**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**

**Utah**

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**

See attachment

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

See attachment

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

154

**General Supervision System**

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

See attachment

**Technical Assistance System**

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

See attachment

**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.**

See attachment

**Stakeholder Involvement**

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

See attachment

**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.**

See attachment

## 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**

## 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

## 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** |
| --- | --- |
| 2011 | 58.60% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 66.32% | 69.59% | 71.48% | 72.91% | 74.37% |
| Data | 68.23% | 67.93% | 70.22% | 69.36% | 69.97% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 75.86% |

**Targets: Description of Stakeholder Input**

See attachment

See introduction, FFY19 Stakeholder Involvement and Input.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2018-19 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696) | 07/27/2020 | Number of youth with IEPs graduating with a regular diploma | \*[[1]](#footnote-2) |
| SY 2018-19 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec FS151; Data group 696) | 07/27/2020 | Number of youth with IEPs eligible to graduate | 4,797 |
| 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 | 72.4%[[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 | 4,797 | 69.97% | 75.86% | 72.4%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 USBE Graduation requirements include a minimum of 24 units of credit through course completion or through competency assessment:   
\* Language Arts (4.0 Units of Credit)   
\* Mathematics (3.0 Units of Credit)   
\* Science (3.0 Units of Credit)   
\* Social Studies (3.0 Units of Credit)   
\* Arts (1.5 Units of Credit)   
\* Physical and Health Education (2.0 Units of Credit)   
\* Career and Technical Education (1.0 Units of Credit)   
\* Digital Studies (0.5 Units of Credit)   
\* General Financial Literacy (0.5 Units of Credit)   
\* Electives (5.5 Units of Credit)   
\* Library Media Skills (integrated into all subject areas)   
  
LEAs use USBE-approved summative adaptive assessments to assess student mastery (R277-700-6.). Students with disabilities served by special education program satisfy high school completion or graduation requirements, consistent with state and federal law and the students’ IEPs (R277-705-4.).   
  
An LEA may substitute a student’s course requirements for graduation to meet the unique educational needs of a student if: the student has a disability; and the substitutions to the student's graduation requirements are made through the student's individual IEP. LEAs document the nature and extent of the substitution made to a student’s course requirements in the student’s IEP (R277-700-6.(23)). Whether or not an IEP team substitutes a student with a disability’s course requirements, they graduate with a regular diploma.   
  
In December 2017, the USBE passed the Alternate Diploma for students with the most significant cognitive disabilities. The state-defined Alternate Diploma is outlined in Every Student Succeeds Act (ESSA) (20 USC § 6301; R277-705-5.).  
  
An LEA may award an alternate diploma to a student with a significant cognitive disability if: the student accesses grade-level core standards through the Essential Elements; the student's IEP team makes graduation substitutions in the same content area, from a list of alternative courses approved by the USBE; and the student meets all graduation requirements prior to exiting school at or before age 22. An Alternate Diploma may not indicate that the recipient is a student with a disability.   
  
The USBE provides a list of alternative courses that may be considered for student with cognitive disabilities working to receive an Alternate Diploma. An LEA may submit courses to the USBE to be considered for possible inclusion on the list of alternate courses.   
  
For additional information, the USBE graduation requirements are outlined in Utah Administrative Rule R277-700-6 (https://rules.utah.gov/publicat/code/r277/r277-700.htm#T46), and R277-705 (https://rules.utah.gov/publicat/code/r277/r277-705.htm). The USBE Special Education Services Graduation Guidelines for Students with Disabilities outlines the process for amending graduation requirements (https://schools.utah.gov/file/0cb3d88d-ab99-4143-9d2f-1d615cb35db6).

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

NO

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

The implementation of the Alternate Diploma may slightly increase Utah’s graduation rate for Indicator 1 beginning in FFY 2019, however only 61 Alternate Diplomas were awarded to students by five LEAs in FFY 2019. A significant impact on Utah’s Indicator 1 is not anticipated as a result of the Alternate Diploma because less than 1% of the total student population are eligible to earn Utah’s Alternate Diploma.

## 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** |
| --- | --- |
| 2013 | 42.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 39.90% | 37.90% | 36.00% | 34.20% | 32.49% |
| Data | 30.30% | 29.82% | 27.69% | 27.04% | 25.75% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 30.86% |

**Targets: Description of Stakeholder Input**

See attachment

See introduction, FFY19 Stakeholder Involvement and Input.

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

Option 1

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 3,748 |
| 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) | 185 |
| 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) | 102 |
| 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) | 1,248 |
| 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) | 15 |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 1,248 | 5,298 | 25.75% | 30.86% | 23.56% | Met Target | No Slippage |

**Provide reasons for slippage, if applicable**

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

The Indicator 2 dropout rate comes from the EDFacts 009 report data according to the EDFacts 009 specifications. EDFacts definition of Single-Year Dropouts are students ages 14-21 who left with a reason of Unknown, Withdrawn, Dropout, Expelled, Transferred to Adult Education, Exited to Take the GED1, or Graduation Pending. Additionally, if the student finished the school year and was expected to return to school the next year or transferred to another public school within the state (including district and charter schools) and did not reappear by September 30 of the following school year, then the student counts as a dropout. Finally, if the student was a retained senior but did not reappear by September 30 of the following school year, then the student counts as a dropout. This count does not include students who transferred to home school, private school, or a school outside of the state or country. Students who withdrew for medical reasons are also excluded from the dropout count.

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

NO

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

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

The USBE notifies each LEA flagged with a high dropout rate in September and provides a preliminary event dropout report to review before the October 10 data deadline. LEAs are given guidance on coding corrections and dropout recovery practices through USBE training, technical assistance documents, and individually as needed.

## 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** | Grades 3-8 | X | X | X | X | X | X |  |  |  |  |  |
| **B** | Grades 9-10 |  |  |  |  |  |  | X | X |  |  |  |

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Grades 3-8 | 2013 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Grades 3-8 | 98.17% | Actual | 96.43% | 93.45% | 91.39% | 90.36% | 93.09% |
| **B** | Grades 9-10 |  | Target >= |  |  |  |  | 95.00% |
| **B** | Grades 9-10 |  | Actual |  |  |  |  | 97.38% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Grades 3-8 | 2013 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Grades 3-8 | 98.04% | Actual | 96.23% | 93.53% | 91.49% | 90.22% | 92.78% |
| **B** | Grades 9-10 |  | Target >= |  |  |  |  | 95.00% |
| **B** | Grades 9-10 |  | Actual |  |  |  |  | 88.28% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Grades 3-8 | 95.00% |
| Reading | B >= | Grades 9-10 | 95.00% |
| Math | A >= | Grades 3-8 | 95.00% |
| Math | B >= | Grades 9-10 | 95.00% |

**Targets: Description of Stakeholder Input**

See attachment

See introduction, FFY19 Stakeholder Involvement and Input.

**FFY 2019 Data Disaggregation from EDFacts**

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

YES

**Data Source:**

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

**Date:**

**Reading Assessment Participation Data by Grade**

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

**Data Source:**

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

**Date:**

**Math Assessment Participation Data by Grade**

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

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

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grades 3-8 |  |  | 93.09% | 95.00% |  | N/A | N/A |
| **B** | Grades 9-10 |  |  | 97.38% | 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** | Grades 3-8 |  |  | 92.78% | 95.00% |  | N/A | N/A |
| **B** | Grades 9-10 |  |  | 88.28% | 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.**

The USBE submitted a federal waiver to the U.S. Department of Education allowing for the suspension of the required administration of Utah’s state spring summative assessments used for both federal and state accountability. The waiver was submitted in response to the statewide school dismissal due to the COVID-19 pandemic. The suspension of the assessments for FFY2018 APR reporting included RISE (grades 3-8), Utah Aspire Plus (grades 9-10) and alternate assessments for students with significant cognitive disabilities (grades 3-10) during the spring of 2020. The US Department of Education accepted Utah’s waiver request on March 27, 2020. The cancellation of spring 2020 assessments resulted in the absence of assessment data used for reporting on Indicator 3.   
  
In a typical year public reporting is as follows:   
  
USBE Data Gateway: https://datagateway.schools.utah.gov/   
\*Proficiency of all students, including the student group "students with disabilities."   
  
Utah School Report Card: https://utahschoolgrades.schools.utah.gov/   
\*Participation rates, and achievement rate for all students, including students with disabilities.   
\*Achievement of students with disabilities at the state, LEA, and school level.   
  
USBE Data and Statistics: https://www.schools.utah.gov/data/reports   
\*In the Assessment tab and under the Alternate Assessments section reports:   
 \*The first tab reports the participation of students with disabilities by assessment type (regular and alternate assessments) and the participation rates of students with disabilities on the regular assessment with and without accommodations.   
 \*The second tab reports the proficiency rate of the alternate assessment, by subject area, in comparison to the proficiency rate of students with disabilities on the regular assessment and the proficiency of all students on the regular assessment at the state and LEA level.  
 \*The third tab reports proficiency rate of the alternate assessment, by grade level, in comparison to the proficiency rate of students with disabilities on the regular assessment and the proficiency of all students on the regular assessment at the state and LEA level.

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

## 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** | Grades 3-8 | X | X | X | X | X | X |  |  |  |  |  |
| **B** | Grades 9-10 |  |  |  |  |  |  | X | X |  |  |  |

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Grades 3-8 | 2018 | Target >= | 13.44% | 15.48% | 16.98% | 18.48% | 17.40% |
| **A** | Grades 3-8 | 17.40% | Actual | 13.44% | 15.48% | 14.97% | 15.95% | 17.40% |
| **B** | Grades 9-10 | 2018 | Target >= | 8.67% | 8.50% | 10.00% | 11.50% | 11.70% |
| **B** | Grades 9-10 | 11.71% | Actual | 8.67% | 8.50% | 8.45% | 10.13% | 11.70% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Grades 3-8 | 2018 | Target >= | 17.06% | 17.61% | 19.61% | 21.61% | 17.88% |
| **A** | Grades 3-8 | 17.88% | Actual | 17.06% | 17.61% | 17.94% | 18.41% | 17.88% |
| **B** | Grades 9-10 | 2018 | Target >= | 7.15% | 7.08% | 9.08% | 11.08% | 4.81% |
| **B** | Grades 9-10 | 4.81% | Actual | 7.15% | 7.08% | 6.55% | 5.91% | 4.81% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Grades 3-8 | 18.30% |
| Reading | B >= | Grades 9-10 | 12.41% |
| Math | A >= | Grades 3-8 | 18.88% |
| Math | B >= | Grades 9-10 | 5.41% |

**Targets: Description of Stakeholder Input**

See attachment

See Introduction, FFY19 Stakeholder Involvement and Input.

**FFY 2019 Data Disaggregation from EDFacts**

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

YES

**Data Source:**

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

**Date:**

**Reading Proficiency Data by Grade**

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

**Data Source:**

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

**Date:**

**Math Proficiency Data by Grade**

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

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

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Grades 3-8 |  |  | 17.40% | 18.30% |  | N/A | N/A |
| **B** | Grades 9-10 |  |  | 11.70% | 12.41% |  | 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** | Grades 3-8 |  |  | 17.88% | 18.88% |  | N/A | N/A |
| **B** | Grades 9-10 |  |  | 4.81% | 5.41% |  | 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.**

The USBE submitted a federal waiver to the U.S. Department of Education allowing for the suspension of the required administration of Utah’s state spring summative assessments used for both federal and state accountability. The waiver was submitted in response to the statewide school dismissal due to the COVID-19 pandemic. The suspension of the assessments for FFY2018 APR reporting included RISE (grades 3-8), Utah Aspire Plus (grades 9-10) and alternate assessments for students with significant cognitive disabilities (grades 3-10) during the spring of 2020. The US Department of Education accepted Utah’s waiver request on March 27, 2020. The cancellation of spring 2020 assessments resulted in the absence of assessment data used for reporting on Indicator 3.   
  
In a typical year public reporting is as follows:   
  
USBE Data Gateway: https://datagateway.schools.utah.gov/   
\*Proficiency of all students, including the student group "students with disabilities."   
  
Utah School Report Card: https://utahschoolgrades.schools.utah.gov/   
\*Participation rates, and achievement rate for all students, including students with disabilities.   
\*Achievement of students with disabilities at the state, LEA, and school level.   
  
USBE Data and Statistics: https://www.schools.utah.gov/data/reports   
\*In the Assessment tab and under the Alternate Assessments section reports:   
 \*The first tab reports the participation of students with disabilities by assessment type (regular and alternate assessments) and the participation rates of students with disabilities on the regular assessment with and without accommodations.   
 \*The second tab reports the proficiency rate of the alternate assessment, by subject area, in comparison to the proficiency rate of students with disabilities on the regular assessment and the proficiency of all students on the regular assessment at the state and LEA level.   
 \*The third tab reports proficiency rate of the alternate assessment, by grade level, in comparison to the proficiency rate of students with disabilities on the regular assessment and the proficiency of all students on the regular assessment at the state and LEA level.

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

The USBE has revised the baseline for Indicator 3C, using data from FFY 2018, and OSEP accepts that revision. The USBE provided targets for FFY 2019 for Indicator 3C, and OSEP accepts those targets.

## 3C - Prior FFY Required Actions

None

## 3C - OSEP Response

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

## 3C - Required Actions

# Indicator 4A: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results Indicator:** Rates of suspension and expulsion:

A. Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

If the State has established a minimum n size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n size. If the State used a minimum n size requirement, report the number of districts excluded from the calculation as a result of this requirement.

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons:

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

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

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

Indicator 4A: Provide the actual numbers used in the calculation (based upon districts that met the minimum n size requirement, if applicable). If significant discrepancies occurred, describe how the State educational agency reviewed and, if appropriate, revised (or required the affected local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with applicable requirements.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If discrepancies occurred and the district with discrepancies had policies, procedures or practices that contributed to the significant discrepancy and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with the Office of Special Education Programs (OSEP) Memorandum 09-02, dated October 17, 2008.

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

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

## 4A - Indicator Data

**Historical Data**

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

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

**Targets**

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

**Targets: Description of Stakeholder Input**

See attachment

See Introduction, FFY19 Stakeholder Involvement and Input.

**FFY 2019 SPP/APR Data**

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

YES

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

16

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 0 | 138 | 0.00% | 0.00% | 0.00% | Met Target | No Slippage |

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

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

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

The USBE uses the "State-bar" method for defining significant discrepancy. The FFY 2018 (school year (SY) 2018-2019) State rate for suspending/expelling students with disabilities among LEAs in the State for more than ten days is 0.155%. The USBE set the "State-bar" as five percentage points higher than the State rate. Any LEA that suspends or expels 5.155% or more of its students with disabilities for more than ten days is flagged for significant discrepancy. There must be an "n" size of at least 30 students with disabilities in the LEA in the denominator of a suspension rate for the LEA to be flagged. Of the 154 LEAs in SY 2018-2019, 138 met the minimum “n” size of 30. Of the 16 that did not meet the minimum “n” size, all but one had a 0% suspension rate. Across the entire state, 123 students with disabilities were suspended for more than 10 days in SY 2018-2019.

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

**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.**

No LEAs were flagged for significant discrepancy. Review of policies, procedures, and practices was not required in FFY 2018 related to Indicator 4A.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

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

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

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

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

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

## 4A - Required Actions

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Compliance Indicator:** Rates of suspension and expulsion:

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

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

**Data Source**

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

**Measurement**

Percent = [(# of districts that meet the State-established n size (if applicable) for one or more racial/ethnic groups that have: (a) a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year of children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards) divided by the (# of districts in the State that meet the State-established n size (if applicable) for one or more racial/ethnic groups)] times 100.

Include State’s definition of “significant discrepancy.”

**Instructions**

If the State has established a minimum n size requirement, the State may only include, in both the numerator and the denominator, districts that met that State-established n size. If the State used a minimum n size requirement, report the number of districts excluded from the calculation as a result of this requirement.

Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019), including data disaggregated by race and ethnicity to determine if significant discrepancies are occurring in the rates of long-term suspensions and expulsions of children with IEPs, as required at 20 U.S.C. 1412(a)(22). The State’s examination must include one of the following comparisons

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

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

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

Indicator 4B: Provide the following: (a) the number of districts that met the State-established n size (if applicable) for one or more racial/ethnic groups that have a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) the number of those districts in which policies, procedures or practices contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

Provide detailed information about the timely correction of noncompliance as noted in OSEP’s response for the previous SPP/APR. If discrepancies occurred and the district with discrepancies had policies, procedures or practices that contributed to the significant discrepancy and that do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with the Office of Special Education Programs (OSEP) Memorandum 09-02, dated October 17, 2008.

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

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

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2010 | 0.00% |

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

**Targets**

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

**FFY 2019 SPP/APR Data**

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

YES

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

27

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 1 | 0 | 127 | 0.00% | 0% | 0.00% | Met Target | No Slippage |

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

YES

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

The USBE uses the "State-bar" method for defining significant discrepancy. The FFY 2018 (school year (SY) 2018-2019) State rate for suspending/expelling students with disabilities among LEAs in the State for more than ten days is 0.155%. The USBE set the "State-bar" as five percentage points higher than the State rate. Thus, any LEA that suspends or expels 5.155% or more of its students with disabilities for more than ten days is flagged for significant discrepancy. There must be an "n" size of at least 30 students with disabilities in the LEA in the denominator of a suspension rate for it to be flagged. Of the 154 LEAs in SY 2018-2019, 127 met the minimum “n” size of 30.

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

Noncompliance identified for Indicator 4B is reported to OSEP upon identification. Findings of noncompliance are issued to the LEA as soon as possible, less than three months from discovery. LEAs are not provided an opportunity to correct the noncompliance before the finding is issued consistent with OSEP guidance https://www.schools.utah.gov/file/bc1fec07-59d6-4d21-86fb-a29273e6e44a.

**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.**

One LEA was flagged as having significant discrepancy, by race or ethnicity. The State conducted a review of this LEA’s data, as well as policies, practices and procedures. A further review of the LEA policies, procedures, practices, and the specific student records indicated that IDEA procedures were followed, and that the significant discrepancy was not a result of noncompliance with the requirements for the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)

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

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

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

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

**Findings of Noncompliance Verified as Corrected**

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

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

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

OSEP notes that, in the State’s narrative under Indicator 11, the State reports that “The USBE considers LEAs substantially compliant, relative to each compliance indicator, if the LEA’s data indicate a very high level of compliance (generally 95% or above) at the end of the Prong 1 correction window (OSEP Memo 09-02).” (Emphasis added.) OSEP cannot determine whether the State accounted for all instances of noncompliance (i.e., any compliance level under 100%) in its FFY 2019 data for this indicator, consistent with OSEP Memo 09-02 and OSEP’s September 3, 2008, Frequently Asked Questions Regarding Identification and Correction of Noncompliance and Reporting on Correction in the SPP/APR (see, in particular, Question and Answer 3). Also, OSEP cannot determine whether, in circumstances where the State is unable to verify correction of noncompliance consistent with OSEP Memo 09-02 within the three-week window, findings are issued to LEAs regardless of the level of noncompliance identified.

## 4B- Required Actions

In reporting its FFY 2020 data in the FFY 2020 SPP/APR, the State must clarify whether, in circumstances where the State is unable to verify correction of noncompliance consistent with OSEP Memo 09-02 within the three-week window, findings are issued to LEAs regardless of the level of noncompliance identified.

# 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 >= | 57.23% | 57.66% | 58.09% | 58.53% | 58.97% |
| A | 48.68% | Data | 58.11% | 60.45% | 61.57% | 63.47% | 65.12% |
| B | 2005 | Target <= | 13.50% | 13.43% | 13.36% | 13.29% | 13.22% |
| B | 14.72% | Data | 12.37% | 11.37% | 10.68% | 10.26% | 9.71% |
| C | 2005 | Target <= | 3.00% | 3.00% | 3.00% | 3.00% | 3.00% |
| C | 3.56% | Data | 2.58% | 2.49% | 2.61% | 2.63% | 2.67% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 59.41% |
| Target B <= | 13.15% |
| Target C <= | 3.00% |

**Targets: Description of Stakeholder Input**

See attachment

See Introduction, FFY19 Stakeholder Involvement and Input.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74) | 07/08/2020 | Total number of children with IEPs aged 6 through 21 | 80,079 |
| 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 | 54,323 |
| 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 | 7,314 |
| 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 | 1,933 |
| 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 | 31 |
| 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 | 100 |

**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 | 54,323 | 80,079 | 65.12% | 59.41% | 67.84% | Met Target | N/A |
| B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 7,314 | 80,079 | 9.71% | 13.15% | 9.13% | 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] | 2,064 | 80,079 | 2.67% | 3.00% | 2.58% | Met Target | N/A |

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

NO

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

Utah continues to meet or exceed set targets in Indicator 5. The USBE had planned to reset targets for Indicator 5 with stakeholder feedback in 2020, due to the changes in reporting of five year-olds as well as other factors. Due to the impact of COVID-19, the statewide stakeholder meetings to reset targets were canceled, and the USBE will be resetting targets for Indicator 5 in 2021. As a result, the baseline data is left unchanged because changing the baseline to SY 2019 will impact our data table, which will result in the previously set targets and actual performance to fall below the baseline.

## 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 must revise the baseline for this indicator, using data from FFY 2019. Further, the State’s slippage status indicates “NA” for this indicator.

## 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 >= | 33.22% | 33.42% | 33.62% | 33.82% | 36.32% |
| A | 36.31% | Data | 32.37% | 35.37% | 37.19% | 39.90% | 48.09% |
| B | 2011 | Target <= | 43.56% | 43.36% | 43.16% | 42.96% | 41.35% |
| B | 41.36% | Data | 44.71% | 40.95% | 38.36% | 34.68% | 28.50% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 36.52% |
| Target B <= | 41.15% |

**Targets: Description of Stakeholder Input**

See attachment

See Introduction, FFY19 Stakeholder Involvement and Input.

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | Total number of children with IEPs aged 3 through 5 | 7,889 |
| 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 | 4,106 |
| 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 | 2,225 |
| 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 | 123 |
| SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613) | 07/08/2020 | b3. Number of children attending residential facility | 0 |

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

NO

**FFY 2019 SPP/APR Data**

| **Preschool Environments** | **Number of children with IEPs aged 3 through 5 served** | **Total number of children with IEPs aged 3 through 5** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program | 4,106 | 7,889 | 48.09% | 36.52% | 52.05% | Met Target | N/A |
| B. Separate special education class, separate school or residential facility | 2,348 | 7,889 | 28.50% | 41.15% | 29.76% | Met Target | N/A |

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

NO

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

Utah continues to meet or exceed set targets in Indicator 6. The USBE had planned to reset targets for Indicator 6 with stakeholder feedback in 2020, due to the changes in reporting of five year-olds as well as other factors. Due to the impact of COVID-19, the statewide stakeholder meetings to reset targets were canceled, and the USBE will be resetting targets for Indicator 6 in 2021. As a result, the baseline data is left unchanged because changing the baseline to SY 2019 will impact our data table, which will result in the previously set targets and actual performance to fall below the baseline.

## 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 must revise the baseline for this indicator, using data from FFY 2019 data. Further, the State’s slippage status indicates “NA” for this indicator.

## 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 | 2008 | Target >= | 90.72% | 90.92% | 91.12% | 91.32% | 95.10% |
| A1 | 95.09% | Data | 87.95% | 88.21% | 87.97% | 89.28% | 88.86% |
| A2 | 2008 | Target >= | 51.40% | 51.60% | 51.80% | 52.00% | 52.93% |
| A2 | 52.92% | Data | 59.22% | 59.03% | 59.41% | 61.26% | 58.94% |
| B1 | 2008 | Target >= | 90.16% | 90.36% | 90.56% | 90.76% | 93.21% |
| B1 | 93.20% | Data | 87.17% | 87.21% | 86.93% | 88.34% | 88.41% |
| B2 | 2008 | Target >= | 44.99% | 45.19% | 45.39% | 45.59% | 48.71% |
| B2 | 48.70% | Data | 51.24% | 52.69% | 51.79% | 53.64% | 50.48% |
| C1 | 2008 | Target >= | 90.90% | 91.10% | 91.30% | 91.50% | 93.92% |
| C1 | 93.91% | Data | 90.51% | 88.98% | 88.87% | 90.83% | 89.86% |
| C2 | 2008 | Target >= | 63.17% | 63.37% | 63.57% | 63.77% | 67.21% |
| C2 | 67.20% | Data | 71.95% | 71.43% | 71.57% | 71.68% | 70.52% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1 >= | 95.30% |
| Target A2 >= | 53.13% |
| Target B1 >= | 93.41% |
| Target B2 >= | 48.91% |
| Target C1 >= | 94.12% |
| Target C2 >= | 67.41% |

**Targets: Description of Stakeholder Input**

See attachment

See Introduction, FFY19 Stakeholder Involvement and Input.

**FFY 2019 SPP/APR Data**

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

3,776

**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 | 17 | 0.45% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 341 | 9.03% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,258 | 33.32% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,693 | 44.84% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 467 | 12.37% |

| **Outcome A** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| A1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. *Calculation:(c+d)/(a+b+c+d)* | 2,951 | 3,309 | 88.86% | 95.30% | 89.18% | Did Not Meet 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)* | 2,160 | 3,776 | 58.94% | 53.13% | 57.20% | Met Target | No Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 19 | 0.50% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 340 | 9.00% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 1,578 | 41.79% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,667 | 44.15% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 172 | 4.56% |

| **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)* | 3,245 | 3,604 | 88.41% | 93.41% | 90.04% | Did Not Meet Target | No Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 1,839 | 3,776 | 50.48% | 48.91% | 48.70% | 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 | 16 | 0.42% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 309 | 8.18% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 923 | 24.44% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 1,902 | 50.37% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 626 | 16.58% |

| **Outcome C** | **Numerator** | **Denominator** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.  *Calculation:(c+d)/(a+b+c+d)* | 2,825 | 3,150 | 89.86% | 94.12% | 89.68% | Did Not Meet 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)* | 2,528 | 3,776 | 70.52% | 67.41% | 66.95% | Did Not Meet Target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **B2** | Exit scores were impacted by the COVID-19 soft closures thus impacting data completeness. LEAs collected exit data for most students remotely which may have impacted scores. The USBE provided LEAs resources from the Early Childhood Technical Assistance Center (ECTA) on how to collect data remotely. Additional training was provided to LEAs from the 619 Coordinator. |
| **C2** | Exit scores were impacted by the COVID-19 soft closures thus impacting data completeness. LEAs collected exit data for most students remotely which may have impacted scores. The USBE provided LEAs resources from the Early Childhood Technical Assistance Center (ECTA) on how to collect data remotely. Additional training was provided to LEAs from the 619 Coordinator. |

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

YES

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

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

YES

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

Data is gathered through Utah Program Improvement Planning System (UPIPS). The USBE utilizes this website to collect compliance, fiscal and other LEA data. LEAs and the USBE can generate reports on the compliance data collected. These data and reports are used in the UPIPS on-site monitoring process, as well as the APR. UPIPS has an assigned section titled, Utah Preschool Outcomes Data (UPOD), for collecting Indicator 7 preschool outcome data. Teachers collect and enter entry and exit outcome scores, along with the name of the assessment tool utilized, into UPOD when a student enters preschool and when the student exits preschool services, such as when the student transitions from preschool to kindergarten. The LEA report section provides LEA-specific preschool outcome data as well as overall statewide preschool outcome data with "n" sizes and percentages that are transferred to the APR.

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

Indicator 7 outcomes were impacted by the soft closure of schools. Collecting complete exit data was challenging. Collection was only possible through remote means and many families disconnected because of difficulties accessing consistent broadband and because they were overwhelmed with health, safety, and schooling-at-home concerns.

## 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 "Indicator 7 outcomes were impacted by the soft closure of schools. Collecting complete exit data was challenging. Collection was only possible through remote means and many families disconnected because of difficulties accessing consistent broadband and because they were overwhelmed with health, safety, and schooling-at-home concerns."

## 7 - Required Actions

# Indicator 8: Parent involvement

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

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

**Data Source**

State selected data source.

**Measurement**

Percent = [(# of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities) divided by the (total # of respondent parents of children with disabilities)] times 100.

**Instructions**

Sampling **of parents from whom response is requested** is allowed. When sampling is used, submit a description of the sampling methodology outlining how the design will yield valid and reliable estimates. (See General Instructions on page 2 for additional instructions on sampling.)

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

Provide the actual numbers used in the calculation.

If the State is using a separate data collection methodology for preschool children, the State must provide separate baseline data, targets, and actual target data or discuss the procedures used to combine data from school age and preschool data collection methodologies in a manner that is valid and reliable.

While a survey is not required for this indicator, a State using a survey must submit a copy of any new or revised survey with its SPP/APR.

Report the number of parents to whom the surveys were distributed.

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

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

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

## 8 - Indicator Data

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

**Targets: Description of Stakeholder Input**

See attachment

See Introduction, FFY19 Stakeholder Involvement and Input.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2015 | 79.52% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 89.92% | 79.52% | 79.52% | 79.62% | 80.52% |
| Data | 86.04% | 79.52% | 76.82% | 79.65% | 78.38% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 81.33% |

**FFY 2019 SPP/APR Data**

| **Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities** | **Total number of respondent parents of children with disabilities** | | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1,479 | | 1,876 | 78.38% | 81.33% | 78.84% | Did Not Meet Target | No Slippage |

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

7,202

**Percentage of respondent parents**

26.05%

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

LEAs provide the USBE with the contact information for all students with disabilities that are on the LEAs' student lists. The parent survey sample is based on the number of students with disabilities enrolled in the LEA. Students who receive the survey are based on a statistical sampling of the LEA. The contact information provided by the LEA is sorted based on student grade, least restrictive environment code, and disability category. The sorted data is used to gather a representative sample of the LEA. The student data sorting procedure ensures that parents from all student groups are represented in the sample. All parents receive the same survey. Parents do not report whether their student is a preschool or a school age student. Survey collection procedures ensure both preschool and school age students are represented in an equitable way. Please refer to the “Sampling Question” section below for additional discussion on how the USBE’s data collection procedures ensure equitable represent among preschool and school age students. Once the surveys are completed for all LEAs in the survey sample, the data is aggregated to determine the state rate for Indicator 8. The USBE uses the expertise of a statistician to aggregate the data and increase the validity and reliability of the data.

| **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.**

All LEAs are divided into two rotating cohorts for receiving the parent survey on a biennial basis. The four largest LEAs in the State are included in both cohorts and receive the survey every year. The LEAs are divided into cohort groups for each of the two survey years using data analysis to ensure equitable representation across both reporting years. In assigning LEAs to the survey year, LEAs were stratified by student enrollment, geographical region of the state, and race/ethnicity demographics, and socioeconomic level. LEAs across the stratified categories were then randomly assigned to one of the two survey years. Each of the two cohorts includes large, medium, and small LEAs.  
  
For each LEA, a stratified, representative group of parents is selected to receive the parent survey. The number of parents chosen is dependent on the number of students with disabilities in the LEA. The sample sizes selected ensure roughly similar margins of error across the different LEA sizes.   
  
For those LEAs that have more than 100 students, a sample of parents was chosen to receive the survey. The population was stratified by grade, race/ethnicity, primary disability, and gender to ensure representativeness of the resulting sample. When calculating state-level results, responses were weighted by the student population size (e.g., an LEA that had four times as many students with disabilities as another LEA will receive four times the weight in computing overall state results). The number of respondents who reported that the school facilitated parent involvement and the total number of respondents aren’t whole numbers because weighting data often results in fractional weights.  
  
The parent survey is based on a Likert scale from “strongly agree” to “strongly disagree”. The maximum rating is 100% when a parent answers all “strongly agree”. A 67% rating is when a parent responds all “agree”, a 33% rating is when a parent responds all “disagree”, and a 0% rating is when a parent responds all “disagree. If a parent survey scores a 67% or higher, then that survey has met the minimum threshold for Indicator 8. If a parent circles “strongly disagree” on any item, then that survey has not met the indicator requirements.   
  
The USBE mails or emails a survey introduction letter, a survey, and a business reply envelope (for parents to submit completed mailed surveys) to every parent on the LEA’s determined sample list. All surveys are sent out no later than the middle of March. Surveys are expected to be returned within one month. Any parents who have not returned the surveys within the first month are provided bi-weekly reminders and are offered additional options for responding to the survey until the LEA reaches the desired response rate or until the survey closes.   
  
The USBE made the survey available in a digital format for the first time this year. The digital version of the survey was sent out to all parents who provided their email addresses and whose primary language was Spanish and/or English. Digital surveys are completed through Qualtrics. Qualtrics produces a spreadsheet of parent answers.   
  
When the paper and pen survey is completed it is scanned and processed with an Optical Mark Reader (OMR) software program. The software program helps eliminate human error during the scoring process. That program produces a spreadsheet of the parent answers. The OMR and Qualtrics survey data are merged into one spreadsheet which is securely provided to USBE’s statistician who produces the USBE report.

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

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

The USBE analyzed whether demographics were representative by using statistical significance testing to determine if one group was over-represented or under-represented in the response rate.   
  
Whether the survey was representative was assessed by comparing the demographic characteristics of the students whose parents responded to the survey against the demographic characteristics of all students with disabilities. This comparison indicates the results are representative (1) by geographic region where the student attends school; (2) by the grade level of the student; and (3) by the primary disability of the student. For example, 28% of the parents who returned a survey are parents of a student with a communication disorder and 26% of students with disabilities in the entire sample have a communication disorder.   
  
This analysis showed that response rates varied by race/ethnicity. For example, 79% of parent respondents had a student with a race/ethnicity of white, whereas 70% of students with disabilities are white; 12% of parent respondents had a student with a race/ethnicity of Hispanic, whereas 22% of the students with disabilities are Hispanic. However, there were no significant differences in the parent involvement percentage between parents of white children and parents of Hispanic students, so the USBE is confident that the overall results are representative of the State. Furthermore, results were weighted by LEA to ensure that the parent survey results reflected the population of parents. The USBE will investigate ways to increase the response rate of Hispanic students in the 2020-21 school year.  
  
The USBE also has no reason to suspect that the COVID-19 pandemic had an impact on the positivity of the survey responses. The same process (mail) was used as before the pandemic and the USBE offered a digital response option to some families for the first time. Further, the response rate increased from 2018-19 to 2019-20 by seven percentage points. The parent involvement percentage and individual item responses slightly increased from 2018-19 to 2019-20, but the USBE has no reason to believe that was a function of COVID-19.

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

To increase access to the survey, the USBE hired a third party to translate the survey into Vietnamese, Tongan, Farsi, Arabic, and Somali; the most common languages spoken in the state beyond English and Spanish. Additionally, this was the first year the survey had a digital option for families who provided an email address and whose primary languages were either English and/or Spanish. LEA Special Education Directors stated the digital survey provided additional access to families, contributing to an increase in returned surveys in both English and Spanish.  
  
The USBE works proactively with families, organizations, and LEAs to provide technical assistance and support to parties to ensure that parents are involved in their student’s education and LEAs are compliant with parental involvement/engagement as set forth in the IDEA. Parent involvement is a cornerstone of the IDEA and Utah is a State that values and honors parent rights. Parent involvement is a priority area addressed through multiple aspects of the USBEs general supervision obligation.  
  
The USBE’s monitoring process (UPIPS) has placed an emphasis on parent engagement through parent and student focus groups and focused parent engagement questions in interviews with various educators, administrators, and related service providers. LEAs are provided verbal and written feedback and recommendations for improving parent involvement as part of the monitoring process.  
  
The USBE is working on creating system coherence with parent involvement by also having this priority area built into the Program Improvement Plan (PIP) process. Each LEA is required to develop a PIP on an annual basis. The LEA must conduct a data analysis and root cause analysis in the area of parent involvement to identify areas of strength and areas of need. LEAs are required to develop goals in for parent involvement in their plan if they were identified as having high risk for Indicator 8. As the PIP is reviewed and revised each year the LEA must also report progress on previous year’s goals.

## 8 - Prior FFY Required Actions

None

## 8 - OSEP Response

## 8 - Required Actions

# Indicator 9: Disproportionate Representation

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

## 9 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**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.**

36

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 3 | 0 | 118 | NVR | 0% | 0.00% | Met Target | No Slippage |

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

YES

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

For Indicator 9, 154 LEAs are included in the analysis for SY 2019-2020. Of these 154 LEAs, 118 LEAs met the minimum “n” requirements of at least 10 students with disabilities at least one time for a Weighted Risk Ratio to be calculated. The USBE calculates a Weighted Risk Ratio for each LEA in the State, based on the identification rate of each racial/ethnic group in each LEA.   
  
Disproportionate representation is defined as a Weighted Risk Ratio of 3.00 or above. Once an LEA with a ratio is flagged for suspected disproportionate representation, the policies, procedures, and practices of that LEA are reviewed to determine if the suspected disproportionate representation is due to inappropriate identification. Only SY 2019-2020 data is used for this calculation. A “Final” Risk Ratio (based on the Weighted Risk Ratio) is determined only if there are 10 or more students with disabilities in the group of interest (cell size) and 30 or more students in the group of interest enrolled in the LEA (n size) and if there are also 10 or more students with disabilities in the comparison group (cell size) and 30 or more students in the comparison group (n size) enrolled in the LEA.

**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.**

During FFY 2019, three LEAs were flagged as having a Weighted Risk Ratio above the cut score of 3.00. A review was conducted by the State to verify there was no over-representation of any racial/ethnic groups in specific disability categories due to inappropriate identification. Utah Program Improvement Planning System (UPIPS) monitoring data were also reviewed during this process. This included student record reviews and evaluation and identification procedures, as well as interviews with teachers, administrators, parents, and students. In addition, each of the LEAS with Risk Ratio scores over 3.0 were required to review student files. No disproportionate representation was found to be occurring in these LEAs based upon this review of policies, procedures, and practices, as required in 34 CFR § 300.600(d)(3).

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

COVID-19 does not appear to have impacted the data for Indicator 9. Even though all LEAs moved to remote learning for the last two months of the school year, identification still occurred.  
  
Noncompliance identified for Indicator 9 is reported to OSEP upon identification. Findings of noncompliance are issued to the LEA as soon as possible, less than three months from discovery. LEAs are not provided an opportunity to correct the noncompliance before the finding is issued consistent with OSEP guidance https://www.schools.utah.gov/file/bc1fec07-59d6-4d21-86fb-a29273e6e44a.

**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

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**

Utah has ensured its data is valid and reliable for FFY 2019.

## 9 - OSEP Response

OSEP notes that, in the State’s narrative under Indicator 11, the State reports that “The USBE considers LEAs substantially compliant, relative to each compliance indicator, if the LEA’s data indicate a very high level of compliance (generally 95% or above) at the end of the Prong 1 correction window (OSEP Memo 09-02).” (Emphasis added.) OSEP cannot determine whether the State accounted for all instances of noncompliance (i.e., any compliance level under 100%) in its FFY 2019 data for this indicator, consistent with OSEP Memo 09-02 and OSEP’s September 3, 2008, Frequently Asked Questions Regarding Identification and Correction of Noncompliance and Reporting on Correction in the SPP/APR (see, in particular, Question and Answer 3). Also, OSEP cannot determine whether the State, in circumstances where it is unable to verify correction of noncompliance consistent with OSEP Memo 09-02 within the three-week window, issues findings to LEAs regardless of the level of noncompliance identified.

## 9 - Required Actions

In reporting its FFY 2020 data in the FFY 2020 SPP/APR, the State must clarify whether the State, in circumstances where it is unable to verify correction of noncompliance consistent with OSEP Memo 09-02 within the three-week window, issues findings to LEAs regardless of the level of noncompliance identified.

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

## 10 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**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.**

82

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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** |
| 9 | 0 | 72 | NVR | 0% | 0.00% | Met Target | No Slippage |

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

YES

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

For Indicator 10, 154 LEAs are included in the analysis for SY 2019-2020. Of these 154 LEAs, 72 LEAs met the minimum “n” requirements of at least 10 students with disabilities with a given disability at least one time for a Final Risk Ratio to be calculated. The USBE calculates a Weighted Risk Ratio for each LEA in the State, based on the identification rate of each racial/ethnic group in each LEA. (For each LEA, in theory, 42 risk ratios could be calculated—one for each of the seven racial/ethnic groups times the six primary disability categories.) Many LEAs in Utah have between zero and five students with a particular disability of a particular race/ethnicity. Thus, very small numbers prevent reliable and meaningful risk ratios from being calculated.   
  
Disproportionate representation is defined as a Final Risk Ratio of 3.00 or above. Once a LEA ratio is flagged for suspected disproportionate representation, the policies, procedures, and practices of that LEA are reviewed to determine if the suspected disproportionate representation is due to inappropriate identification. Only SY 2019-2020 data is used for this calculation. A “Final” Risk Ratio (based on the Weighted Risk Ratio) is determined only if there are 10 or more students with disabilities in the group of interest (cell size) and 30 or more students in the group of interest enrolled in the LEA (n size) and if there are also 10 or more students with disabilities in the comparison group (cell size) and 30 or more students in the comparison group (n size) enrolled in the LEA.

**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.**

During FFY 2019, nine LEAs were flagged as having a Weighted Risk Ratio above the cut score of 3.00. A review was conducted by the State to verify there was no over-representation of any racial/ethnic groups in specific disability categories due to inappropriate identification. Utah Program Improvement Planning System (UPIPS) monitoring data were also reviewed during this process. This included student record reviews and evaluation and identification procedures, as well as interviews with teachers, administrators, parents, and students. In addition to a review of LEA policies and procedures, each of the LEAs with Risk Ratio scores over 3.0 were required to review student files with LEAs with a risk ratio over 4.0 required to submit a letter to the USBE with a summary of their findings. No disproportionate representation was found to be occurring in these LEAs based upon this review of policies, procedures, and practices, as required in 34 CFR § 300.600(d)(3).

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

COVID-19 does not appear to have impacted the data for Indicator 10. Even though all LEAs moved to remote learning for the last two months of the school year, identification still occurred.  
  
Noncompliance identified for Indicator 10 is reported to OSEP upon identification. Findings of noncompliance are issued to the LEA as soon as possible, less than three months from discovery. LEAs are not provided an opportunity to correct the noncompliance before the finding is issued consistent with OSEP guidance https://www.schools.utah.gov/file/bc1fec07-59d6-4d21-86fb-a29273e6e44a.

**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

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**

Utah has ensured its data is valid and reliable for FFY 2019.

## 10 - OSEP Response

OSEP notes that, in the State’s narrative under Indicator 11, the State reports that “The USBE considers LEAs substantially compliant, relative to each compliance indicator, if the LEA’s data indicate a very high level of compliance (generally 95% or above) at the end of the Prong 1 correction window (OSEP Memo 09-02).” (Emphasis added.) OSEP cannot determine whether the State accounted for all instances of noncompliance (i.e., any compliance level under 100%) in its FFY 2019 data for this indicator, consistent with OSEP Memo 09-02 and OSEP’s September 3, 2008, Frequently Asked Questions Regarding Identification and Correction of Noncompliance and Reporting on Correction in the SPP/APR (see, in particular, Question and Answer 3). OSEP cannot determine whether, in circumstances where the State is unable to verify correction of noncompliance consistent with OSEP Memo 09-02 within the three-week window, findings are issued to LEAs regardless of the level of noncompliance identified.

## 10 - Required Actions

In reporting its FFY 2020 data in the FFY 2020 SPP/APR, the State must clarify whether the State, in circumstances where it is unable to verify correction of noncompliance consistent with OSEP Memo 09-02 within the three-week window, issues findings to LEAs regardless of the level of noncompliance identified.

# 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 | 76.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.47% | 99.28% | 99.60% | 100.00% | 96.21% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 620 | 602 | 96.21% | 100% | 97.10% | Did Not Meet Target | No Slippage |

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

18

**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.**

620 special education files were reviewed across 62 LEAs. Of the 620 files, 601 files had evaluations completed within the State-required timeline of 45-school days. One file was completed after the 45-day time period but had a compliant reason for delay that was documented in the file in accordance with Utah Special Education Rules II.D.3.   
  
Eighteen student files in twelve LEAs had assessments completed beyond the 45-school day timeline. These assessments were not completed within the required timelines and were reported as noncompliant at the time of the review. Seventeen student files were promptly corrected and verified by USBE. One file was not corrected and a finding was issued to the LEA.

**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).**

Utah State Board of Education Special Education Rules II.D. states that the initial evaluation must be conducted within 45 school days of receiving parental or adult student consent for the evaluation.

**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.**

During the 2019–2020 school year, files for students aged 3 through 21 who received an initial evaluation (Indicator 11) were reviewed through monitoring established in 34 CFR § 300.601. Monitoring visits may be triggered in a variety of ways including the State dispute resolution process as part of the general supervision system. All Indicator 11 data are included in this report regardless of what general supervision process was used to collect the data.   
  
There were 620 files reviewed across 62 LEAs. There was a total of 26 LEAs that were scheduled to have an Indicator 11 monitoring visit between March 15, 2020 and May 15, 2020. All 26 scheduled visits were cancelled in response to the global pandemic that began to affect Utah schools in the beginning of March 2020. Utah schools went into a soft closure which meant that students shifted to an online instructional model for the remainder of the 2019-2020 school year. The impact the global pandemic had on educators and students in the State also affected the USBE’s ability to finish collecting the Indicator 11 data. The COVID-19 pandemic reduced the anticipated number of files that were scheduled to be reviewed as part of Indicator 11 monitoring.   
  
The USBE utilizes UPIPS to monitor and support compliance with federal and state requirements in LEAs across the state of Utah. UPIPS is based on the concept that monitoring is a continuous process to improve procedural compliance and outcomes for students with disabilities. UPIPS includes a Results Driven Accountability (RDA) process to review each LEA’s performance on APR indicators and state requirements as established (e.g., APR indicators, timeliness of data and fiscal reports, the LEA's Program Improvement Plan [PIP], use of internal monitoring for compliance, etc.). LEAs are assigned a risk score in each of the pre-identified areas and indicators, based on their data in each area. The risk range is one through five, with five designating high risk. LEAs are given a risk score of five if the compliance is ten percentage points or more below state target. After risk scores have been assigned, LEAs are assigned a program implementation monitoring tier (i.e., Supporting, Guiding, Assisting, Coaching, or Directing) which includes a package of supports and activities (including monitoring) for each LEA based on the LEA’s level of identified level of need. LEAs who are in the coaching and directing tier receive a full monitoring visit that will include a review of Indicator 11 data as part of the comprehensive review. Full monitoring visits, as mentioned previously, may also be triggered by dispute resolution or through other general supervision systems. During each file review, the LEA is encouraged to invite staff to participate and receive technical assistance during the review process and all Indicator 11 data coming from a full monitoring review is included.   
  
The USBE also collects Indicator 11 data through file reviews/monitoring. The file reviews are how most of the Indicator 11 data is gathered because it includes a larger number of LEAs. The plan ensures that every LEA will have files monitored biennially. The Indicator 11 monitoring is based on the Indicator 8 parent survey. Half of the LEAs in the state receive the Indicator 8 parent survey and the other half receive an Indicator 11 monitoring visit in a single year. The four largest LEAs in the state receive file monitoring on an annual basis for Indicator 11.   
  
Noncompliance found at the time of the review is reported to OSEP. Based on the results of monitoring, LEAs were provided three weeks to correct noncompliance before being issued any findings of noncompliance. During FFY 19 USBE considered LEAs substantially compliant, relative to each compliance indicator, if the LEA’s data indicated a very high level of compliance (generally 95% or above) at the end of the Prong 1 correction window (OSEP Memo 09-02). If an LEA was below 95% compliant on Indicator 11 at the end of Prong 1, then a finding of noncompliance was issued.   
  
During the OSEP call on April 21, 2021 USBE received clarifying information. USBE must issue findings of noncompliance, if it finds any level of noncompliance with IDEA. LEAs can be provided time to correct identified noncompliance before findings are issued. OSEP expects to see findings issued less than three months from discovery. USBE will issue written findings, following a period of correction, for anything lower than 100% compliance.   
  
USBE did an additional data review from FFY19 and found only one LEA had not promptly corrected noncompliance and was below 100% compliance. The LEA was issued a finding of noncompliance that can be provided upon request.   
  
Written findings from the USBE to an LEA containing the State’s conclusion the LEA program is in noncompliance and includes the citation of the statute or regulation and a description of the data supporting the conclusion. Written notifications of findings occur as soon as possible, within less than three months. If an LEA is non-compliant with Indicator 11, they would be issued a finding for General Supervision with a citation of 34 CFR § 300.301 for the initial evaluation. Upon written notification of noncompliance from the USBE, the LEA must correct the noncompliance in its policies, procedures, and practices as soon as possible, but no later than one year from identification. LEAs must demonstrate all instances of noncompliance are corrected in each individual student file. LEAs with findings of noncompliance are also required to provide additional files for compliance review, document additional professional development on the regulatory requirements, and submit additional monitoring data which demonstrate correction of the noncompliance in LEA policies, procedures, and practices (OSEP Memo 09-02).

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

Indicator 11 results have been impacted by the lack of in-person schooling options during the pandemic. LEAs made a variety of efforts to conduct assessments and hold required meetings within the timelines. Technology was used widely and continues to be used where appropriate. In person assessment are conducted when required to glean accurate data as outlined by assessment publishers. In person assessments followed protocols as outlined by the USBE and the Utah Department of Health.   
  
During the 2017-2018 school year, 372 files were reviewed. During the 2018-2019 school year, the number of files reviewed increased by over 300% to 1,215. During the 2019-2020 school year, the global pandemic began impacting LEAs in March of 2020 which reduced the number of files reviewed to 620 for 2019-2020.

**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** |
| --- | --- | --- | --- |
| 4 | 4 | 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***

Four LEAs from the 2018-2019 school year were issued a finding of noncompliance specific to the length of time to complete the initial evaluation. The number of files corrected in these four LEAs was less than 95% (i.e., 93.3%, 92.9%, 91.2%, and 86.7%). The LEA moved into a correction window which required them to correct all files of individual student noncompliance and provide the corrections to the USBE for verification. USBE verified correction of individual student noncompliance, and verified the LEA was correctly implementing regulatory requirements by reviewing additional files to demonstrate a systemic understanding and a correct implementation of the regulatory requirements. Verification of 100% compliance was confirmed in all instances. The letters of findings, corrective action plans, and documentation of corrections of noncompliance for each LEA can be provided upon request. One of the four schools that was issued a finding for Indicator 11 closed in May of 2019. The USBE has documentation that all findings were completed by April 3, 2019 that can be provided upon request.

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

To correct noncompliance concerning student-specific requirements subject to a specific timeline, the LEA must submit documentation that the required action (i.e., the evaluation, reevaluation, or IEP) was completed, even if it is late. They must also show consent and eligibility determination for an alternate student file from the same case manager to demonstrate an understanding of the requirements.  
  
The USBE concludes and reports that noncompliance has been corrected by verifying, consistent with OSEP Memo 09-02, that the LEA: 1) has corrected each individual case of student-specific noncompliance (Prong 1), and 2) is correctly implementing the specific regulatory requirements (i.e., subsequently achieved 100% compliance) (Prong 2), based on the USBE review of the corrections data.

**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

None

## 11 - OSEP Response

In its narrative describing the method used to collect data for this indicator, the State reported that "[n]oncompliance found at the time of the review is reported to OSEP. Based on the results of each of the reviews outlined above, LEAs were provided three-weeks to correct non-compliance before being issued any findings of non-compliance. The USBE considers LEAs substantially compliant, relative to each compliance indicator, if the LEA’s data indicate a very high level of compliance (generally 95% or above) at the end of the Prong 1 correction window (OSEP Memo 09-02). If an LEA is below 95% compliant on Indicator 11 at the end of Prong 1, then a finding of noncompliance is issued." The State also reported that based on guidance received from OSEP during the April 2021 clarification period, the State now understands that "USBE must issue findings of noncompliance, if it finds any level of noncompliance with IDEA. LEAs can be provided time to correct identified noncompliance before findings are issued. OSEP expects to see findings issued less than three months from discovery. USBE will issue written findings, following a period of correction, for anything lower than 100% compliance."   
  
Further, the State reported that during the April 2021 clarification period, "USBE did an additional data review of FFY19 data and found only one LEA had not promptly corrected noncompliance and was below 100% compliance. The LEA was issued a finding of noncompliance that can be provided upon request."

## 11 - Required Actions

The State must, in the FFY 2020 SPP/APR, report on the status of correction of noncompliance identified during the April 2021 clarification period, based on FFY 2019 data, for this indicator.   
  
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 | 85.80% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.77% | 99.90% | 99.74% | 99.84% | 99.62% |

**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. | 2,730 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 466 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 2,033 |
| 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. | 71 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 32 |
| 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. | 2,033 | 2,161 | 99.62% | 100% | 94.08% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

Due to the COVID-19 school closures, eligibility assessments were delayed which impacted IEP dates for 126 of the students whose IEPs were done after the student’s third birthday. Schools were closed and unable to complete eligibility assessments. At the time of this report, all IEPs have been completed for these students.

**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**

128

**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.**

For 126 students, the IEP was completed after the student’s third birthday due to the impact of COVID-19 school closures. LEAs were unable to complete eligibility assessments due to the COVD-19 school closures. When possible, transition meetings were held remotely to discuss assessment procedures with families. Part C assessment data was considered for Part B eligibility if the assessment data met Part B criteria and was current. Many students needed additional assessments to determine eligibility. For these students, assessments were completed when the USBE and LEA deemed it safe to complete assessments in person. For most LEAs, this occurred early Fall 2020. All IEPs impacted by the spring/summer 2020 COVID-19 school closures have been completed.   
  
Two of the late IEPs were not attributed to the COVID-19 school closures. The reasons for the delays are outlined below.   
  
LEA 1: The LEA had 28 transitions of which one IEP was late resulting in a compliance rating of 94.12%. Based on a review of why the IEP was late, the LEA reported that the student’s birthday was in the summer. The LEA was under the incorrect assumption that the IEP could be completed in the fall after the student’s third birthday since the birthday was in the summer. USBE special education preschool specialist provided training for the LEA on Indicator 12 timelines. The LEA trained staff and created new procedures to ensure that all IEPs are completed within timelines, including students with summer birthdays.  
  
LEA 2: The LEA had 76 transitions of which 19 IEPs were late due to the COVID-19 school closures and one was late due to the LEA’s procedures resulting in a compliance rating of 60.78%. The IEPs that were late due to COVID-19 were completed as soon as the LEA was able to complete eligibility assessments. These IEPs have been completed. Based on a review of why the one IEP was late due to LEA procedures, the LEA reported that at that time the LEA had assessment procedures that required an observation prior to scheduling eligibility assessments. This led to a backlog of testing and some IEPs were completed after the student’s third birthday. The LEA has changed assessment procedures and no longer requires an observation to ensure that all IEPs are completed by the student’s third birthday.

**Attach PDF table (optional)**

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

State database that includes data for the entire reporting year

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

The statewide database Transition from Early Intervention Data Input (TEDI) has been fully operational since FFY 2009. TEDI accesses the Part C statewide database daily to obtain a list of all students that meet four criteria: student is 27 months old, has not opted out, is actively enrolled, and is considered potentially eligible for Part B. Student’s data is transferred to TEDI with the student’s demographic information. As the Part C database transfers a student into TEDI, TEDI then accesses the USBE’s Statewide Student Identifier System (SIS) to provide that student with a unique identification number that will continue with that student throughout his/her public education experience in Utah. To ensure confidentiality, individual student-level data are only available to school personnel with the appropriate permissions within TEDI.   
  
TEDI provides an up-to-date status of the Part C to Part B Transition meeting, the date of the student’s third birthday, and whether the student was found eligible or not eligible. The Part C database and the Part B database (TEDI) provide data back and forth daily. Before a student’s file can be closed out in Part C, the provider is required to reconcile data that has come from TEDI to ensure that the exit reason is accurately recorded for each student that has been referred to Part B.   
  
TEDI provides USBE and the LEAs with the necessary census data to ensure timely transitions from Part C to Part B. These transition data were collected from July 1, 2019 through June 30, 2020. In the process of reviewing LEA data on this Indicator, USBE followed guidance provided in the Office of Special Education Programs (OSEP) 09-02 Memo. Noncompliance with timelines for Indicator 12 (34 CFR § 300.124) is identified during an annual review of the TEDI statewide database by USBE and included with general supervision data.

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

Noncompliance identified for Indicator 12 is reported to OSEP upon identification. Findings of noncompliance are issued to the LEA as soon as possible, less than three months from discovery. LEAs are not provided an opportunity to correct the noncompliance before the finding is issued consistent with OSEP guidance https://www.schools.utah.gov/file/bc1fec07-59d6-4d21-86fb-a29273e6e44a.

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 8 | 8 | 0 | 0 |

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

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

The USBE special education preschool specialist completed a fidelity checklist of the transition process with each LEA that had findings of noncompliance identified to ensure the regulatory requirements were correctly implemented. The USBE special education preschool specialist also reviewed additional files from each LEA to determine that each LEA was correctly implementing the regulatory requirements. Upon review of the files, the USBE verified that each individual case of noncompliance was corrected and that the LEA was correctly implementing the regulatory requirements.

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

In FFY 2018, eight students from six LEAs were not evaluated and determined eligible or ineligible for special education by the child’s third birthday. The USBE issued the LEAs a written finding of noncompliance. The USBE special education preschool specialist met with each LEA and verified that each individual case of noncompliance was corrected to ensure students were evaluated for special education eligibility as soon as possible, and in no case later than one year.

**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

OSEP notes that, in the State’s narrative under Indicator 11, the State reports that “The USBE considers LEAs substantially compliant, relative to each compliance indicator, if the LEA’s data indicate a very high level of compliance (generally 95% or above) at the end of the Prong 1 correction window (OSEP Memo 09-02).” (Emphasis added.) OSEP cannot determine whether, in circumstances where the State is unable to verify correction of noncompliance consistent with OSEP Memo 09-02 within the three-week window, findings are issued to LEAs regardless of the level of noncompliance identified.

## 12 - Required Actions

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

# Indicator 13: Secondary Transition

**Instructions and Measurement**

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

**Compliance indicator**: Secondary transition: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student’s transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

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

**Data Source**

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

**Measurement**

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student’s transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100.

If a State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16, the State may, but is not required to, choose to include youth beginning at that younger age in its data for this indicator. If a State chooses to do this, it must state this clearly in its SPP/APR and ensure that its baseline data are based on youth beginning at that younger age.

**Instructions**

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

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

Targets must be 100%.

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

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

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 54.67% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 99.75% | 92.41% | 92.07% | 88.40% | 39.71% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 347 | 666 | 39.71% | 100% | 52.10% | 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.**

In 2016 the USBE lowered the age for transition planning to age 14. Data for Indicator 13 is collected through onsite monitoring visits by USBE staff and contracted monitors. Monitors conduct file reviews using the UPIPS online system. Forty-seven (47) LEAs were visited during the 2019-2020 school year through full monitoring visits or as part of the Indicator 13 file monitoring. Forty-Seven (47) LEAs provided 666 files including data for youth aged 14 and above with IEPs. Of the 666 IEPs reviewed, 347 or 51.10%, met state requirements. LEAs provided immediate corrections of noncompliance that was verified by USBE staff within a three-week correction window in 44 LEAs. The LEAs who immediately corrected non-compliance were not issued any written findings of non-compliance. Three LEAs were issued written findings of noncompliance in FFY 2019 because they were below 95% compliant in one or more required transition areas at the end of the three-week correction window.   
  
In the FFY 2018 APR report, the USBE reported data based on 491 files that were reviewed for students that were at least 16 years old at the time the IEP was written. The data being reported for FFY 2019 includes 666 files that were reviewed representing students that were at least 14 years old at the time the IEP was written. When looking at the data it is important to recognize that the USBE is reporting on a larger sample size and gradually moving the needle with Indicator 13 compliance which is largely attributed to the intensified training and coaching efforts being made with this indicator.   
  
The USBE utilizes UPIPS to monitor and support compliance with federal and state requirements in LEAs across Utah. UPIPS is based on the concept that monitoring is a continuous process to improve procedural compliance and outcomes for students with disabilities. UPIPS includes a Results Driven Accountability (RDA) process to review each LEA’s performance on APR indicators and state requirements as established (e.g., APR indicators, timeliness of data and fiscal reports, the LEA's Program Improvement Plan [PIP], use of internal monitoring for compliance, etc.). LEAs are assigned a risk score in each of the pre-identified areas and indicators based on their data in each area. The risk range is one through five, with five designating high risk. LEAs are given a risk score of five if the compliance is ten percentage points or more below state target (i.e., <90% for Indicator 13). After risk scores have been assigned, LEAs are assigned a program implementation monitoring tier (i.e., Supporting, Guiding, Assisting, Coaching, or Directing) which includes a package of supports and activities (including monitoring) for each LEA based on the LEA’s level of identified need. LEAs who are in the coaching and directing tier receive a full monitoring visit that will include a review of Indicator 13 data as part of the comprehensive review. Full monitoring visits, as mentioned previously, may also be triggered by dispute resolution or through other general supervision systems. During each file review, the LEA is encouraged to invite staff to participate and receive technical assistance during the review process and all Indicator 13 data that comes from a full monitoring review is included in the APR.   
  
The USBE also collects Indicator 13 data through monitoring file reviews. The LEA has files monitored biennially. The Indicator 13 monitoring is on an alternating schedule with the Indicator 8 parent survey. Half of the LEAs in the state receive the Indicator 8 parent survey and the other half receive an Indicator 13 monitoring visit in a single year. The four largest LEAs in the state receive monitoring visits on an annual basis for Indicator 13.   
  
LEAs were provided three weeks (i.e., Prong 1) to correct non-compliance before being issued any findings of non-compliance. The USBE considered LEAs substantially compliant, relative to each compliance indicator, if the LEA’s data indicated a very high level of compliance (generally 95% or above) at the end of the Prong 1 correction window (OSEP Memo 09-02). If an LEA was below 95% compliant on any of the areas outlined in the APR Measurement Table for Indicator 13 at the end of Prong 1, then a finding of noncompliance was issued. A finding is a written notification from the USBE to an LEA containing the State’s conclusion the LEA program is in noncompliance and includes the citation of the statute or regulation and a description of the data supporting the conclusion. Written notifications of findings occur as soon as possible following the Prong 1 correction window and within less than three months. The USBE ensures that all instances of non-compliance are corrected within one year whether written findings were issued or not.   
  
Noncompliance found at the time of the review is reported to OSEP. Based on the results of each of the reviews outlined above, LEAs were provided three-weeks to correct noncompliance before being issued any findings of noncompliance. During FFY 19 USBE considered LEAs substantially compliant, relative to each compliance indicator, if the LEA’s data indicated a very high level of compliance (generally 95% or above) at the end of the Prong 1 correction window (OSEP Memo 09-02). If an LEA was below 95% compliant on Indicator 13 at the end of Prong 1, then a finding of noncompliance is issued.   
  
During the OSEP call on April 21, 2021 USBE received clarifying information. USBE must issue findings of noncompliance if it finds any level of noncompliance with IDEA. LEAs can be provided time to correct identified noncompliance before findings are issued. OSEP expects to see findings issued less than three months from discovery. USBE will issue written findings, following a period of correction, for anything lower than 100%.  
  
USBE did an additional data reviewed from FFY19. Three LEAs had been issued formal findings and two additional LEAs should have been issued findings bringing the total to five. The two additional LEAs were notified informally through the UPIPS system with the citation of the statute or regulation and a description of the data supporting the conclusion. Individual student noncompliance has been corrected and verified. Additional files have been reviewed to ensure 100% compliance. Formal written findings will be sent to the two additional LEAs, and all findings letters can be provided upon request.   
  
Written findings from the USBE to an LEA containing the State’s conclusion the LEA program is in noncompliance and includes the citation of the statute or regulation and a description of the data supporting the conclusion. Written notifications of findings occur as soon as possible, within less than three months. If an LEA is non-compliant with Indicator 13, they would be issued a finding for Indicator 13 with a citation of each rule related to post-school transition (34 CFR § 300.43 and 34 CFR § 300.320) that demonstrated substantial non-compliance. Upon written notification of noncompliance from the USBE, the LEA must correct the noncompliance in its policies, procedures, and practices as soon as possible, but no later than one year from identification. LEAs must demonstrate all instances of noncompliance are corrected in each individual student file. LEAs with findings of noncompliance are also required to provide additional files for compliance review, document additional professional development on the regulatory requirements, and submit additional monitoring data which demonstrate correction of the noncompliance in LEA policies, procedures, and practices (OSEP Memo 09-02).

| **Question** | **Yes / No** |
| --- | --- |
| Do the State’s policies and procedures provide that public agencies must meet these requirements at an age younger than 16? | YES |
| If yes, did the State choose to include youth at an age younger than 16 in its data for this indicator and ensure that its baseline data are based on youth beginning at that younger age? | YES |
| If yes, at what age are youth included in the data for this indicator | 14 |

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

There was a total of 22 LEAs that were scheduled to have an Indicator 13 file review between March 15, 2020, and May 15, 2020. The visits scheduled across the 22 LEAs were cancelled in response to the global pandemic that began to effect Utah schools in the beginning of March 2020. Utah schools went into a soft closure which meant that students shifted to an online instructional model for the remainder of the 2019-2020 school year. The impact the global pandemic had on educators and students in the State also effected USBE’s ability to finish collecting the Indicator 13 sample. The COVID-19 pandemic reduced the anticipated number of files that were scheduled to be reviewed as part of the Indicator 13 sampling.

**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** |
| --- | --- | --- | --- |
| 10 | 10 | 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***

Upon written notification of noncompliance from the USBE, the LEA must correct the noncompliance in its policies, procedures, and practices as soon as possible, but no later than one year from identification. LEAs must demonstrate all instances of noncompliance are corrected in each individual student file. LEAs with findings of noncompliance are also required to document additional professional development on the regulatory requirements and submit additional monitoring data which demonstrate correction of the noncompliance in LEA policies, procedures, and practices (OSEP Memo 09-02), including completion of overdue evaluation(s), Individualized Education Programs (IEPs), etc.   
  
The USBE follows guidance provided in OSEP Memo 09-02. Enforcement actions include 1) accounting for all instances of noncompliance, identifying where the noncompliance occurred, the percentage level of noncompliance, and the root cause of the noncompliance; 2) requiring the correction of LEA noncompliance in the policies, procedures, and practices contributing to or resulting in the noncompliance; and 3) determining the LEA is correctly implementing the specific regulatory requirements of IDEA, including the correction of noncompliance in conformance with OSEP Memo 09-02. While files are reviewed to determine ongoing LEA compliance with all specific regulatory requirements of IDEA, each file with noncompliance is also reviewed to ensure correction at the individual student level. Targeted technical assistance continues to be provided to achieve the target of 100%.   
  
In the 2018-2019 school year, there were 51 LEAs that had files reviewed for Indicator 13. Forty-one (41) of those LEAs immediately completed correction of noncompliance within three-weeks from the identification of noncompliance and submitted documentation which were reviewed and verified providing evidence of correct implantation of specific regulatory requirements. These LEAs were not issued findings of noncompliance.   
  
On the FFY 2018 APR the USBE only reported six LEAs that received findings for the 2018-2019 school year. When reviewing data for the FFY 2019 APR the USBE realized that there were 10 LEAs that were issued findings for 2018-2019 school year. The number of files with compliant transition plans in these 10 LEAs was less than 95% in one or more of the required areas for transition which resulted in USBE issuing a finding of noncompliance.   
  
All LEAs who had identified noncompliance in FY 2018 have corrected all noncompliance within one year. The LEAs moved into a correction window which required them to correct all files of individual student noncompliance and provide the corrections to the USBE for verification. USBE verified correction of individual student noncompliance, and verified the LEA was correctly implementing regulatory requirements by reviewing additional files to demonstrate a systemic understanding and a correct implementation of the regulatory requirements. Verification of 100% compliance was confirmed in all instances. The letters of findings, corrective action plans, and documentation of corrections of noncompliance for each LEA can be provided upon request.

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

To correct noncompliance concerning transition plans, the LEA must submit the documentation of the corrected transition plan in the areas that were identified as noncompliant. If changes are needed to be made for an existing transition plan, then the transition plan may be corrected through the IEP amendment process. If a transition plan was not developed for a student who was 14 at the time the IEP is written, then the amendment process may not be used, and the IEP team must be pulled together to develop a transition plan. Once corrections are made for the item of noncompliance that was identified, the LEA must identify that the error has been corrected and then correction must be verified and approved by the USBE to finalize the correction.

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

## 13 - Prior FFY Required Actions

None

## 13 - OSEP Response

In its narrative describing the method used to collect data for this indicator, the State reported that "[n]oncompliance found at the time of the review is reported to OSEP. Based on the results of each of the reviews outlined above, LEAs were provided three-weeks to correct noncompliance before being issued any findings of noncompliance. During FFY 19 USBE considered LEAs substantially compliant, relative to each compliance indicator, if the LEA’s data indicated a very high level of compliance (generally 95% or above) at the end of the Prong 1 correction window (OSEP Memo 09-02). If an LEA was below 95% compliant on Indicator 13 at the end of Prong 1, then a finding of noncompliance is issued." The State also reported that, based on guidance provided by OSEP during the April 2021 clarification period, the State now understands that "USBE will issue written findings, following a period of correction, for anything lower than 100%."  
  
Further, the State reported that during the April 2021 clarification period, "USBE did an additional data review of the FFY19 data. Three LEAs had been issued formal findings and two additional LEAs should have been issued findings bringing the total to five. The two additional LEAs were notified informally through the UPIPS system with the citation of the statute or regulation and a description of the data supporting the conclusion. Individual student noncompliance has been corrected and verified. Additional files have been reviewed to ensure 100% compliance. Formal written findings will be sent to the two additional LEAs, and all findings letters can be provided upon request."

## 13 - Required Actions

The State must, in the FFY 2020 SPP/APR, report on the status of correction of noncompliance identified during the April 2021 clarification period, based on FFY 2019 data, for this indicator.   
  
Because the State reported less than 100% compliance for FFY 2019, the State must report on the status of correction of noncompliance identified in FFY 2019 for this indicator. When reporting on the correction of noncompliance, the State must report, in the FFY 2020 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2019 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2020 SPP/APR, the State must describe the specific actions that were taken to verify the correction.  
  
If the State did not identify any findings of noncompliance in FFY 2019, although its FFY 2019 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2019.

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

State selected data source.

**Measurement**

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

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

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

**Instructions**

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

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

**I. *Definitions***

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

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

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

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

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

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

**II. *Data Reporting***

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

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

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

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

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

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

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

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

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

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

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

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2009 | Target >= | 25.25% | 26.00% | 27.50% | 28.25% | 29.00% |
| A | 27.56% | Data | 20.82% | 19.35% | 20.74% | 20.24% | 19.62% |
| B | 2009 | Target >= | 70.67% | 72.67% | 75.67% | 78.67% | 81.67% |
| B | 54.25% | Data | 65.35% | 64.63% | 66.82% | 68.77% | 67.60% |
| C | 2009 | Target >= | 84.83% | 87.83% | 90.83% | 93.83% | 96.83% |
| C | 71.84% | Data | 79.72% | 79.46% | 82.63% | 84.32% | 84.37% |

**FFY 2019 Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 29.75% |
| Target B >= | 85.07% |
| Target C >= | 99.83% |

**Targets: Description of Stakeholder Input**

See attachment

See Introduction, FFY19 Stakeholder Involvement and Input.

**FFY 2019 SPP/APR Data**

|  |  |
| --- | --- |
| Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school | 2,429 |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 471 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 1,000 |
| 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) | 346 |
| 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). | 208 |

| **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) | 471 | 2,429 | 19.62% | 29.75% | 19.39% | Did Not Meet Target | No Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 1,471 | 2,429 | 67.60% | 85.07% | 60.56% | Did Not Meet Target | 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) | 2,025 | 2,429 | 84.37% | 99.83% | 83.37% | Did Not Meet Target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **B** | Participation in competitive employment decreased because of COVID-19. Data shows that 30% of respondents reported being laid off or not working because of COVID-19 shut-down/stay at home orders (the question on COVID-19 was a new question added this year).  The data show that participation in the competitive employment decreased from 59.6% to 51.7%. (Note: The responses rate was significantly higher in FFY 2019 (51%) vs. FFY 2018 (39%), due to targeted efforts to reach students). |
| **C** | See reasons for slippage as outlined in 14B. |

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

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

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

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

| **Survey Question** | **Yes / No** |
| --- | --- |
| Was a survey used? | YES |
| If yes, is it a new or revised survey? | YES |
| If yes, attach a copy of the survey | UTPartBSPPAPRFFY2019Ind14SurveyQuestions |

**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.**

See attachment UTPartBSPPAPRFFY2019Ind14ExitersDisabilities.

| **Question** | **Yes / No** |
| --- | --- |
| Are the response data representative of the demographics of youth who are no longer in school and had IEPs in effect at the time they left school? | NO |

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

The USBE had a 3% underrepresentation of students from historically marginalized populations (including students who identify as American Indian, Asian, Black/African American, Hispanic/Latino, Pacific Islander, or Multiple Races) in its post school outcomes survey respondents and a 2% underrepresentation of students who dropped out of school in the 2019 APR survey data. In comparison to our 2018 APR, the gaps in survey representation have decreased in the minority student survey respondents by 3%, the dropout respondents by 5% and Hispanic students by 2.4%. The USBE is aware of the disproportionality among various demographics in the survey data and is continually working to examine the root causes to implement strategies that will improve the disproportionality in the survey data. Additionally, The USBE is providing LEAs with strategies, for contacting hard to find youth, as well as encouraging and training LEAs to conduct their own surveys vs. using USBE contracted interviewers. Strategies include pre-notification techniques, creating familiarity with students, providing incentives and contacting students. There has been an increase in response rates among those LEAs that have conducted their own surveys, especially for underrepresented populations. For this year’s survey (FFY2019) the USBE matched student exit data with state adult education enrollment data to increase outcome data for those students who had dropped out and have enrolled in adult education for completion of a General Education Diploma (GED) or adult education diploma completion. This practice of adult education data matching has decreased the gap in the USBE's under-representation of survey data for students who dropped out.

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

The USBE has increased its survey response rate from 39% in 2019 to 51% in 2020 by providing targeted training and coaching to LEAs regarding Indicator 14. National employment patterns, during much of 2020, are like those shown in the survey outcome data, with a decrease in competitive employment opportunities and an increase in other, noncompetitive employment.  
  
Indicator 14 outcomes were impacted by the soft closure of schools and businesses. The statewide economic impacts increased the unemployment rate to 10.4% in April 2020. We anticipate a continued impact on Indicator 14 in FFY 2020.

## 14 - Prior FFY Required Actions

None

## 14 - OSEP Response

## 14 - Required Actions

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

## 14 - State Attachments

 

# Indicator 15: Resolution Sessions

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

Sampling is not allowed.

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

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

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

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

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

## 15 - Indicator Data

Select yes to use target ranges

Target Range not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints | 11/04/2020 | 3.1 Number of resolution sessions | 6 |
| 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 | 4 |

**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.**

YES

**Provide an explanation below.**

The USBE reported that six resolution sessions were held due to a reporting error that counted a resolution session that occurred outside of the reporting timeframe. Only five resolution sessions occurred between July 1, 2019, and June 30, 2020.

**Targets: Description of Stakeholder Input**

See attachment

See introduction, FFY19 Stakeholder Involvement and Input.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
|  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= |  |  |  |  | 0.00% |
| Data | 0.00% | 100.00% | 0.00% | 66.67% | 44.44% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 4 | 5 | 44.44% |  | 80.00% | N/A | N/A |

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

States are not required to establish baseline or targets if the number of resolution sessions is less than ten sessions. Despite having fewer than ten resolution sessions in FFY 2018, the USBE included a target of 40% for FFY 2019. When the USBE identified this inconsistency, it determined that it did not intend to set a target for FFY 2019. Therefore, the previously included target for FFY 2019 is not included in this report.  
  
COVID-19 had no specific, discernible impact on this indicator or its data. Three of the five resolution sessions for FFY 2019 occurred prior to March 2020. The remaining two resolution sessions were conducted virtually in the wake of COVID-19’s impact on in-person gatherings. To mitigate COVID-19’s impact on dispute resolution processes, USBE staff attended training on conducting virtual due process hearings and met with all contracted due process hearing officers to train and provide technical assistance on using virtual platforms and ensuring that dispute resolution processes continued forth despite COVID-19 restrictions.  
  
The USBE works proactively with families, organizations, and LEAs to provide technical assistance and support to parties needing or potentially needing access to dispute resolution services. Through a partnership with UPC, families can access Parent Consultants who can assist in resolving disputes with LEAs in an informal way through communication, IEP meeting preparation and attendance, etc.  
  
Corrections to the Indicator 15 data will be made during the dispute resolution reopen period of May 3, 2021 – May 26, 2021.

## 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.   
  
 The State reports correction to the Indicator 15 data will be made during the dispute resolution reopen period May 3, 2021- May 26 2021.

## 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 | 10 |
| 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 | 3 |
| 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 | 3 |

**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.**

YES

**Provide an explanation below**

Only eight mediations occurred between July 1, 2019, and June 30, 2020. Of those eight mediation sessions held during the reporting period, five were related to due process complaints, and the other three were not related to due process complaints. In the USBE’s data reported under Section 618, the USBE had initially erroneously reported on the FFY18 APR that ten mediations were held between July 1, 2019, and June 30, 2020.

**Targets: Description of Stakeholder Input**

See attachment

See Introduction, FFY19 Stakeholder Involvement and Input.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 87.50% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= |  |  | 90.00% | 90.00% | 90.00% |
| Data | 100.00% | 87.50% | 100.00% | 90.00% | 68.75% |

**Targets**

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

**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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 3 | 2 | 8 | 68.75% | 60.00% | 62.50% | Met Target | No Slippage |

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

In SFY 2020, the USBE held eight mediation sessions, five of which resulted in mediation agreements, reflecting a 62.50% measurement, and meeting its target of 60.00%.   
  
The USBE works proactively with families, organizations, and LEAs to provide technical assistance and support to parties needing or potentially needing access to dispute resolution services, including mediation. Through a partnership with Utah’s Parent Training and Information Center, the Utah Parent Center (UPC), families can access Parent Consultants who can assist in resolving disputes with LEAs in an informal way through communication, IEP meeting preparation and attendance, etc.   
  
COVID-19 had no specific, discernible impact on this indicator or its data. Five of the eight mediation sessions for FFY 2019 were completed prior to March 2020. The remaining three mediation sessions were conducted virtually in the wake of COVID-19’s impact on in-person gatherings. Two were successful, and one resulted in impasse; a 66% success rate is commensurate with the USBE’s FFY 2019 data prior to effects of COVID-19 on education. To mitigate COVID-19’s impact on dispute resolution processes, USBE staff attended training on conducting virtual mediations and stood by to provide technical assistance to all contracted mediators on using virtual platforms (if needed) and ensuring that dispute resolution processes continued forth despite COVID-19 restrictions.  
  
Corrections to the Indicator 16 data will be made during the dispute resolution reopen period of May 3, 2021 – May 26, 2021.

## 16 - Prior FFY Required Actions

None

## 16 - OSEP Response

The State reported fewer than ten mediations held in FFY 2019. The State is not required to meet its targets until any fiscal year in which ten or more mediations were held.  
  
The State reports correction to the Indicator 16 data will be made during the dispute resolution reopen period May 3, 2021- May 26 2021.

## 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:**

Leah Voorhies

**Title:**

Assistant Superintendent of Student Support (State Director of Special Education)

**Email:**

leah.voorhies@schools.utah.gov

**Phone:**

8015387898

**Submitted on:**

04/29/21 5:40:15 PM

# ED Attachments

  

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