippage statements, the emergence of the COVID-19 pandemic in March 2020 reduced the ability of EI/ECSE programs to complete exit AEPS 1 assessments resulting in reverting to the annual administration of the AEPS 1 as the exit data, or having no exit data at all, and resulting in the elimination of that child record from the data. This resulted in the reduction of the number of records submitted by programs for this indicator.  
  
Explanation of how COVID-19 specifically affected the state’s ability to collect the data for the indicator  
The inability of the EI/ECSE programs to administer some of the exit AEPS I assessments resulted in reverting to the annual administration of the AEPS 1 as the exit data, or having no exit data at all and the elimination of that child record from the data. This resulted in the reduction of the number of records utilized for this indicator.   
  
Any steps the state took to mitigate the impact of COVID-19 on the data collection  
The State supplied its EI/ECSE programs with guidance and training materials concerning how to administer the AEPS 1 virtually, which helped some programs and practitioners gather accurate exit data for FFY 2019.

## 7 - Prior FFY Required Actions

None

## 7 - OSEP Response

The State reported that the COVID-19 pandemic impacted the data for this indicator. Specifically, the State reported, "the COVID-19 pandemic in March 2020 reduced the ability of EI/ECSE programs to complete exit AEPS 1 assessments resulting in reverting to the annual administration of the AEPS 1 as the exit data, or having no exit data at all, and resulting in the elimination of that child record from the data. This resulted in the reduction of the number of records submitted by programs for this indicator."

## 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? | YES |
| If yes, will you be providing the data for preschool children separately? | YES |

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Preschool | 2014 | Target >= | 82.18% | 82.48% | 82.68% | 83.68% | 85.68% |
| Preschool | 82.18% | Data | 82.18% | 81.16% | 86.23% | 79.37% | 84.59% |
| School age | 2014 | Target >= | 76.23% | 76.73% | 77.73% | 78.73% | 81.23% |
| School age | 76.23% | Data | 76.23% | 78.12% | 78.74% | 79.43% | 78.98% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 85.68% |
| Target B >= | 81.23% |

**FFY 2019 SPP/APR Data: Preschool Children Reported Separately**

| **Group** | **Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities** | **Total number of respondent parents of children with disabilities** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Preschool | 190 | 214 | 84.59% | 85.68% | 88.79% | Met Target | No Slippage |
| School age | 1,675 | 2,005 | 78.98% | 81.23% | 83.54% | Met Target | No Slippage |

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

21,260

**Percentage of respondent parents**

10.44%

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

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

The sampling methodology is designed to choose a representative set of districts/programs each year that is reflective of the state population as a whole. Within districts/programs, the State uses either a census or sample, depending on district/program size. In cases where a sample of parents is selected, the population is stratified by school, grade, race/ethnicity, primary disability, and gender in order to ensure the representativeness of the sample.

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

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

Informed by Oregon’s participation in the Early Childhood TA Center (ECTA) & The Center for IDEA Early Childhood Data Systems (DaSy) Family Outcomes CoP, ODE continues to work with FACT (Oregon’s PTI Center) to collect the following data so as to inform districts support of the SEA’s parent involvement survey efforts to capture response data that are representative of Oregon’s survey demographics:  
  
1. Identify current communication and dissemination strategies districts are utilizing.  
2. Collect district input as to why the response rate of parents of students of color is low.  
3. Identify additional communication and/or dissemination strategies for increasing the response rate of parents--especially, parents of students of color.  
4. Ask districts if there are actions ODE and/or its survey vendor could do in terms of survey design/format/administration that would increase the likelihood parents of students of color responding.

**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.**

Part B 619   
Note: The State used statistical significance testing to determine if one group was over- or under-represented in the response rate.  
The representativeness of the Part B 619 results was assessed by examining the demographic characteristics of the children of the parents who responded to the survey to the demographic characteristics of children experiencing disabilities in the Part B 619 population. This comparison indicates the results are generally representative by: (1) age of the child, and (2) primary disability of the child. For example, 18% of the population has a child who was age 3 as of December 1st, and 17% of the respondents had a child who was age 3 as of December 1st. Further, 32% of the population have a child identified as experiencing a developmental delay, and the results indicate that 33% of the respondents have a child identified as experiencing a developmental delay.   
  
Parents of white students were slightly over-represented (the results indicate that 66% of parent respondents had a student who is white whereas 61% of preschool children experiencing disabilities are white), and parents of Hispanic students were under-represented. However, there were no significant differences in the positivity of responses on the survey itself between parents across demographic characteristics, so the overall results are representative of Oregon. Furthermore, results were weighted by program to ensure that the parent survey results reflected the population of parents. The State will continue to encourage parents of children of all races/ethnicities to complete the survey. To that end, the State plans to collect the following data to inform and support programs parent involvement survey efforts:  
1. Identify current communication and dissemination strategies used by programs.  
2. Collect program input as to why the response rate of parents of students of color is low.  
3. Identify additional communication and/or dissemination strategies for increasing the response rate of parents, especially parents of students of color.  
4. Ask programs if there are actions that the State and/or its survey vendor could take in terms of survey design, format, and administration that would increase the response rate of parents of students of color.  
  
Part B   
The representativeness of the K-12 results was assessed by examining the demographic characteristics of the students of the parents who responded to the survey to the demographic characteristics of students experiencing disabilities in K-12 in the population. This comparison indicates the results are generally representative by: (1) size of the district, and (2) grade level of the child. For example, 4% of the population has a child who was age 5 as of December 1st, and 5% of the respondents had a child who was age 5 as of December 1st. Parents of white students were slightly over-represented (the results indicated that 72% of parent respondents had a student who is white whereas 64% of students receiving special education services are white). Additionally, parents of Hispanic students were slightly under-represented (the results indicated that 15% of parent respondents had a student who is Hispanic whereas 25% of students receiving special education services are Hispanic).   
  
In addition, parents of students experiencing a specific learning disability were slightly under-represented (the results indicated that 24% of parent respondents had a student experiencing a specific learning disability whereas 31% of students in the population experience a learning disability). However, there were no significant differences in the parent involvement percentage between parents of white children and parents of children of other races/ethnicities or between parents of students experiencing specific learning disabilities and parents of students experiencing other disabilities, so the overall results are representative of Oregon. Furthermore, results were weighted by district to ensure that the parent survey results reflected the population of parents. The State will continue to encourage parents of children of all races/ethnicities to complete the survey. To that end, the State plans to collect the following data to inform and support programs parent involvement survey efforts:  
1. Identify current communication and dissemination strategies used by programs.  
2. Collect program input as to why the response rate of parents of students of color is low.  
3. Identify additional communication and/or dissemination strategies for increasing the response rate of parents, especially parents of students of color.  
4. Ask programs if there are actions that the State and/or its survey vendor could do in terms of survey design, format, and administration that would increase the response rate of parents of students of color.

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

Part B & Part B 619   
  
The State does not think that COVID-19 had an impact on the response rate given that the same process was used as before (mail). The State has no reason to suspect that COVID-19 had an impact on the positivity of the survey responses. The parent involvement percentage did increase from 2018-19 to 2019-20 and item responses also increased from 2018-19 to 2019-20, but the State has no reason to believe that was a function of COVID-19. For Indicator B8, the State has provided the accessibility report as an attachment to Indicator 8.

## 8 - Prior FFY Required Actions

None

## 8 - OSEP Response

## 8 - Required Actions

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

## 8 - State Attachments

 

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

Based on its review of the 618 data for FFY 2018, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2019 reporting period (i.e., after June 30, 2020).

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, improvement activities completed (e.g., review of policies and procedures, technical assistance, training, etc.) and any enforcement actions that were taken. If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2019 SPP/APR, the data for FFY 2018), and the State did not identify any findings of noncompliance, provide an explanation of why the State did not identify any findings of noncompliance.

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 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.**

27

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 10 | 0 | 170 | 0.00% | 0% | NVR | 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 State defines Disproportionate Representation of racial and ethnic groups in special education and related services as:   
• The percentage of IDEA eligible students disaggregated by race/ethnicity differs by +/- 20% from the percentage of all students within the district disaggregated by race/ethnicity in at least one race/ethnicity category;   
• A weighted risk ratio analysis shows a value of >2.0 in the same race/ethnicity category; and  
• The district has at least ten IDEA eligible students in the same race/ethnicity category in special education.

**Describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification.**

The State used district-provided data collected from the State’s December 1, 2018 Special Education Child Count (SECC) (Data Year 2018-19) to identify if there was Disproportionate Representation in Special Education. Disproportionate Representation in Special Education was identified in 10/170 districts (5.88%). The State conducted follow-up interviews with each district where disproportionate representation was identified. These interviews were conducted to review the district’s data and root causes of the disproportionate representation; review policies, procedures, and practices which could have contributed to the significant discrepancy; and determine whether the disproportionate representation was the result of inappropriate identification.   
  
Based on these interviews with the seven districts, the State was able to finalize identification and verification of correction of noncompliance. In discussing the data with the districts, the State has determined that the flagging for disproportionate representation was not the result of inappropriate identification and that the flagging for this indicator was not indicative of noncompliance for the seven identified districts.

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

COVID-19 did not directly impact ODE’s ability to collect the initial data for this indicator, or the data completeness, validity, and reliability of that initial data.  
Follow-up interviews with districts to determine compliance status were delayed when the State paused its monitoring due to COVID-19. Follow-up interviews were completed by April 2, 2021.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 9 - Prior FFY Required Actions

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

## 9 - OSEP Response

The State did not provide valid and reliable data for this indicator. The State identified 10 districts with disproportionate representation of racial and ethnic groups in special education and related services. However in its narrative, the State reported it conducted interviews with the seven districts “to finalize identification and verification of correction of noncompliance.” It is not clear if the State determined, for FFY 2019, that disproportionate representation was the result of inappropriate identification in the other three districts. Therefore, OSEP could not determine whether the State met its target.

## 9 - Required Actions

The State did not provide valid and reliable data for FFY 2019. The State must provide valid and reliable data for FFY 2020 in the FFY 2020 SPP/APR. In addition, the State must clarify if it determined, for FFY 2019, that disproportionate representation was the result of inappropriate identification in the other three districts.

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

Based on its review of the 618 data for FFY 2019, describe how the State made its annual determination as to whether the disproportionate representation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by 34 CFR §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum n and/or cell size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2019 reporting period (i.e., after June 30, 2020).

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

## 10 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 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.**

41

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 38 | 0 | 155 | 0.00% | 0% | NVR | 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 State defines Disproportionate Representation of racial and ethnic groups in special education and related services as existing when:   
• The percentage of IDEA eligible students disaggregated by race/ethnicity differs by +/- 20% from the percentage of all students within the district disaggregated by race/ethnicity in at least one race/ethnicity category, and   
• A weighted risk ratio analysis shows a value of >2.0 in the same race/ethnicity category within the same disability category, and   
• At least ten IDEA eligible students in the same race/ethnicity category within the same disability category in special education.

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

The State used district-provided data collected from the State’s December 1, 2018 Special Education Child Count (SECC) (Data Year 2018-19) to identify if there was disproportionate overrepresentation in specific disability categories. The State prepared and disseminated a Disproportionate Representation in Special Education Report to all districts with the following information:   
1. The percentage of IDEA eligible students disaggregated by race/ethnicity compared to all students within district disaggregated.   
2. A weighted risk ratio analysis for each race/ethnicity category.   
3. The number of IDEA eligible students in each race/ethnicity category.  
  
The State conducted follow-up interviews with each of the 38 districts where disproportionate overrepresentation was identified. These interviews were conducted to review the district’s data and root causes of the disproportionate overrepresentation; review policies, procedures, and practices which could have contributed to the disproportionate overrepresentation; and determine whether the disproportionate overrepresentation was the result of inappropriate identification.   
  
Based on these interviews with the districts, the State was able to finalize identification and verification of correction of noncompliance. In discussing the data with the districts, the State has determined that the flagging for disproportionate overrepresentation was not the result of inappropriate identification and that the flagging for this indicator was not indicative of noncompliance for the identified districts.

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

COVID-19 did not directly impact ODE’s ability to collect the initial data for this indicator, or the data completeness, validity, and reliability of that initial data.  
Follow-up interviews with districts to determine compliance status were delayed when the State paused its monitoring due to COVID-19. Follow-up interviews were completed by April 2, 2021.

**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

OSEP cannot determine whether the data are valid and reliable. The State reported that 155 districts met the minimum “n” size requirement, and 41 districts did not meet the minimum “n” size requirement and were excluded from the calculation. The number of districts excluded from the calculation because they do not meet the minimum “n” size, plus the number of districts that met the State-established minimum “n” size, does not equal the total number of districts the State reported in the FFY 2019 Introduction. Therefore, OSEP could not determine whether the State met its target.

## 10 - Required Actions

The State did not provide valid and reliable data for FFY 2019. The State must provide valid and reliable data for FFY 2020 in the FFY 2020 SPP/APR.

# 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 | 94.30% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.43% | 98.32% | 97.94% | 98.09% | 98.61% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 14,602 | 14,388 | 98.61% | 100% | 98.53% | Did Not Meet Target | No Slippage |

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

214

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

Range of days beyond the timeline::  
1 to 10 days over= 120 students (56%)  
11 to 20 days over= 41 students (19%)  
21 to 30 days over= 16 students (7%)  
Over 30 days= 37 students (18%)  
  
Reason for delay:  
Across those instances, school districts report that a delay by district staff accounted for 79% (169/214) of identified instances of noncompliance, a delay due to parent non-attendance at the eligibility meeting accounted for 13% (28/214) of identified instances of noncompliance, a delay by a doctor accounted for 3% (7/214) of identified instances of noncompliance, and a need for additional testing accounted for 5% (10/214) of identified instances of noncompliance.

**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).**

An initial evaluation must be completed within 60 school days from written parent consent to the date of the meeting to consider eligibility.

**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.**

Districts/programs submit data about all initial evaluations they complete as part of the Consolidated Collection Child Find Report required by the Oregon Department of Education.

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

On March 12, 2020, Oregon’s Governor Brown implemented a mandate that closed all schools. The purpose of this mandate was to lessen the spread of the COVID-19 virus. Beginning on April 13, 2020, school districts were mandated to provide only distance learning instruction for all students. In person interactions between school district personnel and students were not permitted.   
  
The impact of COVID-19 on data completeness, validity and reliability for the indicator:  
Data completeness was not impacted, and data collected is considered valid and reliable. The State collected all the data required to be collected for 2019-2020.   
  
An explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator:  
Data completeness was not impacted, and data collected is considered valid and reliable. The State collected all the data to be collected for 2019-2020.   
  
An explanation of how COVID-19 specifically impacted the State’s ability to collect the data for the indicator:  
Data completeness was not impacted, and data collected is considered valid and reliable. The State collected all the data to be collected for 2019-2020.   
  
Any steps the State took to mitigate the impact of COVID-19 on the data collection:  
Districts were directed to report the data as required. In 2019-2020, under CFR 34 CFR §300.301(d) and Oregon Administrative Rules (OAR 581-015-2110(5)(c)), 218 records were reported with the timeframe exemption for “the parent of a child repeatedly fails or refuses to produce the child for the evaluation.” Of the 218 records reported, 208 records reported the parent failed to produce the child for required in-person evaluation due to the Governor’s executive order precluding in-person contact. As specified in federal guidance (Part B Measurement Table for Part B SPP/APR), these records are not included in the numerator or denominator.

**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** |
| --- | --- | --- | --- |
| 282 | 282 | 0 | 0 |

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

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

In FFY 2018, 100% of identified noncompliance were corrected within one year. ODE verified that each district with noncompliance reflected in the Child Find collection data:  
• Is correctly implementing 34 CFR §300.301(c) (1) (i.e., achieved 100% compliance) based on an ODE review of subsequent evaluation data.  
• Has completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the district/program, consistent with OSEP Memorandum 09-02.  
   
100% (282/282) of incidents of noncompliance have been corrected and these districts and programs have completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the district/program, consistent with OSEP Memorandum 09-02.  
  
B11 Prong 2 correction (i.e., how the State verified that the source of noncompliance is correctly implementing the regulatory requirements) is verified by ODE staff reviewing data from the Special Education Child Find Consolidated Collection for a period of time relative to the level of noncompliance. The State confirmed that all districts where non-compliance had been identified subsequently implemented the regulations correctly by reviewing the data collected from the subsequent year’s Special Education Child Find Consolidated Collection for a period of time relative to the level of noncompliance to determine whether districts have subsequently implemented regulations with 100% compliance. For the 2018-2019 school year, ODE determined that 100% of districts with identified non-compliance had subsequently implemented these regulations appropriately.

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

In FFY 2018, 100% of identified noncompliance were corrected within one year. ODE verified that each district with noncompliance reflected in the Child Find collection data:  
• Is correctly implementing 34 CFR §300.301(c) (1) (i.e., achieved 100% compliance) based on an ODE review of subsequent evaluation data.  
• Has completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the district/program, consistent with OSEP Memorandum 09-02.  
   
100% (282/282) of incidents of noncompliance have been corrected and these districts and programs have completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the district/program, consistent with OSEP Memorandum 09-02.  
  
B11 Prong 1 correction (i.e., how the State verified that each individual case of noncompliance was corrected) is done by confirming that each case of identified non-compliance reported has a timeline for completion of the evaluation beyond 60 days.  
  
In 2019-20 School Year (2018-19 School Year Data), using the B11 Child Find Report available within the SPR&I Dashboard, the State confirmed that each identified instance of noncompliance was corrected within each district.   
  
The State required that every district submit information on all initial evaluations conducted within their jurisdiction through the Special Education Child Find Consolidated Collection. The State reviewed the data collected related to this indicator to confirm that each student for whom a district did not complete their initial evaluation within 60 school days had a subsequent eligibility determination made. For the 2018-2019 school year, the State confirmed that 100% of the evaluations were completed, although late, via data collection.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 11 - Prior FFY Required Actions

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

## 11 - OSEP Response

## 11 - Required Actions

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

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

**Monitoring Priorit**y: Effective General Supervision Part B / Effective Transition

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

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

**Data Source**

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

**Measurement**

a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.

b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.

c. # of those found eligible who have an IEP developed and implemented by their third birthdays.

d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.

e. # of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.

f. # of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option.

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

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

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 97.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 100.00% | 100.00% | 99.31% | 99.33% |

**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. | 153 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 0 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 147 |
| 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. | 6 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 0 |
| f. Number of children whose parents chose to continue early intervention services beyond the child’s third birthday through a State’s policy under 34 CFR §303.211 or a similar State option. | 0 |

| **Measure** | **Numerator (c)** | **Denominator (a-b-d-e-f)** | **FFY 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. | 147 | 147 | 99.33% | 100% | 100.00% | Met Target | No Slippage |

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

0

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

**Attach PDF table (optional)**

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

State monitoring

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

All Early Intervention (EI) programs in Oregon receiving IDEA funds are required to participate in the Oregon Department of Education (ODE) System Performance Review & Improvement (SPR&I) system of annual accountability and performance reporting. This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. Programs conduct individual child file reviews annually to collect procedural compliance data. These data are collected on a specified number of child files determined by ODE and are evenly split between EI, EI Transition, and Early Childhood Special Education (ECSE). Files are selected to match the individual race/ethnicity, disability, and gender distribution for each EI/ECSE program based on the December child count. Individual child procedural compliance data is collected by programs and submitted to ODE electronically through the SPR&I system. ODE works collaboratively with programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress. The SPR&I system provides ODE with the mechanism for review of district/program policies, procedures, and systems to ensure the requirements set forth in 34 CFR §300.600-609 are met.

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

The COVID-19 pandemic had no impact on the data for this indicator for the FFY 2019 SPP/APR report.

**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** |
| --- | --- | --- | --- |
| 1 | 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 FFY 2018, 99.33% (149/150) of child files reviewed for transition from Part C to Part B demonstrated eligibility determination and IFSP implementation by the third birthdays.   
  
ODE verified that 100% (1/1) finding of noncompliance in FFY 2018 was corrected within one year and that the program with noncompliance demonstrated correction of practices that contributed to the noncompliance as well as current compliance with 34 CFR §300.124 based on a review corrective action and new files submitted in SPR&I.

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

There was one individual incident of noncompliance that resulted in one finding for one program.   
  
ODE verified through data submission to SPR&I that 100% (1/1) of incidents of noncompliance in FFY 2018 were corrected within one year and that the program with noncompliance developed an IFSP for each child, unless the child was no longer within the jurisdiction of the EI program. The program with noncompliance provided through SPR&I the cause of the noncompliance and demonstrated correction of practices that contributed to the noncompliance through subsequent data submission (additional file reviews) to SPR&I. ODE reviewed, verified, and approved the corrective actions.

**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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 12 - Prior FFY Required Actions

None

## 12 - OSEP Response

## 12 - Required Actions

# Indicator 13: Secondary Transition

**Instructions and Measurement**

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

**Compliance indicator**: 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 | 77.20% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 76.24% | 83.24% | 79.73% | 83.94% | 80.83% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 980 | 1,190 | 80.83% | 100% | 82.35% | Did Not Meet Target | No Slippage |

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

State monitoring

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

All districts in Oregon receiving IDEA funds are required to participate in the Oregon Department of Education’s (ODE) System Performance Review & Improvement (SPR&I) application for annual accountability and performance reporting.   
  
This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. ODE works collaboratively with districts/programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress.   
  
In SPR&I, districts are provided a list of transition age student files to review each school year. Each file must be reviewed to determine compliance with eight individual transition standards. This compliance is tracked for all submitted transition-age files. Compliance with all eight secondary transition standards is required by the first IEP in effect when the student turns 16. The SPR&I system is the mechanism for review of district/program policies, procedures, and systems, to ensure the requirements set forth in 34 CFR 300.600-609 are met.   
  
Districts must report on whether the student file meets the following standards:   
1. The IEP Team Meeting Notices must: (a) invite the student, (b) inform the parent and student that consideration of the post-secondary goals and transition services would be addressed, and (c) identify any other agency that would be invited to send a representative, if appropriate.   
2. If the student attended the IEP meeting or if the student did not attend there is documentation that other steps were taken to ensure that the student’s preferences, interests, and needs were considered as part of the IEP development;   
3. The district has documentation that the most recent IEP meeting included, to the extent appropriate and with the consent of the parent or adult student, a representative of any participating agency that was likely to be responsible for providing or paying for transition services.   
4. The IEP contains Present Levels of Academic Achievement and Functional Performance including: (a) the student’s preferences, needs, and interests, and (b) the results of age-appropriate transition assessments.   
5. The IEP contains a statement of measurable annual goals including academic and functional goals.   
6. The IEP includes appropriate, measurable postsecondary goals based upon age-appropriate transition assessments related to training/education, employment, and, where appropriate, independent living skills.   
7. The IEP includes transition services needed to assist the student to reach the post-secondary goals.   
8. The IEP includes courses of study needed to assist the student to reach the post-secondary goals.  
  
The standard operating procedures ODE uses for this indicator include:  
• Requiring districts to engage in self-assessment through data collection, review, and analysis to inform meaningful improvement.   
• Requiring districts to report on secondary transition services for a predetermined number of student files selected for review.   
• Requiring districts to address noncompliance with transition services through corrective action documented in SPR&I that includes verifying that services were provided to students, an explanation for the cause of the noncompliance, correction of practices that contributed to the noncompliance, and demonstration of current compliance through subsequent data collection.   
• Providing training to districts on the relationship among Indicators 1, 2, 13, and 14.

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

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

COVID-19 did not impact this indicator. Indicator 13 data was collected by February 2020.

**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** |
| --- | --- | --- | --- |
| 101 | 101 |  | 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***

All districts in the State receiving IDEA funds are required to participate in the Oregon Department of Education (ODE) System Performance Review & Improvement (SPR&I) application for annual accountability and performance reporting.   
  
This system focuses on procedural compliance and performance indicators identified through federal and state regulation and previous state monitoring findings. The State works collaboratively with districts/programs on comprehensive data collection, analyses, performance reporting, improvement planning, implementation, and reporting of progress.   
  
In SPR&I, districts are provided a list of transition age student files to review each school year. Each file must be reviewed to determine compliance with eight individual transition standards. This compliance is tracked for all submitted transition-age files. Compliance with all eight secondary transition standards is required by the first IEP in effect when the student turns 16. The SPR&I system is the mechanism for review of district/program policies, procedures, and systems, to ensure the requirements set forth in 34 CFR 300.320(b) and 300.321(b) are met.   
  
Districts must report that the student file includes the following standards:   
1. The IEP Team Meeting Notices must: (a) invite the student, (b) inform the parent and student that consideration of the post-secondary goals and transition services would be addressed, and (c) identify any other agency that would be invited to send a representative, if appropriate.   
2. If the student attended the IEP meeting or if the student did not attend there is documentation that other steps were taken to ensure that the student’s preferences, interests, and needs were considered as part of the IEP development;   
3. The district has documentation that the most recent IEP meeting included, to the extent appropriate and with the consent of the parent or adult student, a representative of any participating agency that was likely to be responsible for providing or paying for transition services.   
4. The IEP contains Present Levels of Academic Achievement and Functional Performance including: (a) the student’s preferences, needs, and interests, and (b) the results of age-appropriate transition assessments.   
5. The IEP contains a statement of measurable annual goals including academic and functional goals.   
6. The IEP includes appropriate, measurable postsecondary goals based upon age-appropriate transition assessments related to training/education, employment, and, where appropriate, independent living skills.   
7. The IEP includes transition services needed to assist the student to reach the post-secondary goals.   
8. The IEP includes courses of study needed to assist the student to reach the post-secondary goals.  
  
The standard operating procedures ODE uses for this indicator include: ·   
• Requiring districts to engage in self-assessment through data collection, review, and analysis to inform meaningful improvement.  
• Requiring districts to report on secondary transition services for a predetermined number of student files selected for review.   
• Requiring districts to address noncompliance with transition services through corrective action documented in SPR&I that includes verifying that services were provided to students, an explanation for the cause of the noncompliance, correction of practices that contributed to the noncompliance, and demonstration of current compliance through subsequent data collection.   
• Providing training to districts on the relationship among Indicators 1, 2, 13, and 14.  
  
In FFY 2018, the State reviewed and verified district/program data and file submissions to confirm that 100% (101/101) of incidents of noncompliance in FFY 2018 were corrected within one year.  
  
Consistent with the requirement of OSEP Memo 09-02, each district corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the district. The State verified that all districts showed 100% compliance within one year after the initial noncompliance was identified based on a review of updated data, including data subsequently collected through on site monitoring and the SPR&I system.   
  
Through data submission to SPR&I, the State reviewed and verified that 100% (101/101) of incidents of noncompliance in FFY 2018 were corrected within one year after the noncompliance was identified.

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

In FFY 2018, the State reviewed and verified district/program data and file submissions to confirm that 100% (101/101) of incidents of noncompliance in FFY 2018 were corrected within one year.   
  
Consistent with the requirement of OSEP Memo 09-02, each district has corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the district. ODE verified that all districts showed 100% compliance within one year after the initial noncompliance was identified based on a review of updated data, including data subsequently collected through on site monitoring and the SPR&I system.   
  
Districts/programs provided through SPR&I the cause of the noncompliance for each transition standard and demonstrated correction of practices that contributed to the noncompliance through subsequent data submission to SPR&I.

**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 | 84 | 84 | 0 |
|  |  |  |  |
|  |  |  |  |

**FFY 2017**

**Findings of Noncompliance Verified as Corrected**

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

The State verified that the districts/programs with noncompliance demonstrated correction of practices that contributed to noncompliance as well as current compliance with 34 CFR §§ 303.340(c), 303.342(e), 303.344(f)(1) based on a State review of data submitted in Systems Performance & Review (SPR&I), including new files submitted in SPR&I after the original occurrence of noncompliance.   
  
In SPR&I, districts are provided a list of transition age student files, randomly selected by the system for review each school year. Compliance of eight individual transition standards is tracked for all submitted transition-age files. All eight secondary transition standards begin with the first IEP in effect when the student turns 16. The SPR&I system is the mechanism for review of district/program policies, procedures, and systems, to ensure the requirements set forth in 43 CFR 300.600-609 and CFR 303.501 are met.  
  
Districts reported that the student file included the following standards:   
• The IEP Team Meeting Notices must:  
o Invite the student.   
o Inform the parent and student that consideration of the postsecondary goals and transition services would be addressed.   
o Identify any other agency that would be invited to send a representative, if appropriate.   
• If the student attended the IEP meeting or if the student did not attend there is documentation that other steps were taken to ensure that the student’s preferences, interests, and needs were considered as part of the IEP development;   
• The district has documentation that the most recent IEP meeting included, to the extent appropriate and with the consent of the parent or adult student, a representative of any participating agency that was likely to be responsible for providing or paying for transition services.   
• The IEP contains Present Levels of Academic Achievement and Functional Performance including: the student’s preferences, needs, and interests and the results of age-appropriate transition assessments.   
• The IEP contains a statement of measurable annual goals including academic and functional goals.   
• The IEP includes appropriate, measurable postsecondary goals based upon age-appropriate transition assessments related to training/education, employment, and, where appropriate, independent living skills.   
• The IEP includes transition services needed to assist the student to reach the post-secondary goals.   
• The IEP includes courses of study needed to assist the student to reach the post-secondary goals. The standard operating procedures that the State uses for this indicator include: ·   
o Requiring districts to engage in self-assessment through data collection, review, and analysis to inform meaningful improvement.  
o Requiring districts to report on secondary transition services for a predetermined number of student files selected for review.   
o Requiring districts to address noncompliance with transition services through corrective action documented in SPR&I that includes verifying that services were provided to students, an explanation for the cause of the noncompliance, correction of practices that contributed to the noncompliance, and demonstration of current compliance through subsequent data collection.   
o Providing training to districts on the relationship among Indicators 1, 2, 13, and 14.  
  
  
In FFY 2018, the State reviewed and verified district/program data and file submissions to confirm that 100% (84/84) incidents of noncompliance in FFY 2017 were corrected within one year.   
  
Consistent with the requirement of OSEP Memo 09-02, each district has corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the district. The State verified that all districts showed 100% compliance within one year after the initial noncompliance was identified based on a review of updated data, including data subsequently collected through on site monitoring and the SPR&I system.   
  
Through SPR&I, districts/programs provided the cause of the noncompliance for each transition standard and demonstrated correction of practices that contributed to the noncompliance through subsequent data submission to SPR&I.

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

In FFY 2018, the State reviewed and verified district/program data and file submissions to confirm that 100% (84/84) incidents of noncompliance in FFY 2017 were corrected within one year.   
  
Consistent with the requirement of OSEP Memo 09-02, the State verified that each district corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the district. The State verified that all districts showed 100% compliance within one year after the initial noncompliance was identified based on a review of updated data, including data subsequently collected through on site monitoring and the SPR&I system.   
  
Through SPR&I, districts/programs provided the cause of the noncompliance for each transition standard and demonstrated correction of practices that contributed to the noncompliance through subsequent data submission to SPR&I.

## 13 - Prior FFY Required Actions

None

## 13 - OSEP Response

In its description of correction of noncompliance, the State referenced an incorrect regulatory citation. Therefore, the State did not demonstrate that the LEA corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that it verified that each LEA with noncompliance identified in FFY 2017 (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA.

## 13 - Required Actions

Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. In addition, the State must demonstrate, in the FFY 2020 SPP/APR, that the remaining 84 uncorrected findings of noncompliance identified in FFY 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 2017: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.   
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

State selected data source.

**Measurement**

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

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

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

**Instructions**

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

Collect data by September 2020 on students who left school during 2018-2019, timing the data collection so that at least one year has passed since the students left school. Include students who dropped out during 2018-2019 or who were expected to return but did not return for the current school year. This includes all youth who had an IEP in effect at the time they left school, including those who graduated with a regular diploma or some other credential, dropped out, or aged out.

**I. *Definitions***

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

*Competitive employment* as used in measures B and C: States have two options to report data under “competitive employment” in the FFY 2019 SPP/APR, due February 2021:

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

Option 2: States report in alignment with the term “competitive integrated employment” and its definition, in section 7(5) of the Rehabilitation Act, as amended by Workforce Innovation and Opportunity Act (WIOA), and 34 CFR §361.5(c)(9). For the purpose of defining the rate of compensation for students working on a “part-time basis” under this category, OSEP maintains the standard of 20 hours a week for at least 90 days at any time in the year since leaving high school. This definition applies to military employment.

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

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

**II. *Data Reporting***

Provide the actual numbers for each of the following mutually exclusive categories. The actual number of “leavers” who are:

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

2. Competitively employed within one year of leaving high school (but not enrolled in higher education);

3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed);

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

“Leavers” should only be counted in one of the above categories, and the categories are organized hierarchically. So, for example, “leavers” who are enrolled in full- or part-time higher education within one year of leaving high school should only be reported in category 1, even if they also happen to be employed. Likewise, “leavers” who are not enrolled in either part- or full-time higher education, but who are competitively employed, should only be reported under category 2, even if they happen to be enrolled in some other postsecondary education or training program.

**III. *Reporting on the Measures/Indicators***

Targets must be established for measures A, B, and C.

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

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

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

Include the State’s analysis of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school. States should consider categories such as race and ethnicity, disability category, and geographic location in the State.

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2009 | Target >= | 28.00% | 29.00% | 30.00% | 31.00% | 32.00% |
| A | 24.18% | Data | 22.37% | 24.41% | 24.56% | 22.82% | 25.13% |
| B | 2009 | Target >= | 55.00% | 55.00% | 55.50% | 55.50% | 56.00% |
| B | 50.60% | Data | 56.40% | 59.52% | 60.46% | 61.99% | 46.46% |
| C | 2009 | Target >= | 70.00% | 72.00% | 72.00% | 72.00% | 74.00% |
| C | 66.04% | Data | 71.34% | 73.24% | 74.59% | 74.20% | 81.56% |

**FFY 2019 Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 32.00% |
| Target B >= | 56.00% |
| Target C >= | 74.00% |

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 2,399 |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 596 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 858 |
| 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) | 153 |
| 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). | 244 |

| **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) | 596 | 2,399 | 25.13% | 32.00% | 24.84% | Did Not Meet Target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 1,454 | 2,399 | 46.46% | 56.00% | 60.61% | Met Target | No Slippage |
| C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4) | 1,851 | 2,399 | 81.56% | 74.00% | 77.16% | Met Target | No Slippage |

**Please select the reporting option your State is using:**

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

| **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? | NO |

**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 State analyzed the representativeness of the respondent group to the target leaver group, which is a census of all leavers in the state. This survey follows all students ages 16-21 who were reported on the 618 exit collection as leaving special education services and are included in the required lists of students to be interviewed by school districts the following year. Districts report if the interview is completed or not completed for each student.   
  
Demographic analyses on Oregon’s Target Leaver and Respondent groups was conducted using the NPSO/NTACT Response Calculator. This analysis showed respondents were representative of targeted leavers across disability, gender, race/ethnicity, and English learners. Data underrepresented (-5.51%) students who dropped out. The underrepresentation of dropouts is not uncommon, as these students are more difficult to reach due to lack of current contact information and general difficulty in tracking students who leave school unexpectedly. The NPSO/NTACT Response Calculator uses a difference of greater than +/-3% as an indicator of an important difference between respondent groups and targeted leaver groups. With the exception of dropouts, these data show no substantive difference in the characteristics between those who responded to the survey and those who did not.  
  
Oregon had a response rate of 50% (total number of leavers, N = 4797, divided by the total number of respondents, n = 2399). Using the NPSO/NTACT Response Calculator, in which a difference of greater than +/-3% is an important difference, respondents were representative in all categories except dropouts (i.e., disability, gender, race/ethnicity, English learners). As shown in the data table, dropouts were underrepresented by 5.51% in the respondent group.

| **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? | YES |

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

COVID-19 impacted this indicator.  
  
Impact of COVID-19 on data completeness, validity, and reliability for the indicator:  
COVID-19 impacted data completeness, validity and reliability for this indicator during the time of the collection (June 1, 2020 through September 30, 2020) as districts and schools were preparing for in-person instruction and the possibility of needed transitions to Comprehensive Distance Learning models for the 2020-21 school year. Districts had to prepare staff by providing professional learning for staff on virtual platforms, training on new protocols, setting up physical spaces, designing instruction, setting up technology, and cleaning and disinfecting. Therefore teachers’ time was cut short to make the phone calls to do the survey and collect the data.  
  
Explanation of how COVID-19 specifically affected the state’s ability to collect the data for the indicator:  
The State’s ability to collect the data for indicator 14 in the SPR&I system was not impacted but the input of data from the school districts was impacted due to COVID-19 and wildfires as teachers and families had a significant and widespread loss of their homes, internet connectivity, and technology devices. Teachers and students who were displaced from their homes were not able to connect with each other to complete the survey over the phone or in person like years past.  
  
Any steps the state took to mitigate the impact of COVID-19 on the data collection:  
School districts have filled out a paper copy of the follow-up survey and the State offered to input the data into the system if districts needed help with the task.

## 14 - Prior FFY Required Actions

None

## 14 - OSEP Response

## 14 - Required Actions

# Indicator 15: Resolution Sessions

**Instructions and Measurement**

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

**Results Indicator:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements.

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

**Data Source**

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

**Measurement**

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

**Instructions**

Sampling is not allowed.

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

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

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

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

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

## 15 - Indicator Data

Select yes to use target ranges

Target Range not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1 Number of resolution sessions | 1 |
| 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 | 0 |

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

NO

**Targets: Description of Stakeholder Input**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 11.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 29.50% | 29.50% | 29.50% | 29.50% | 29.50% |
| Data | 0.00% | 14.29% | 100.00% | 0.00% |  |

**Targets**

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

**FFY 2019 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 1 |  |  | 0.00% | N/A | N/A |

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

This indicator was not impacted by COVID-19.

## 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 provide targets until any fiscal year in which ten or more resolution sessions were held.

## 15 - Required Actions

# Indicator 16: Mediation

**Instructions and Measurement**

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

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

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

**Data Source**

Data collected under section 618 of the IDEA (IDEA Part B Dispute Resolution Survey in the 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 | 25 |
| 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 | 5 |
| 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 | 6 |

**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**

The State solicited broad input on target setting for indicators of the State Performance Plan (SPP) and the State Systemic Improvement Plan (SSIP) through electronic survey during January 2020. These targets are reported within each indicator. These targets remain the same as the targets submitted in FFY 2019. The State continues to refine the differentiated monitoring and support opportunities available for LEAs, using community input gathered at regionally hosted listening sessions during the 2019-2020 school year. The State is increasingly looking towards working closer with the community to provide input on how the State can better support LEAs to meet the outcomes established in the SPP/APR.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 86.36% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 88.00% | 89.00% | 89.00% | 90.00% | 90.00% |
| Data | 86.67% | 83.78% | 86.67% | 72.97% | 64.71% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 90.00% |

**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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 5 | 6 | 25 | 64.71% | 90.00% | 44.00% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Slippage occurred due to the need to conduct virtual mediations rather than the in-person meetings held prior to COVID-19. While both mediators and parties have worked hard to make this process more streamlined, challenges exist due to technological issues and the greater difficulty in building trusting relationships through virtual meeting modes. The State also notes more requests for mediation filed in cases where the likelihood of successful mediation is fairly low due to heightened emotions and complex issues.

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

COVID-19 impacted this indicator.   
  
Impact on data completeness, validity, and reliability for the indicator:  
Fewer mediation sessions occurred during the 2019-20 school year (41) than the previous year, and the number of completed mediation sessions also dropped (25 compared to 34). The percentage of successful mediations also dropped to 44% (previously 73%). On March 12, 2020, Governor Brown implemented a mandate that closed all schools. The purpose of this mandate was to lessen the spread of the COVID-19 virus. Beginning on April 13, school districts were mandated to provide only distance learning instruction for all students. Data completion was impacted in that numerous scheduled mediations had to be delayed. In many instances, it was difficult to schedule appointments with families that were struggling with daily COVID-19 related activities and/or relocating for economic reasons. The impact of school district personnel to access necessary information to prepare for mediation sessions was also impacted. COVID-19 related planning also disrupted the schedules of many district personnel, making mediation sessions more difficult to schedule.  
  
Explanation of how COVID-19 specifically affected the State’s ability to collect the data for the indicator:  
The State’s ability to collect data for B16 was impacted in the following ways: The overall situation made tracking down individual cases to see where they were in the process and getting signed agreements difficult to accomplish. On March 12, 2020, Governor Brown implemented a mandate that closed all schools. The purpose of this mandate was to lessen the spread of the COVID-19 virus. Beginning on April 13, school districts were mandated to provide only distance learning instruction for all students. Data completion was impacted in that numerous scheduled mediations had to be delayed. In many instances, it was difficult to schedule appointments with families that were struggling with daily COVID-19 related activities and/or relocating for economic reasons. The impact of school district personnel to access necessary information to prepare for mediation sessions was also impacted. COVID-19 related planning also disrupted the schedules of many district personnel, making mediation sessions more difficult to schedule.  
  
Any steps the State took to mitigate the impact of COVID-19 on the data collection:  
The State tried to mitigate this through the use of virtual mediations and scheduling mediations outside of standard operating hours. Training opportunities for conducting virtual mediation sessions were also provided to mediators. The State has tried to provide as much flexibility as appropriate to all parties to navigate this situation while still meeting the needs of students while satisfying reporting requirements.

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

## 16 - Required Actions

# Indicator 17: State Systemic Improvement Plan



# Certification

**Instructions**

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

**Certify**

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

**Select the certifier’s role:**

Designated by the Chief State School Officer to certify

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

**Name:**

Sara E. Green

**Title:**

Interim Assistant Superintendent

**Email:**

sara.e.green@ode.state.or.us

**Phone:**

971-388-4233

**Submitted on:**

04/29/21 3:04:43 PM

# ED Attachments

  

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