**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**

**Wyoming**

U.S. Department of Education seal

**PART B DUE   
February 1, 2021**

**U.S. DEPARTMENT OF EDUCATION**

**WASHINGTON, DC 20202**

# Introduction

**Instructions**

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

## Intro - Indicator Data

**Executive Summary**

The Wyoming Department of Education (WDE): Special Education Programs (SEP) implements a general supervision system that aligns with both the letter and spirit of the Individuals with Disabilities Education Act (IDEA). The WDE has worked to develop and implement a State Performance Plan/Annual Performance Report (SPP/APR) process that is not only a means of reporting to OSEP and the public on statewide data for students with disabilities, but is also an essential part of a holistic system of general supervision. The Wyoming General Supervision System is one that is integrated, robust, and responsive to data represented in the SPP/APR OSEP indicators. Ultimately, the SPP /APR process plays a key role in continuously improving educational results and functional outcomes for students with disabilities.

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

On March 15th 2020 Governor Gordon recommended that Wyoming Schools close in response to the Coronavirus. By March 16th 37 LEAs throughout the state were closed. This includes the one LEA that oversees all 14 Regions of the Child Development Centers who serve children 3-5 across the whole state. On March 20th the Governor and Wyoming State Health Officer issued a statewide closure order for all public spaces. This health order included all K-12 Schools within the state and all Child Development Centers. As of March 20th all 49 LEAs in the state were closed. By April 1st, under the authority of the Virtual Education Chapter 41 Rules, (which had been revised under the emergency promulgation process) the Wyoming Department of Education collected and approved Adapted Learning Plans from all LEAs. On April 3rd 2020, it was announced that the statewide school closing that was originally expected to end on April 17th was extended through April 30th. Then on April 29th, the statewide school closure was extended from April 30th until May 15th. No additional orders were issued extending the school closures beyond May 15th. Schools in the state were allowed to reopen in a “limited capacity” pending approval from local authorities. However, there is no indication that any of the LEAs chose to reopen to in-person instruction after May 15th 2020. With only two weeks left in the spring semester districts throughout the state had signaled their intent to finish the 2019-20 school year in a virtual format.  
The State believes the collection of data is complete, valid, and is reliable. Other than the state assessment data and the preschool outcomes data, the WDE communicated to LEAs from the beginning of the pandemic that the expectation for timely and accurate data has not changed. The State issued COVID-19 guidance to all LEAs and the Special Education Programs Division issued on-going guidance which included communicating that data deadlines were not going to be altered in any way. Whether or not students and teachers were in buildings or attending virtually should not have had an impact on the collection and submission of data. For some indicators, the impact pf COVID-19 is reflected in the data, but not in the quality of the data.   
The pandemic has had a significant impact on special education data. Of course, with the absence of a statewide assessment, I-3 will not have data to report, but there are other notable significant impacts. For exactly the same reason as I-3, I-7 is dramatically impacted because the exiting assessment for student ages 3-5 also occurs in the spring and the number of children who were able to be assessed was significantly affected. A detailed account of the impact on the I-7 data is outlined in that section.   
Another SPP Indicator that was impacted by COVID-19 is Indicator 14, and also special considerations for Indicator 11 as well, which are noted in those sections.   
The State took steps to guide LEAs through this unprecedented time. WDE issued a Special Education COVID Guidance Document, and within that, embedded the March 21, 2020 OCR/OSEP joint guidance through a Supplemental Fact Sheet on IDEA which included a clear and concise outline that the timelines within IDEA stand and will not be waived.  
  
ADDITIONAL NOTE: It is important for the SPP/APR reviewers to remember that there are 49 LEAs - 48 are K-12 systems and one is the LEA for all of the developmental preschool regions in the state (14 regions who serve children with disabilities ages 3-5).

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

49

**General Supervision System**

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

The WDE’s General Supervision System utilizes each of the eight essential components set forth by OSEP and the National Center for Special Education Accountability Monitoring (NCSEAM): State Performance Plan, Policies, Procedures, and Effective Implementation, Integrated Monitoring Activities, Fiscal Management, Data on Processes and Results, Improvement Correction, Incentives, and Sanctions, Effective Dispute Resolution, and Technical Assistance and Professional Development. Data from each component are disaggregated and analyzed, and data-based decisions are made about the effectiveness of activities in relation to the improvement or decline in indicator and performance data.   
Wyoming’s General Supervision System includes the following components:  
Stable Assessment:   
All Wyoming LEA’s participate in the Stable Assessment component on an annual basis. The Stable Assessment includes a review conducted by LEA staff and several activities conducted by WDE monitoring teams. The self-assessment portion of the Stable Assessment includes a measure of procedural compliance with several key federal and state requirements and every LEA is expected to maintain 100% compliance with all of them.  
The Stable Assessment also includes focused reviews on the timeliness and accuracy of data reporting. The WDE tracks the timeliness of each LEA’s submissions. Timeliness is judged by considering submission dates for the self-assessment results, the certification date for the WDE 684, 457, and 459 data collections.   
The final component of the Stable Assessment is the annual Indicator 12 and 13 internal review. For Indicator 13 the WDE annually requests and reviews a sample of files for students of post-secondary transition-age. The WDE reviews these files according to the National Technical Assistance Center's Transition Checklist and if any non-compliance is found, the WDE responds in writing with specific guidance to assist the LEA in correcting the deficiencies and achieving compliance. LEAs must provide assurance of correction after taking the actions described in the Department’s letter, and send evidence documenting the fact that correction has taken place in the case of each student. Conversely, if the sample files are all in compliance with these requirements, the LEA special education director receives written notification that the files were found to be in full compliance. Following the initial transition file review, districts that failed to achieve 100% compliance during the first review must submit additional files for a second review. This secondary review includes several new student files as well as several files that were out of compliance during the initial review. Even though these districts have provided assurance of correction after the initial review, the WDE verifies that the specific violations have been corrected not only for the individual students in the initial sample but also for the whole population of transition-age students in the district. For Indicator 12, the Wyoming Department of Health, Behavioral Health Division (BHD- the LEA responsible for Part B ages 3-5) will be provided with the WISER IDs of all students who did not meet the compliance indicator. The 619 Coordinator will provide justifications for any students who did not meet the requirements. After review of justifications, any students not meeting the transition timeliness will be referred back to BHD to conduct training with regional staff as required. The training documentation will be submitted to the WDE. This is in keeping with OSEP guidance as described in the 09-02 Memo.   
Risk-Based Assessment   
Through a completion of a set of activities known as the Risk-Based Assessment (RBA), the WDE conducts additional monitoring activities in select LEAs based on LEA performance on select indicators: 3B, 5C, 9, 10, and 11. LEAs are required to participate in the RBA when the data falls outside of a defined range on any of the aforementioned indicators. In general, the RBA asks LEAs to explain the reasons behind lower-than expected performance on one or more of the aforementioned indicators. For example, for Indicator 3B, the LEA is asked to explain why certain students with disabilities in WY-TOPP test-taking grades reportedly did not participate in one or more assessment subtests. For Indicator 11, the LEA is asked to explain the circumstances behind its failure to meet the 60-day timeline for an initial evaluation. Depending on the LEA’s response, the WDE may ask for additional information or require the LEA to implement activities designed to prevent future poor performance. Any failure to meet the 60-day timeframe for an initial evaluation is considered a finding of non-compliance and LEAs are immediately notified as such. When a LEA’s performance on Indicators 9 and/or 10 results in an Alternate Risk Ratio of >3.00 or <0.25, the WDE requests the files of students who comprise the group(s) flagged for possible inappropriate identification. WDE monitoring team members then review the evaluation procedures used in each student’s case to determine if evaluations and eligibility determinations were made in accordance with IDEA requirements. LEAs who have found students eligible under incorrect evaluation procedures, or due to faulty eligibility determinations, are required to address the non-compliance immediately through a corrective action process.  
On-site Monitoring  
 Prior to an on-site monitoring visit, the WDE analyzes district-level data to determine areas of potential noncompliance that might account for substandard performance outcomes. Hypotheses are developed related to the identified areas of potential noncompliance, and become the framework for on-site monitoring activities. Focused indicators are selected and LEAs having the most negative impact on those indicators AND whose determination status is anything other than meets requirements, are eligible to be selected for on-site monitoring. LEAs are divided into four population size categories and the lowest performing LEA in each category is selected for monitoring during that SY. Representative samples of student files are selected purposefully, and files are reviewed using tools designed to ensure regulatory compliance specific to the hypothesized area. On-site monitoring consists of 1. Pre-monitoring consultation, 2. Special Education file reviews, 3. Reviews of policies and procedures, 4. Interviews with staff. 5. Student observations, 6. Review of service provider logs, 7. Exit interview to explain findings, and 8. Monitoring report. If there are findings of noncompliance, a report is written, detailing those findings. Some findings may be individualized, whereas others are found to be systemic. All systemic findings of noncompliance must be corrected within one year through a Corrective Action Plan (CAP). For individual student findings of noncompliance, we often give a 30 day correction period. A CAP is a set of activities the LEA and WDE agree to undertake in order to address systemic district practices which resulted in findings of noncompliance and ensure correction within one year. Any noncompliance which is not corrected within one year warrants a Compliance Agreement, which is more directive and provides more intensive and targeted support to the LEA.  
Determinations Process: In accordance with Federal regulation and Chapter 7 Rules, each spring the WDE collects and reports data on performance and compliance indicators. Based on these data sets, the WDE places each LEA into one of four determination categories: Meets Requirements, Needs Assistance, Needs Intervention, or Needs Substantial Intervention. There are differing levels of support and activities with each level.  
Dispute Resolution  
The WY system for resolving disputes include medication, state complaints, and due process, as outlined and required by the IDEA.

**Technical Assistance System**

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

The WDE annually conducts two types of data events which analyze the compliance and outcome areas that need the most attention and guidance from the State. The first is a one-day statewide data drill down. Internally, and with the addition of a few key stakeholders, the Special Education Programs Division holds a data retreat in which all Indicator data is disaggregated and areas of improvement and slippage are identified. The group looks for trends and sets high, medium, and low areas of need/focus.   
The second type of event is a regional data share out. This is a two week activity in which the state is divided into 7 geographical areas and LEAs from each area come to meet with the WDE for an in-depth look at their individual entity’s data. Each LEA has access to their data through various reports the WDE provides. Facilitators lead participants through the state’s Structured Activity Data Guidebook on several different topic areas: Identification, Eligibility, Placement, Services, and Student Outcomes (aggregated and also disaggregated by subgroups such as race/ethnicity, grade, disability category, etc.). Participants identify their agency’s successes and challenges and leave with an identified problem to focus on for the school year. The WDE keeps track of each LEA’s area of need/focus and looks for trends across the state.   
Through these two critical activities, along with keeping a database of technical assistance calls and emails the state received over the past year, WDE identifies broad improvement strategies which can be leveraged to affect change. Specific improvement activities are developed, revised or discontinued to address current needs. This framework not only allows the WDE to be responsive in supporting LEAs, but also provides the structure for the data-based analysis of the effectiveness of current activities.   
  
The improvement strategies WDE uses to support educational agencies in attaining procedural compliance and increasing outcomes for students with disabilities are designed to affect change in a variety of situations and through the application of a variety of strategies. When statewide areas of data-based concern arise, guidance documents are developed and disseminated to provide an ongoing resource to which educational agencies can refer. Statewide initiatives are implemented to support LEAs in making systemic changes to support the improvement of student outcomes and support the work of the State Systemic Improvement Plan (SSIP). These initiatives include web-based presentations and resources. Currently the State is supporting Multi-tiered System of Support (MTSS), Positive Behavioral Interventions and Support (PBIS), Preschool to Kindergarten Transition, and Data-Based Individualization (DBI) [a tier 3 intensive intervention structure] initiatives.   
Access to resources and web-based training is provided through the WDE's Wyoming Instructional Network website (WIN WEB). Also, monthly Zoom calls were held for all special education directors through a Director's Academy. The topics are chosen from specific areas of need identified through the annual data drill down activities and trends identified through state complaints.   
Other sources of data that inform the State’s technical assistance needs are based on annual LEA determinations and monitoring. In addition, information is gathered from the outreach consultants who support students with visual impairments and students who are deaf or hard of hearing, as they are in schools and classrooms on a weekly basis. They provide student level technical assistance to educational agencies in support of improved evaluations, IEP development/implementation, and instructional supports.

**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.**

As with all areas of the WY general supervision system, broad professional development improvement strategies are identified through a thorough analysis of special education data, both compliance and outcome data. Data drives and informs the content, structure, and audience for professional development activities. For the reporting period, professional development improvement strategies looked different than in years past due, in part, to the pandemic, but also for more efficient and effective use of our fiscal resources.   
Professional Development has two approaches; universal and targeted. The universal PD is content that is applicable to all of special education, regardless of the students the professional works with or their role in the special education system. This includes administrators, teachers, service providers, para-educators, parents and parent advocates, and those in other educational agencies.  
The targeted PD is designed to meet the specific needs of certain populations of educators or the students they work with. Examples of this would be teachers of the deaf, teachers of the visually impaired, orientation/mobility specialist, behavior specialists, teachers of students with emotional disabilities, etc. The content of this PD is specialized and intentional.   
UNIVERSAL PD: In previous years, the WDE Special Education Division conducted a yearly statewide in-person conference during the last full week of July; Week of Academic Vision for Excellence (WAVE). This conference included topics to help improve outcomes for students with disabilities, such as, but not limited to: Special Education law, Free and Appropriate Public Education (FAPE), Least Restrictive Environment (LRE), Individual Education Program (IEP), IEP goal writing, etc. In the 2019-2020 SY, the WDE restructured the format of the conference to offer high quality training delivered virtually by local and/or nationally esteemed presenters throughout the school year regarding all aspects of IDEA; Web-based Academic Vision for Excellence Symposium (WAVES). Sessions have been designed specific to Early Childhood (Pre-K to 2nd grade) and K-12 and offered approximately twice per month for each level. The presented sessions included: FAPE in Light of COVID 19, LRE Considerations During a Pandemic, Conducting Comprehensive Evaluations, Goal Writing Strategies, Early Childhood PLC, Postsecondary Transition, Trauma-Informed Care/ACES, Social Emotional Learning, Review and General Administration of the Woodcock Johnson, Eligibility Determination for Visual Impairment, and MTSS. Presenters have been sympathetic to the barriers of teaching virtually during a pandemic, as well as, teaching in a brick and mortar format. This virtual conference format has allowed the WDE to be more responsive to the needs of our state and has brought a decrease in statewide cost, an increase in attendance across all audiences, the flexibility for viewing sessions/materials at the participant’s convenience, and for using sessions as staff trainings within districts or child development centers. Archived session recordings and presentation materials can be found at: https://wyominginstructionalnetwork.com/additional-resources/waves/.  
TARGETED PD: There were professional development activities provided or sponsored by Vision Outreach Services section of the WDE in collaboration with the Wyoming Deaf-Blind Project through an OSEP funded grant. Professional development included training on the development of literacy skills for young children who are deaf and/or blind, the use of assistive technology to ensure access to educational materials, the needs of students with visual impairment, and the implications of the latest neurological research on cerebral visual impairments. In addition, a literacy initiative targeting the needs of students with significant intellectual disabilities was initiated. This multilayered professional development and technical assistance initiative, provided teachers from across the state with an intense two-day, onsite training. Throughout the school year, five web-based trainings were provided, each targeting a high-leverage literacy strategy. Coaching through video or onsite observation was offered to participants to ensure accurate implementation of those strategies.  
Also, targeted PD included a monthly Teacher of the Deaf forum on adapting technology for virtual instruction, assessments related to DHH students, comprehensive evaluations, accommodations, resources for effective communication (e.g. interpreters, captioning, developing new apps, using current apps), and basic discussions around challenges presented with virtual education for Deaf/Hard of Hearing (D/HH) students. For interpreters, WDE partnered with TAESE and TASK-12 to sponsor a mentorship program (IMET) for our educational interpreters to increase their skills and improve their EIPA scores. As a part of WDE D/HH Outreach work with the Early Hearing Detection and Intervention's task force, part 1 of 3 training was provided to EC's family service coordinators. Content focused on impacts of hearing loss in the early years and importance of effective early intervention. The final two trainings will be provided in the 2020-2021 SY. There was training for "Guide by Your Side" with the WY Families for Hands and Voices regarding IEPs and regulations specific to students with hearing loss.

**Stakeholder Involvement**

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

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

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

YES

**Reporting to the Public**

**How and where the State reported to the public on the FFY18 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State’s submission of its FFY 2018 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State’s SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2018 APR in 2020, is available.**

The Special Education Programs Division posts a current SPP online and notifies stakeholder groups of this posting. Copies of the SPP will also be provided to local education agencies, developmental preschool programs, and any individuals who request a copy.  
https://wyominginstructionalnetwork.com/spp-apr/  
  
In accordance with 20 U.S.C.1416(b)(C)(ii), the WDE will report annually to the public on the performance of each local educational agency and intermediate education unit on targets in the SPP. The WDE creates annual reports for each LEA. The reports are issued to each educational agency and posted on the WDE website:  
  
https://edu.wyoming.gov/for-district-leadership/special-programs/

## 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.

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

## Intro - OSEP Response

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

## Intro - Required Actions

OSEP notes that the State submitted verification that the attachment(s) complies with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508). However, one or more of the Indicator 17 attachments included in the State’s FFY 2019 SPP/APR submission are not in compliance with Section 508 and will not be posted on the U.S. Department of Education’s IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

# Indicator 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** |
| --- | --- |
| 2005 | 50.60% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 85.00% | 85.00% | 85.00% | 85.00% | 85.00% |
| Data | 61.81% | 59.08% | 64.50% | 61.08% | 62.71% |

**Targets**

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

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**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 | 938 |
| 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 | 64.71% |

**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 | 938 | 62.71% | 64.00% | 64.71% | Met Target | No Slippage |

**Graduation Conditions**

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

Extended ACGR

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

6

**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 requirements for earning a high school diploma from any school district in the State of Wyoming are as follows:  
 • The successful completion of four years of English; three years of mathematics; three years of science; three years of social studies. [W.S. §21-2-304(a) (iii)]   
• Satisfactorily passing an examination of the principles of the Constitution of the United States and the State of Wyoming. (W.S. §21-9-102)   
• Evidence of proficient performance, at a minimum, on the uniform student conduct and performance standards for the common core of knowledge and skills. [W.S. 21-2-304(a)(iii) and (iv)]   
  
Upon the completion of these requirements, a student receives a regular diploma with one of the following endorsements stated on the student’s transcript: Advanced Endorsement; Comprehensive Endorsement; or General Endorsement. Beginning with students graduating in 2006 and thereafter, each student must demonstrate proficient performance on five out of the nine content and performance standards for language arts, mathematics, science, social studies, health, physical education, foreign language, career/vocational education and fine and performing arts.

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

NO

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

## 1 - Prior FFY Required Actions

None

## 1 - OSEP Response

## 1 - Required Actions

# Indicator 2: Drop Out

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of youth with IEPs dropping out of high school. (20 U.S.C. 1416 (a)(3)(A))

**Data Source**

OPTION 1:

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

OPTION 2:

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

**Measurement**

OPTION 1:

States must report a percentage using the number of youth with IEPs (ages 14-21) who exited special education due to dropping out in the numerator and the number of all youth with IEPs who left high school (ages 14-21) in the denominator.

OPTION 2:

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

**Instructions**

Sampling is not allowed.

OPTION 1:

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

Do not include in the denominator the number of youths with IEPs who exited special education due to: (a) transferring to regular education; or (b) who moved, but are known to be continuing in an educational program.

OPTION 2:

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

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

Options 1 and 2:

Data for this indicator are “lag” data. Describe the results of the State’s examination of the data for the year before the reporting year (e.g., for the FFY 2019 SPP/APR, use data from 2018-2019), and compare the results to the target.

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

## 2 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 12.90% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target <= | 6.20% | 6.15% | 6.10% | 6.05% | 6.00% |
| Data | 5.56% | 5.39% | 5.44% | 6.21% | 6.16% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target <= | 6.10% |

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

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

Option 2

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85) | 05/27/2020 | Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a) | 393 |
| 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) | 40 |
| 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) | 10 |
| 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) | 236 |
| 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) | 5 |

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

NO

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

YES

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

YES

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

YES

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

WDE uses an event rate calculation for Indicator 2 Drop-out. This rate measures the number of students who dropped out over a 1-year interval. The numerator: Those students enrolled in grades 10-12 in Year 1, not enrolled in October of Year 2, and did not receive a diploma in Year 1. The denominator: Numerator plus all persons in grades 10-12 in Year 1, still enrolled in Year 2, or graduated in Year 1.

**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** |
| 210 | 3,503 | 6.16% | 6.10% | 5.99% | Met Target | No Slippage |

**Provide reasons for slippage, if applicable**

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

Students counted as not graduating in four years may have:   
1) Dropped out, been rumored to transfer (no written confirmation), or left for reasons unknown by the school   
2) Left school to participate in a non-high school diploma granting educational or trade program (including GED)   
3) Attended high school grades (9-12) for 4 full years without graduating (may still be seeking a diploma in 5 or 6 years)

**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)**

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

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Elementary | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Elementary | 98.80% | Actual | 99.05% | 99.34% | 99.35% | 99.25% | 99.28% |
| **B** | Middle | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **B** | Middle | 97.80% | Actual | 98.86% | 98.70% | 99.09% | 98.28% | 98.19% |
| **C** | HS | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **C** | HS | 95.50% | Actual | 89.42% | 94.67% | 93.28% | 97.04% | 97.48% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Elementary | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **A** | Elementary | 98.70% | Actual | 99.08% | 99.24% | 99.35% | 99.20% | 99.28% |
| **B** | Middle | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **B** | Middle | 97.90% | Actual | 98.81% | 98.70% | 97.92% | 98.08% | 98.19% |
| **C** | HS | 2005 | Target >= | 95.00% | 95.00% | 95.00% | 95.00% | 95.00% |
| **C** | HS | 95.20% | Actual | 89.55% | 94.67% | 93.28% | 97.04% | 98.06% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Elementary | 95.00% |
| Reading | B >= | Middle | 95.00% |
| Reading | C >= | HS | 95.00% |
| Math | A >= | Elementary | 95.00% |
| Math | B >= | Middle | 95.00% |
| Math | C >= | HS | 95.00% |

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**FFY 2019 Data Disaggregation from EDFacts**

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

NO

**Data Source:**

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

**Date:**

**Reading Assessment Participation Data by Grade**

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

**Data Source:**

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

**Date:**

**Math Assessment Participation Data by Grade**

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

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

| **Group** | **Group Name** | **Number of Children with IEPs** | **Number of Children with IEPs Participating** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Elementary |  |  | 99.28% | 95.00% |  | N/A | N/A |
| **B** | Middle |  |  | 98.19% | 95.00% |  | N/A | N/A |
| **C** | HS |  |  | 97.48% | 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** | Elementary |  |  | 99.28% | 95.00% |  | N/A | N/A |
| **B** | Middle |  |  | 98.19% | 95.00% |  | N/A | N/A |
| **C** | HS |  |  | 98.06% | 95.00% |  | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

https://edu.wyoming.gov/data/assessment-reports/

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

FFY19 - no data due to COVID-19. Wyoming assessment waiver submitted and approved by the USDOE.

## 3B - Prior FFY Required Actions

None

## 3B - OSEP Response

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

## 3B - Required Actions

# Indicator 3C: Proficiency for Students with IEPs

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

A. Indicator 3A – Reserved

B. Participation rate for children with IEPs

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

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

**Data Source**

3C. Same data as used for reporting to the Department under Title I of the ESEA, using EDFacts file specifications FS175 and 178.

**Measurement**

C. Proficiency rate percent = [(# of children with IEPs scoring at or above proficient against grade level and alternate academic achievement standards) divided by the (total # of children with IEPs who received a valid score and for whom a proficiency level was assigned)]. Calculate separately for reading and math. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

**Instructions**

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

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

Indicator 3C: Proficiency calculations in this SPP/APR must result in proficiency rates for reading/language arts and mathematics assessments (combining regular and alternate) for children with IEPs, in all grades assessed (3-8 and high school), including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year. Only include children with disabilities who had an IEP at the time of testing.

## 3C - Indicator Data

**Reporting Group Selection**

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

| **Group** | **Group Name** | **Grade 3** | **Grade 4** | **Grade 5** | **Grade 6** | **Grade 7** | **Grade 8** | **Grade 9** | **Grade 10** | **Grade 11** | **Grade 12** | **HS** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Elementary | X | X | X | X |  |  |  |  |  |  |  |
| **B** | Middle |  |  |  |  | X | X |  |  |  |  |  |
| **C** | HS |  |  |  |  |  |  | X | X |  |  |  |

**Historical Data: Reading**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Elementary | 2017 | Target >= | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| **A** | Elementary | 23.69% | Actual | 26.35% | 26.87% | 26.48% | 23.69% | 22.25% |
| **B** | Middle | 2017 | Target >= | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| **B** | Middle | 20.12% | Actual | 18.88% | 18.73% | 18.48% | 20.12% | 19.41% |
| **C** | HS | 2017 | Target >= | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| **C** | HS | 14.68% | Actual | 10.68% | 14.69% | 14.41% | 14.68% | 15.52% |

**Historical Data: Math**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group** | **Group Name** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| **A** | Elementary | 2017 | Target >= | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| **A** | Elementary | 22.87% | Actual | 24.37% | 26.35% | 25.58% | 22.87% | 22.77% |
| **B** | Middle | 2017 | Target >= | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| **B** | Middle | 14.96% | Actual | 14.80% | 15.26% | 15.91% | 14.96% | 17.09% |
| **C** | HS | 2017 | Target >= | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| **C** | HS | 11.82% | Actual | 10.95% | 15.00% | 10.66% | 11.82% | 9.99% |

**Targets**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Group** | **Group Name** | **2019** |
| Reading | A >= | Elementary | 24.00% |
| Reading | B >= | Middle | 20.41% |
| Reading | C >= | HS | 16.52% |
| Math | A >= | Elementary | 23.77% |
| Math | B >= | Middle | 18.09% |
| Math | C >= | HS | 11.99% |

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**FFY 2019 Data Disaggregation from EDFacts**

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

NO

**Data Source:**

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

**Date:**

**Reading Proficiency Data by Grade**

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

**Data Source:**

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

**Date:**

**Math Proficiency Data by Grade**

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

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

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Elementary |  |  | 22.25% | 24.00% |  | N/A | N/A |
| **B** | Middle |  |  | 19.41% | 20.41% |  | N/A | N/A |
| **C** | HS |  |  | 15.52% | 16.52% |  | N/A | N/A |

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

| **Group** | **Group Name** | **Children with IEPs who received a valid score and a proficiency was assigned** | **Number of Children with IEPs Proficient** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | Elementary |  |  | 22.77% | 23.77% |  | N/A | N/A |
| **B** | Middle |  |  | 17.09% | 18.09% |  | N/A | N/A |
| **C** | HS |  |  | 9.99% | 11.99% |  | N/A | N/A |

**Regulatory Information**

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

**Public Reporting Information**

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

https://edu.wyoming.gov/data/assessment-reports/

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

FFY19 - no data due to COVID-19. Wyoming assessment waiver submitted and approved by USDOE.

## 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**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**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.**

4

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **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 | 45 | 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))**

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

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

The WDE uses the “state bar” method for defining significant discrepancy. The FFY 2019 state rate (based on 2018-19 data) for suspending/expelling students with disabilities for more than ten days is 0.16%. The WDE is setting the state bar as five percentage points higher than the state rate. Thus, any district that suspends or expels 5.16% or more of its students with disabilities for more than ten days is flagged for significant discrepancy. There must be at least 25 students in the denominator and 3 students in the numerator of a suspension rate for it to be flagged, and all seven race and ethnicity reporting categories are included in this analysis.

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

Of the 49 LEAs in Wyoming, none were identified as having significant discrepancy in FFY 2019 for Indicator 4A. In the entire state of Wyoming, only 27 students with disabilities were suspended or expelled for greater than ten days in FFY 2019. Only 10 LEAs had a suspension rate greater than 0%, and none had a suspension rate greater than 5.16%. Four LEAs were excluded from the Indicator 4A analyses due to not having at least 25 students with disabilities enrolled at the district; however, three of the four districts had a 0% suspension rate and the other district suspended only one student.

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

**Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.**

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

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

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

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

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

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

## 4A - Prior FFY Required Actions

None

## 4A - OSEP Response

## 4A - Required Actions

# Indicator 4B: Suspension/Expulsion

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

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

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

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

**Data Source**

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

**Measurement**

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

Include State’s definition of “significant discrepancy.”

**Instructions**

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

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

## 4B - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**Targets**

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

**FFY 2019 SPP/APR Data**

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

YES

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

5

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts that have a significant discrepancy, by race or ethnicity** | **Number of those districts that have policies procedure, or practices that contribute to the significant discrepancy and do not comply with requirements** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 0 | 0 | 44 | 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 WDE uses the “state bar” method for defining significant discrepancy. The FFY 2019 state rate (based on 2018-19 data) for suspending/expelling students with disabilities for more than ten days is 0.16%. The WDE is setting the state bar as five percentage points higher than the state rate. Thus, any district that suspends or expels 5.16% or more of its students with disabilities for more than ten days is flagged for significant discrepancy. There must be at least 25 students in the denominator and 3 students in the numerator of a suspension rate for it to be flagged, and all seven race and ethnicity reporting categories are included in this analysis.

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

Of the 49 LEAs in Wyoming, none were identified as having significant discrepancy in FFY 2019 for Indicator 4B. In the entire state of Wyoming, only 27 students with disabilities were suspended or expelled for greater than ten days in FFY 2019. For each of Wyoming’s 49 LEAs, the WDE calculates a suspension and expulsion rate for each of the seven race and ethnicity reporting categories. (Note: many LEAs do not have members of every race and ethnicity reporting category enrolled in the LEA.) None were identified as having significant discrepancy in FFY 2019 for Indicator 4B. Only 10 LEAs had a suspension rate greater than 0%. Of these 10 LEAs, two were excluded for a given race/ethnicity rate because there were not at least 25 students in the denominator (for each of these two LEAs, only one student was suspended). This illustrates the very small numbers of students with disabilities for a particular racial/ethnic group in some Wyoming LEAs. Of the 49 LEAs, 44 had at least one ratio calculated for Indicator 4B that was based on at least 25 students.

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

**Provide a description of the review of policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.**

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

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

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

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

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

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

**Findings of Noncompliance Verified as Corrected**

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

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

## 4B - Prior FFY Required Actions

None

## 4B - OSEP Response

## 4B- Required Actions

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

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Education environments (children 6-21): Percent of children with IEPs aged 6 through 21 served:

A. Inside the regular class 80% or more of the day;

B. Inside the regular class less than 40% of the day; and

C. In separate schools, residential facilities, or homebound/hospital placements.

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

**Data Source**

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS002.

**Measurement**

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

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

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

**Instructions**

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

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

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

## 5 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2005 | Target >= | 62.09% | 62.34% | 62.59% | 62.84% | 63.09% |
| A | 54.30% | Data | 65.21% | 65.38% | 66.86% | 68.59% | 70.71% |
| B | 2005 | Target <= | 7.10% | 7.00% | 7.00% | 7.00% | 6.75% |
| B | 9.15% | Data | 6.66% | 6.49% | 6.10% | 6.23% | 5.77% |
| C | 2005 | Target <= | 1.34% | 1.34% | 1.34% | 1.34% | 1.33% |
| C | 2.63% | Data | 2.02% | 2.00% | 1.81% | 1.80% | 1.77% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 65.09% |
| Target B <= | 6.50% |
| Target C <= | 2.00% |

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**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 | 13,459 |
| 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 | 9,950 |
| 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 | 729 |
| 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 | 85 |
| 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 | 123 |
| 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 | 18 |

**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 | 9,950 | 13,459 | 70.71% | 65.09% | 73.93% | Met Target | N/A |
| B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day | 729 | 13,459 | 5.77% | 6.50% | 5.42% | 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] | 226 | 13,459 | 1.77% | 2.00% | 1.68% | Did Not Meet Target | N/A |

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

NO

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

Please note that the data above represents 5-year olds in kindergarten through 21 year-olds. In 2019-20, Wyoming transitioned to the new EDFacts reporting requirements for EDFacts file FS002.

## 5 - Prior FFY Required Actions

None

## 5 - OSEP Response

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

## 5 - Required Actions

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

# Indicator 6: Preschool Environments

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Preschool environments: Percent of children aged 3 through 5 with IEPs attending a:

A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and

B. Separate special education class, separate school or residential facility.

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

**Data Source**

Same data as used for reporting to the Department under section 618 of the IDEA, using the definitions in EDFacts file specification FS089.

**Measurement**

Percent = [(# of children aged 3 through 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children aged 3 through 5 with IEPs)] times 100.

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

**Instructions**

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

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

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

## 6 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2011 | Target >= | 61.73% | 61.98% | 62.23% | 62.48% | 62.73% |
| A | 59.84% | Data | 56.22% | 65.19% | 59.90% | 69.26% | 76.04% |
| B | 2011 | Target <= | 28.76% | 28.51% | 28.26% | 28.01% | 27.76% |
| B | 30.80% | Data | 33.89% | 25.25% | 30.85% | 23.95% | 18.25% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 67.50% |
| Target B <= | 22.50% |

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**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 | 2,399 |
| 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 | 1,741 |
| 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 | 212 |
| 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 | 281 |
| 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 | 1,741 | 2,399 | 76.04% | 67.50% | 72.57% | Met Target | N/A |
| B. Separate special education class, separate school or residential facility | 493 | 2,399 | 18.25% | 22.50% | 20.55% | Met Target | N/A |

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

NO

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

Please note that the data above represents 3 through 5-year olds in preschool. In 2019-20, Wyoming transitioned to the new EDFacts reporting requirements for EDFacts file FS089 which excludes 5-year-olds in kindergarten from this count.

## 6 - Prior FFY Required Actions

None

## 6 - OSEP Response

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

## 6 - Required Actions

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

# Indicator 7: Preschool Outcomes

**Instructions and Measurement**

**Monitoring Priority:** FAPE in the LRE

**Results indicator:** Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

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

**Data Source**

State selected data source.

**Measurement**

Outcomes:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.

b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.

d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

**Summary Statements for Each of the Three Outcomes:**

**Summary Statement 1**: Of those preschool children who entered the preschool program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.

**Measurement for Summary Statement 1:** Percent = [(# of preschool children reported in progress category (c) plus # of preschool children reported in category (d)) divided by (# of preschool children reported in progress category (a) plus # of preschool children reported in progress category (b) plus # of preschool children reported in progress category (c) plus # of preschool children reported in progress category (d))] times 100.

**Summary Statement 2:** The percent of preschool children who were functioning within age expectations in each Outcome by the time they turned 6 years of age or exited the program.

**Measurement for Summary Statement 2**: Percent = [(# of preschool children reported in progress category (d) plus # of preschool children reported in progress category (e)) divided by (the total # of preschool children reported in progress categories (a) + (b) + (c) + (d) + (e))] times 100.

**Instructions**

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

In the measurement include, in the numerator and denominator, only children who received special education and related services for at least six months during the age span of three through five years.

Describe the results of the calculations and compare the results to the targets. States will use the progress categories for each of the three Outcomes to calculate and report the two Summary Statements. States have provided targets for the two Summary Statements for the three Outcomes (six numbers for targets for each FFY).

Report progress data and calculate Summary Statements to compare against the six targets. Provide the actual numbers and percentages for the five reporting categories for each of the three outcomes.

In presenting results, provide the criteria for defining “comparable to same-aged peers.” If a State is using the Early Childhood Outcomes Center (ECO) Child Outcomes Summary (COS), then the criteria for defining “comparable to same-aged peers” has been defined as a child who has been assigned a score of 6 or 7 on the COS.

In addition, list the instruments and procedures used to gather data for this indicator, including if the State is using the ECO COS.

## 7 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Part** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A1 | 2008 | Target >= | 87.50% | 87.60% | 87.70% | 87.90% | 89.50% |
| A1 | 60.68% | Data | 91.23% | 90.76% | 88.33% | 87.79% | 78.78% |
| A2 | 2008 | Target >= | 57.13% | 57.33% | 57.53% | 57.53% | 59.13% |
| A2 | 56.87% | Data | 59.40% | 59.49% | 59.25% | 76.05% | 81.67% |
| B1 | 2008 | Target >= | 89.27% | 89.37% | 89.47% | 89.67% | 91.27% |
| B1 | 61.12% | Data | 92.06% | 92.57% | 84.71% | 70.34% | 59.25% |
| B2 | 2008 | Target >= | 53.72% | 53.82% | 53.92% | 54.12% | 55.72% |
| B2 | 54.77% | Data | 58.07% | 61.60% | 54.87% | 54.53% | 57.26% |
| C1 | 2008 | Target >= | 89.18% | 89.28% | 89.38% | 89.58% | 91.18% |
| C1 | 63.81% | Data | 92.77% | 91.56% | 86.30% | 78.50% | 61.25% |
| C2 | 2008 | Target >= | 68.55% | 68.65% | 68.75% | 68.95% | 70.55% |
| C2 | 67.05% | Data | 77.79% | 74.89% | 70.84% | 72.47% | 69.99% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A1 >= | 79.00% |
| Target A2 >= | 75.00% |
| Target B1 >= | 61.15% |
| Target B2 >= | 57.50% |
| Target C1 >= | 64.00% |
| Target C2 >= | 70.25% |

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**FFY 2019 SPP/APR Data**

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

239

**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 | 29 | 12.13% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 19 | 7.95% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 15 | 6.28% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 70 | 29.29% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 106 | 44.35% |

| **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)* | 85 | 133 | 78.78% | 79.00% | 63.91% | Did Not Meet Target | Slippage |
| A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 176 | 239 | 81.67% | 75.00% | 73.64% | Did Not Meet Target | Slippage |

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

| **Outcome B Progress Category** | **Number of Children** | **Percentage of Children** |
| --- | --- | --- |
| a. Preschool children who did not improve functioning | 67 | 28.03% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 27 | 11.30% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 12 | 5.02% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 72 | 30.13% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 61 | 25.52% |

| **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)* | 84 | 178 | 59.25% | 61.15% | 47.19% | Did Not Meet Target | Slippage |
| B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. *Calculation: (d+e)/(a+b+c+d+e)* | 133 | 239 | 57.26% | 57.50% | 55.65% | 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 | 41 | 17.15% |
| b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers | 33 | 13.81% |
| c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it | 8 | 3.35% |
| d. Preschool children who improved functioning to reach a level comparable to same-aged peers | 46 | 19.25% |
| e. Preschool children who maintained functioning at a level comparable to same-aged peers | 111 | 46.44% |

| **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)* | 54 | 128 | 61.25% | 64.00% | 42.19% | Did Not Meet Target | Slippage |
| C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.  *Calculation: (d+e)/(a+b+c+d+e)* | 157 | 239 | 69.99% | 70.25% | 65.69% | Did Not Meet Target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A1** | One potential reason for the slippage is the reduced number of children on which the rates are based is due to COVID. Only about 20% of the children who should have received exit scores did in fact receive exit scores due to the State of Wyoming closing down in mid-March. This prevented many of the Part B 619 service providers from administering the BDI to the exiting children. Note that the WDE and the regions have come up with a plan for completing exit scores if a closure of this magnitude happens again. This includes setting up a virtual meeting with students and parents to see if students could be assessed virtually, setting up on-site appointments with proper safety protocols for parents to bring students to the center for testing, and/or having teachers use the previous COS approach using data they have available to determine an exit score.  Other than COVID, to determine why there is slippage in A1, the WDE examined results by the 14 regions to determine if this slippage was present in all 14 regions or if it was particular to just certain regions. Data indicated that 8 of the 14 regions saw a decrease in their A1 score. The primary reason for the decrease is the change in methodology for collecting data for Indicator 7 (see below). In 2019-20, the vast majority of children were evaluated with the BDI at both entry and exit, unlike in previous years. Showing growth with the BDI z-scores is more difficult than with the previous process. The WDE analyzed the various types of BDI scores to determine how best to capture accurate growth information on exiting children. The BDI provides “Change Sensitive Scores” (CSS) whose purpose is to monitor progress and growth in children’s developmental milestones. Now that all regions are using the BDI Data Manager online scoring tool, starting in 2020-21, the WDE will be able to analyze Change Sensitive Scores over time. As a result of this, we will be able to obtain more accurate measures of children’s growth from entry and exit. We expect all Summary Statement 1 scores will increase dramatically in 2020-21. In addition, in 2020-21, the WDE will be setting appropriate targets for the Indicator 7 scores now that the BDI process is fully implemented.  At the state level, significance testing was done to determine which groups were least likely to show growth. The purpose of this was to determine if any changes in instructional practices needed to occur for certain groups of students. This analysis showed that students with a disability of speech language impairment were less likely to show growth than students with a disability of autism or other health impaired. Each region is provided with detailed reports of their Indicator 7 data which includes disaggregations of the scores by gender, race/ethnicity, disability, months in the program, etc. so that they can begin to determine which students improve/exit at age level and which do not. |
| **A2** | One potential reason for the slippage is the reduced number of children on which the rates are based is due to COVID. Only about 20% of the children who should have received exit scores did in fact receive exit scores due to the State of Wyoming closing down in mid-March. This prevented many of the Part B 619 service providers from administering the BDI to the exiting children. Note that the WDE and the regions have come up with a plan for completing exit scores if a closure of this magnitude happens again. This includes setting up a virtual meeting with students and parents to see if students could be assessed virtually, setting up on-site appointments with proper safety protocols for parents to bring students to the center for testing, and/or having teachers use the previous COS approach using data they have available to determine an exit score.  Other than COVID, to determine why there is slippage in A2, the WDE examined results by the 14 regions to determine if this slippage was present in all 14 regions or if it was particular to just certain regions. Data indicated that 6 of the 14 regions saw a decrease in their A2 score. The primary reason for the decrease is the change in methodology for collecting data for Indicator 7 (see below). In 2019-20, the vast majority of children were evaluated with the BDI at both entry and exit, unlike in previous years. Showing growth with the BDI z-scores is more difficult than with the previous process. The WDE analyzed the various types of BDI scores to determine how best to capture accurate growth information on exiting children. The BDI provides “Change Sensitive Scores” (CSS) whose purpose is to monitor progress and growth in children’s developmental milestones. Now that all regions are using the BDI Data Manager online scoring tool, starting in 2020-21, the WDE will be able to analyze Change Sensitive Scores over time. As a result of this, we will be able to obtain more accurate measures of children’s growth from entry and exit. We expect all Summary Statement 1 scores will increase dramatically in 2020-21. In addition, in 2020-21, the WDE will be setting appropriate targets for the Indicator 7 scores now that the BDI process is fully implemented.  At the state level, significance testing was done to determine which groups were least likely to score at age level. The purpose of this was to determine if any changes in instructional practices needed to occur for certain groups of students. This analysis showed no significance differences. Each region is provided with detailed reports of their Indicator 7 data which includes disaggregation of the scores by gender, race/ethnicity, disability, months in the program, etc. so that they can begin to determine which students improve/exit at age level and which do not. |
| **B1** | One potential reason for the slippage is the reduced number of children on which the rates are based is due to COVID. Only about 20% of the children who should have received exit scores did in fact receive exit scores due to the State of Wyoming closing down in mid-March. This prevented many of the Part B 619 service providers from administering the BDI to the exiting children. Note that the WDE and the regions have come up with a plan for completing exit scores if a closure of this magnitude happens again. This includes setting up a virtual meeting with students and parents to see if students could be assessed virtually, setting up on-site appointments with proper safety protocols for parents to bring students to the center for testing, and/or having teachers use the previous COS approach using data they have available to determine an exit score.  Other than COVID, to determine why there is slippage in B1, the WDE examined results by the 14 regions to determine if this slippage was present in all 14 regions or if it was particular to just certain regions. Data indicated that 10 of the 14 regions saw a decrease in their B1 score. The primary reason for the decrease is the change in methodology for collecting data for Indicator 7 (see below). In 2019-20, the vast majority of children were evaluated with the BDI at both entry and exit, unlike in previous years. Showing growth with the BDI z-scores is more difficult than with the previous process. The WDE analyzed the various types of BDI scores to determine how best to capture accurate growth information on exiting children. The BDI provides “Change Sensitive Scores” (CSS) whose purpose is to monitor progress and growth in children’s developmental milestones. Now that all regions are using the BDI Data Manager online scoring tool, starting in 2020-21, the WDE will be able to analyze Change Sensitive Scores over time. As a result of this, we will be able to obtain more accurate measures of children’s growth from entry and exit. We expect all Summary Statement 1 scores will increase dramatically in 2020-21. In addition, in 2020-21, the WDE will be setting appropriate targets for the Indicator 7 scores now that the BDI process is fully implemented.  At the state level, testing was done to determine which groups were least likely to show growth. The purpose of this was to determine if any changes in instructional practices needed to occur for certain groups of students. This analysis showed that students with a disability of speech language impairment were less likely to show growth than students with a disability of autism or other health impaired. Each region is provided with detailed reports of their Indicator 7 data which includes disaggregation of the scores by gender, race/ethnicity, disability, months in the program, etc. so that they can begin to determine which students improve/exit at age level and which do not. |
| **B2** | One potential reason for the slippage is the reduced number of children on which the rates are based is due to COVID. Only about 20% of the children who should have received exit scores did in fact receive exit scores due to the State of Wyoming closing down in mid-March. This prevented many of the Part B 619 service providers from administering the BDI to the exiting children. Note that the WDE and the regions have come up with a plan for completing exit scores if a closure of this magnitude happens again. This includes setting up a virtual meeting with students and parents to see if students could be assessed virtually, setting up on-site appointments with proper safety protocols for parents to bring students to the center for testing, and/or having teachers use the previous COS approach using data they have available to determine an exit score.  Other than COVID, to determine why there is slippage in B2, the WDE examined results by the 14 regions to determine if this slippage was present in all 14 regions or if it was particular to just certain regions. Data indicated that 6 of the 14 regions saw a decrease in their B2 score. The primary reason for the decrease is the change in methodology for collecting data for Indicator 7 (see below). In 2019-20, the vast majority of children were evaluated with the BDI at both entry and exit, unlike in previous years. Showing growth with the BDI z-scores is more difficult than with the previous process. The WDE analyzed the various types of BDI scores to determine how best to capture accurate growth information on exiting children. The BDI provides “Change Sensitive Scores” (CSS) whose purpose is to monitor progress and growth in children’s developmental milestones. Now that all regions are using the BDI Data Manager online scoring tool, starting in 2020-21, the WDE will be able to analyze Change Sensitive Scores over time. As a result of this, we will be able to obtain more accurate measures of children’s growth from entry and exit. We expect all Summary Statement 1 scores will increase dramatically in 2020-21. In addition, in 2020-21, the WDE will be setting appropriate targets for the Indicator 7 scores now that the BDI process is fully implemented.  At the state level, significance testing was done to determine which groups were least likely to score at age level. The purpose of this was to determine if any changes in instructional practices needed to occur for certain groups of students. This analysis showed that students in a separate classroom environment are less likely to score at age level than students in an environment with their peers. Each region is provided with detailed reports of their Indicator 7 data which includes disaggregation of the scores by gender, race/ethnicity, disability, months in the program, etc. so that they can begin to determine which students improve/exit at age level and which do not. |
| **C1** | One potential reason for the slippage is the reduced number of children on which the rates are based is due to COVID. Only about 20% of the children who should have received exit scores did in fact receive exit scores due to the State of Wyoming closing down in mid-March. This prevented many of the Part B 619 service providers from administering the BDI to the exiting children. Note that the WDE and the regions have come up with a plan for completing exit scores if a closure of this magnitude happens again. This includes setting up a virtual meeting with students and parents to see if students could be assessed virtually, setting up on-site appointments with proper safety protocols for parents to bring students to the center for testing, and/or having teachers use the previous COS approach using data they have available to determine an exit score.  Other than COVID, to determine why there is slippage in C1, the WDE examined results by the 14 regions to determine if this slippage was present in all 14 regions or if it was particular to just certain regions. Data indicated that 7 of the 14 regions saw a decrease in their C1 score. The primary reason for the decrease is the change in methodology for collecting data for Indicator 7 (see below). In 2019-20, the vast majority of children were evaluated with the BDI at both entry and exit, unlike in previous years. Showing growth with the BDI z-scores is more difficult than with the previous process. The WDE analyzed the various types of BDI scores to determine how best to capture accurate growth information on exiting children. The BDI provides “Change Sensitive Scores” (CSS) whose purpose is to monitor progress and growth in children’s developmental milestones. Now that all regions are using the BDI Data Manager online scoring tool, starting in 2020-21, the WDE will be able to analyze Change Sensitive Scores over time. As a result of this, we will be able to obtain more accurate measures of children’s growth from entry and exit. We expect all Summary Statement 1 scores will increase dramatically in 2020-21. In addition, in 2020-21, the WDE will be setting appropriate targets for the Indicator 7 scores now that the BDI process is fully implemented.  At the state level, significance testing was done to determine which groups were least likely to show growth. The purpose of this was to determine if any changes in instructional practices needed to occur for certain groups of students. This analysis showed no significance differences. Each region is provided with detailed reports of their Indicator 7 data which includes disaggregation of the scores by gender, race/ethnicity, disability, months in the program, etc. so that they can begin to determine which students improve/exit at age level and which do not. |
| **C2** | One potential reason for the slippage is the reduced number of children on which the rates are based is due to COVID. Only about 20% of the children who should have received exit scores did in fact receive exit scores due to the State of Wyoming closing down in mid-March. This prevented many of the Part B 619 service providers from administering the BDI to the exiting children. Note that the WDE and the regions have come up with a plan for completing exit scores if a closure of this magnitude happens again. This includes setting up a virtual meeting with students and parents to see if students could be assessed virtually, setting up on-site appointments with proper safety protocols for parents to bring students to the center for testing, and/or having teachers use the previous COS approach using data they have available to determine an exit score.  Other than COVID, to determine why there is slippage in C2, the WDE examined results by the 14 regions to determine if this slippage was present in all 14 regions or if it was particular to just certain regions. Data indicated that 6 of the 14 regions saw a decrease in their C2 score. The primary reason for the decrease is the change in methodology for collecting data for Indicator 7 (see below). In 2019-20, the vast majority of children were evaluated with the BDI at both entry and exit, unlike in previous years. Showing growth with the BDI z-scores is more difficult than with the previous process. The WDE analyzed the various types of BDI scores to determine how best to capture accurate growth information on exiting children. The BDI provides “Change Sensitive Scores” (CSS) whose purpose is to monitor progress and growth in children’s developmental milestones. Now that all regions are using the BDI Data Manager online scoring tool, starting in 2020-21, the WDE will be able to analyze Change Sensitive Scores over time. As a result of this, we will be able to obtain more accurate measures of children’s growth from entry and exit. We expect all Summary Statement 1 scores will increase dramatically in 2020-21. In addition, in 2020-21, the WDE will be setting appropriate targets for the Indicator 7 scores now that the BDI process is fully implemented.  At the state level, significance testing was done to determine which groups were least likely to score at age level. The purpose of this was to determine if any changes in instructional practices needed to occur for certain groups of students. This analysis showed that students with a disability of speech language impairment were less likely to score at age level than students with a disability of autism or other health impaired. Each region is provided with detailed reports of their Indicator 7 data which includes disaggregation of the scores by gender, race/ethnicity, disability, months in the program, etc. so that they can begin to determine which students improve/exit at age level and which do not. |

**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.**

In 2018-19, all preschool regions had transitioned to the new process for gathering data on the three outcomes areas. This new process is use of the Battelle Developmental Inventory. The scoring process entails converting the z-score on a given domain area to the 7-point Child Outcome Rating scale. Exit scores on the 7-point rating scale are then compared to entry scores on the 7-point rating scale to determine which of the five OSEP progress categories (a, b, c, d, or e) in which a given student falls, using the same calculation method as that used for the ECO Child Outcomes Summary process.  
  
Note that there are still some students who, upon entry, used the previous process for gathering data on the three outcomes areas. Under the previous process, the regions could use one or more of the following assessments to collect data:  
  
Battelle Developmental Inventory Brigance Inventory of Early Development  
Creative Curriculum Developmental Continuum for Ages 3-5 or, Other tools approved by the EIEP.  
  
With the previous process, the IEP team would also review other sources of information, including the Multidisciplinary Team Evaluation, the IEP objectives and outcomes, child observations and parent input in order to complete the Early Childhood Outcomes (ECO) Center Child Outcomes Summary Form (COSF) for each child.  
  
Starting in 2016-17, the new process, based solely on the BDI was implemented with a select group of regions. The purpose of the new process is to standardize the process for collecting information and to ensure the data are reliable and valid. As of 2018-19, all regions were using the BDI-based process. The 2020-21 year will represent the first year in which virtually all students will have an entry and exit score that is based on the BDI-process.

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

As mentioned in the areas of slippage above, COVID did impact Indicator 7. Only about 20% of the children who should have received exit scores did in fact receive exit scores due to the State of Wyoming closing down in mid-March. This prevented many of the Part B 619 service providers from administering the BDI to the exiting children. Note that the WDE and the regions have come up with a plan for completing exit scores if a closure of this magnitude happens again. This includes setting up a virtual meeting with students and parents to see if students could be assessed virtually, setting up on-site appointments with proper safety protocols for parents to bring students to the center for testing, and/or having teachers use the previous COS approach using data they have available to determine an exit score.

## 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, "[o]nly about 20% of the children who should have received exit scores did in fact receive exit scores due to the State of Wyoming closing down in mid-March. This prevented many of the Part B 619 service providers from administering the BDI to the exiting children."

## 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**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 51.28% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= | 74.89% | 75.14% | 75.39% | 75.64% | 75.89% |
| Data | 75.47% | 80.22% | 78.56% | 82.11% | 83.40% |

**Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target >= | 78.50% |

**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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 2,417 | | 2,829 | 83.40% | 78.50% | 85.44% | Met Target | No Slippage |

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

6,390

**Percentage of respondent parents**

44.27%

**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.**

A representative sample of preschool children and K-12 students is chosen from each preschool region and school district in the state for the Indicator 8 parent survey. Results are weighted according to district/region population size so that the overall state parent involvement percentage is an accurate reflection of the experiences of parents of students with disabilities age 3 to 21. Parents of students at all grade/age levels respond to the survey.

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

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

The sampling plan the WDE uses was approved by OSEP in 2008. Sampling is done at the district level. A sample of students with disabilities was randomly selected from each of the 49 LEAs. The number of students chosen was dependent upon the number of total students with disabilities at a district and each of the 14 preschool regions with the EIEP as indicated in the table below. The sample sizes selected ensured roughly similar margins of error across the different district sizes.   
  
Number of Students with Disabilities : Sample Size Chosen   
1-70 All   
71-100 70   
101-150 80   
151-200 90   
201-1000 100   
1000+ 125   
  
For those districts/regions for which a sample was chosen, the population was stratified by gender, race/ethnicity, primary disability, and grade level to ensure representativeness of the resulting sample. When calculating the state-level results, responses were weighted by the students with disability population size (e.g., a district/region that has four times the number of students with disabilities as another district will receive four times the weight in computing overall state results). Because the sampling plan is based on a representative sample from each and every district and preschool region, and because the proper weighting is done in the analysis, the WDE is assured that the indicator 8 results are valid and reliable.  
  
In addition to the sampling plan, WDE allowed districts to distribute the survey to additional parents of students with disabilities as a way to increase the total number of parent respondents. WDE analyzed the data by methodology (WDE-administered vs. District-administered) and noted no significant differences in the two when the proper weighting is applied. Thus, WDE is assured that the indicator 8 results are valid and reliable.

| **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 representativeness of the responses was examined by using statistical significance testing to determine if a particular group was over-represented or under-represented in the response rate.  
  
The representativeness of the survey was assessed by examining the demographic characteristics of the children of the parents who responded to the survey to the demographic characteristics of all special education students. Response rates by the demographic characteristics of grade level, race/ethnicity, primary disability, and geographic region were analyzed to determine if one group was more likely to respond than another group. This comparison indicates the results are generally representative (1) by geographic region where the child attends school; (2) by the grade level of the child; and (3) by the primary disability of the child. For example, 26% of the PreK-12 parents who returned a survey indicated that their children’s primary disability is Specific Learning Disability, and 24% of PreK-12 students with disabilities in the sample have a Specific Learning Disability.   
  
However, results showed that parents of white students were more likely to respond than parents of Native American students. 79% of parent respondents indicated that their student is white, and 74% of students with disabilities in the sample are white whereas 4% of parent respondents indicated that their student is Native American, and 8% of students with disabilities in the sample are Native American.   
  
Although the data indicated that parents of Native American students were slightly less likely to respond than parents of white students, the data indicated no significant differences in the parent involvement percentage by race/ethnicity, so we are confident that the results are representative. Further, statewide results were weighted by district/preschool region to ensure that the parent survey results reflected the population of parents and thus, were in fact, representative of the state. Further, the WDE are pleased with the extent to which the number of parents of Native American students are responding to the survey. Two years ago only 30 parents of Native American students responded to the survey; this year, 112. This is in large part due to the effort of three districts with a large percentage of Native American students encouraging their parents to complete the survey.   
  
WDE does not think COVID had an impact on the response rate given that the same process (mail and email, along with district in-person administration) was used as before. The response rate in 2019-20 is very high for this type of survey. WDE also has no reason to suspect that the COVID had an impact on the positivity of the survey responses. The parent involvement percentage and individual item responses slightly increased from 2018-19 to 2019-20, but WDE has no reason to believe that was a function of COVID.   
  
As mentioned previously, in 2019-20, WDE allowed districts to distribute the survey to additional parents of students with disabilities as a way to increase the total number of parent respondents. Districts were allowed to use different methods of administration (e.g., in-person, text blasts, email blasts). The sampling plan is still followed for each district; these surveys are over-and-above the WDE sample. The WDE weights all results appropriately.   
  
Some action items for the WDE:  
- The WDE will follow-up with districts to see if there are particularly effective communication and dissemination strategies they are using for their parents.  
- The WDE will ask districts for actions that WDE and/or districts could take to increase the response rate of parents of all students with disabilities.  
- The WDE will continue to offer different ways for districts/regions to obtain parent responses so that the response rate of students of all race/ethnicities continues to increase.   
- The WDE will continue to provide detailed reports of their survey results to districts and regions along with a set of guiding questions to use to interpret their data and make action plans.

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

## 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** |
| --- | --- |
| 2005 | 0.00% |

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

**Targets**

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

**FFY 2019 SPP/APR Data**

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

YES

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

0

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial and ethnic groups in special education and related services** | **Number of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 0 | 0 | 48 | 0.00% | 0% | 0.00% | Met Target | No Slippage |

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

YES

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

The WDE collects the data used for Indicator 9 through the October 1 snapshot data collection. All races and ethnicities are included in the review of Indicator 9. The WDE calculates an Alternate Risk Ratio for each school district in the state, based on the identification rate of each racial/ethnic group in each district. The WDE uses the Alternate Risk Ratio (as defined by OSEP and WESTAT) for determining disproportionate representation because it is most relevant and meaningful for Wyoming’s small, rural population.  
  
Risk ratios are difficult to interpret when they are based on small numbers of students (either in the racial/ethnic group or the comparison group). When risk ratios are based on small numbers, minor variations in the number of students in either the racial/ethnic group or the comparison group can produce dramatic changes in the size of the risk ratio. Thus, an Alternate Risk Ratio was determined only if there were ten or more students in the group of interest (based on child count data).  
  
The WDE defines disproportionate representation as an Alternate Risk Ratio of 3.00 or above. Once a ratio is flagged for disproportionate representation, WDE staff members review the LEA’s evaluation policies and procedures in addition to applicable student evaluation records to determine if the disproportionate representation is due to inappropriate identification.  
  
For Indicator 9, all 48 public K-12 school districts are included in the analyses. Of these 48 LEAs, 48 met the minimum n requirements at least one time for a Final Risk Ratio to be calculated (for each LEA, in theory, seven risk ratios could be calculated–one for each racial/ethnic group). Please note that many LEAs in Wyoming have fewer than five students with a disability of a particular race/ethnicity. Thus, very small numbers prevent the State from calculating reliable and meaningful risk ratios for every racial/ethnic group in every LEA.   
  
Please note that Wyoming has 48 K-12 districts, and 1 preschool district. The preschool district serves children age 3 to 5; as such Indicators 9 and 10 are irrelevant to this preschool district. Thus, the correct denominator is 48 and the correct number of exclusions for not meeting the minimum n size is 0. (The preschool district wasn’t excluded because it didn’t meet the minimum n – it was excluded because it doesn’t serve children age 6 and up.)

**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.**

For Indicator 9, the WDE conducts its review of district data through the desk audit portion of Wyoming’s Results Driven Accountability Monitoring System. All districts that have been flagged are required to provide the WDE with district policies and procedures concerning their identification practices. The WDE then conducts a file review to gather additional data on how the district’s practices regarding the appropriate evaluation and identification of students with disabilities has affected actual students in the over-represented group.

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

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

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

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

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

## 9 - Prior FFY Required Actions

None

## 9 - OSEP Response

## 9 - Required Actions

# Indicator 10: Disproportionate Representation in Specific Disability Categories

**Instructions and Measurement**

**Monitoring Priority:** Disproportionality

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

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

**Data Source**

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

**Measurement**

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

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

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

**Instructions**

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

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

## 10 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

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

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

**Targets**

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

**FFY 2019 SPP/APR Data**

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

YES

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

4

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories** | **Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification** | **Number of Districts that met the State's minimum n-size** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| 2 | 0 | 44 | 0.00% | 0% | 0.00% | Met Target | No Slippage |

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

YES

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

The WDE collects the data used for Indicator 10 through the October 1 snapshot data collection. All races and ethnicities are included in the review of Indicator 10. The WDE calculates an Alternate Risk Ratio for each school district in the state, based on the identification rate of each racial/ethnic group in each district. The WDE uses the Alternate Risk Ratio (as defined by OSEP/WESTAT) for determining disproportionate representation because it is most relevant and meaningful for Wyoming’s small, rural population.   
  
Risk ratios are difficult to interpret when they are based on small numbers of students (either in the racial/ethnic group or the comparison group). When risk ratios are based on small numbers, minor variations in the number of students in either the racial/ethnic group or the comparison group can produce dramatic changes in the size of the risk ratio. Thus, an Alternate Risk Ratio was determined only if there were ten or more students in the group of interest (based on child count data).   
  
The WDE defines disproportionate representation as an Alternate Risk Ratio of 3.00 or above. Once a ratio is flagged for disproportionate representation, WDE staff members review the LEA’s evaluation policies and procedures in addition to applicable student evaluation records to determine if the disproportionate representation is due to inappropriate identification.   
  
For Indicator 10, all of Wyoming’s 48 K-12 public school districts are included in the analyses. Of these 48 LEAs, 44 met the minimum n requirements at least one time for a Final Risk Ratio to be calculated (for each LEA, in theory, 42 risk ratios could be calculated–one for each racial/ethnic group times the six primary disability categories). Please note that many LEAs in Wyoming have fewer than five students with a disability of a particular race/ethnicity; when this is disaggregated further by type of primary disability, the numbers get extremely small. Thus, very small numbers prevent the State from calculating reliable and meaningful risk ratios for every racial/ethnic group by disability in every LEA.  
  
Please note that Wyoming has 48 K-12 districts, and 1 preschool district. The preschool district serves children age 3 to 5; as such Indicators 9 and 10 are irrelevant to this preschool district. Thus, the correct denominator is 48 and the correct number of exclusions for not meeting the minimum n size is 0. (The preschool district wasn’t excluded because it didn’t meet the minimum n – it was excluded because it doesn’t serve children age 6 and up.)

**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.**

For Indicator 10, the WDE conducts its review of district data through the desk audit portion of Wyoming’s Results Driven Accountability Focused Monitoring System. All districts that have been flagged are required to provide the WDE with district policies and procedures concerning their identification practices. The WDE then conducts a file review to gather additional data on how the district’s practices regarding the appropriate evaluation and identification of students with disabilities has affected actual students in the over-represented group.

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

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

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

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

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

## 10 - Prior FFY Required Actions

None

## 10 - OSEP Response

## 10 - Required Actions

# Indicator 11: Child Find

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

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

## 11 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 95.00% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 98.57% | 98.68% | 98.34% | 98.55% | 98.43% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 3,119 | 3,100 | 98.43% | 100% | 99.39% | Did Not Meet Target | No Slippage |

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

19

**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.**

Of the 3,119 initial evaluations under Part B conducted during FFY 2019, there were 19 that did not meet the 60-day timeline requirement. Of these 19, 9 were from the State's 48 public school districts, and 10 were from the State's developmental preschools. The range in days beyond the 60-day timeline was 1 to 100 days. Reasons for the delays in evaluations: parental cancellations of meetings, difficulty contacting parents, and incorrect calculation of 60-day timeline. Further technical assistance will be provided to LEAs to assist with compliance in this area.

**Indicate the evaluation timeline used:**

The State used the 60 day timeframe within which the evaluation must be conducted

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

State database that includes data for the entire reporting year

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

These data are collected on the end-of-year child count file (WDE-684C).

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

There were students for whom the evaluations exceeded the 60 day timeline due to statewide school/agency closures because of COVID-19. With the allowable exception under the IDEA of the parent(s) not making the student/child available, the State feels this exception applies to the unique circumstances in the pandemic of school/agency closures which prevented the parents from making the child available. For those incidences, and when there was clear documentation of communication through the use of Prior Written Notices and other means, where the school/agency and parents were in agreement, the State did not make a finding of noncompliance. Outside of COVID-19 circumstances, the State improved the Indicator 11 data by nearly 1%.

**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** |
| --- | --- | --- | --- |
| 64 | 64 |  | 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***

Regarding the 64 initial evaluations that were not completed within 60 days, the WDE requires specific corrective action from any LEA exhibiting a rate below 100% compliance with the 60-day requirement. First, the Department contacts each LEA with the student identification numbers of students whose initial evaluations were reportedly completed after 60 days from the LEA’s receipt of consent. In each instance the LEA is required to provide an explanation for the delay. The only acceptable reasons are those found in 34 C.F.R. §300.301(c)(1). After removing those with acceptable reasons, the WDE issues a letter containing findings for each of the students in whose case initial evaluations took longer than 60 days. LEAs are required to provide evidence that the student’s evaluation was completed, although late, unless the student is no longer within the jurisdiction of the LEA. In addition, the WDE also required an assurance that the district’s policies and procedures concerning initial evaluations have been reviewed with district staff members during the 2019-20 school year. Then, in order to ensure systemic correction for all students, the WDE reviews a sample of initial evaluations conducted during the current fiscal year to evidence 100% compliance for students other than those whose initial evaluations were completed late during the previous fiscal year. In this way, the Department ensures that its identification and correction processes meet the requirements of the OSEP 09-02 Memo.  
  
Depending upon the content of their CAP/compliance agreement, districts were provided with specially designed, on-site TA from WDE staff. Staffing levels are reviewed through various fiscal reports to identify potential personnel shortages that may be affecting an LEA’s ability to complete initial evaluations in a timely manner.  
  
Districts found out of compliance on the self-assessment are provided TA, if needed.

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

For the 64 individual students for whom noncompliance was found, the State followed up to ensure that each evaluation was completed and eligibility determined. For each responsible school/agency, the State reviewed the policies and procedures for comprehensive evaluations and received an assurance to comply with the regulation's timeline. In addition, the State conducted a follow up activity of reviewing new evaluations conducted by those agencies to ensure the 60 day timeline was adhered to. This was completed within one year and is consistent with the OSEP Memorandum 09-02.

**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

## 11 - Required Actions

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

# Indicator 12: Early Childhood Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

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

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

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

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

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

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

**Instructions**

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

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

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

Targets must be 100%.

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

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

## 12 - Indicator Data

**Not Applicable**

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

NO

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2005 | 68.29% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 100.00% | 91.64% | 88.47% | 94.38% | 92.06% |

**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. | 571 |
| b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday. | 37 |
| c. Number of those found eligible who have an IEP developed and implemented by their third birthdays. | 342 |
| 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. | 8 |
| e. Number of children who were referred to Part C less than 90 days before their third birthdays. | 177 |
| 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. | 342 | 349 | 92.06% | 100% | 97.99% | Did Not Meet Target | No Slippage |

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

7

**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.**

There are 7 children for whom their Part B eligibility was not determined by their third birthday. The days after their third birthday ranged from 5 days to 120. Six of the children had delays of 30 days or less. Reasons for the delays included parent not available and data errors.

**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.**

These data are collected on the end-of-year child count file.

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

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

| **Findings of Noncompliance Identified** | **Findings of Noncompliance Verified as Corrected Within One Year** | **Findings of Noncompliance Subsequently Corrected** | **Findings Not Yet Verified as Corrected** |
| --- | --- | --- | --- |
| 32 | 32 |  | 0 |

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

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

All noncompliance for the FFY2018 (the 32 evaluations) were timely corrected within the one-year time-frame. Each region with noncompliance in FFY2018 was (1) timely corrected within the one-year time-frame of notification and (2) is currently implementing the regulatory requirements of this indicator based on a review of updated data consistent with OSEP Memorandum 09-02. In conducting its verification process, the WDE determined that the LEA (BHD) is correctly implementing the specific regulatory requirement—in this case 34 C.F.R. §300.124(b). This was achieved by reviewing new documentation on a sample of children records not previously reviewed from the LEA’s online special education database showing that IEPs were developed and implemented by the child’s third birthday (for those referred by Part C and found eligible for Part B).

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

Regarding the 32 initial evaluations that were not completed on time, the WDE requires specific corrective action from any preschool region exhibiting a rate below 100% compliance. First, the Department contacts each preschool region with the identification numbers of children whose IEP was not developed and implemented by their third birthday. In each instance, the region is required to provide an explanation for the delay. The BHD issues a letter containing findings for each of the children whose transition from Part C to Part B was late. Regions are required to provide evidence that the child’s evaluation was completed, although late, unless the student is no longer within the jurisdiction of the BHD. In addition, the WDE also required an assurance that the region’s policies and procedures concerning Part C to Part B transitions have been reviewed with region staff members during the 2019-20 school 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

## 12 - Required Actions

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

# Indicator 13: Secondary Transition

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

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

**Instructions**

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

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

Targets must be 100%.

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

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

## 13 - Indicator Data

**Historical Data**

| **Baseline Year** | **Baseline Data** |
| --- | --- |
| 2009 | 54.58% |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target | 100% | 100% | 100% | 100% | 100% |
| Data | 94.32% | 87.29% | 93.67% | 98.50% | 99.24% |

**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** |
| --- | --- | --- | --- | --- | --- | --- |
| 374 | 384 | 99.24% | 100% | 97.40% | Did Not Meet Target | Slippage |

**Provide reasons for slippage, if applicable**

There were a total of 10 files found out of compliance. This is up from 3 files out of compliance in FFY18. There was a change in expectations in FFY19 during the Indicator 13 file review process in the area of COURSE OF STUDY. In previous years' reviews, the WDE reviewed the COURSE OF STUDY section of the IEP to see that it was completed. Through the work of our internal transition team, it was determined that simply checking for completion was not a meaningful way to check for quality transition planning. The WDE revised its guidance on the COURSE OF STUDY to LEAs and notified them that the WDE would now be looking for a connection between the COURSE OF STUDY and the transition goal to ensure alignment. For example, if the goal was to attend college to become a nurse, the WDE would be looking for Health Sciences and Math in the COURSE OF STUDY; courses that would lead to college admissions. It is the WDE's perspective that standard- based classes and work experience would be appropriate when a student is college bound. A COURSE OF STUDY filled with electives and modified curriculum delivered in a resource room may not be in alignment with a well thought-out and planned transition goal.   
This year's data was the first group of files where the higher standard was applied. While this resulted in 7 more files of non-compliance than was found last year, the WDE believes that this practice will facilitate IEP teams to more meaningfully engage in transition planning that will lead to better post-school outcomes.

**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.**

To collect data for this indicator, the WDE selects a stratified, representative sample of student files from each district in the state; between 2-10 files are reviewed for each district. An internal General Supervision/Monitoring team reviews each of the files using the NSTTAC Indicator 13 Checklist Form A. A file that meets all of the applicable checklist criteria is deemed as meeting Indicator 13. Findings of non-compliance are reviewed with LEAs who are then required to resolve areas of non-compliance and resubmit files to include all corrections. Additional files are requested in round two to ensure compliance specific to Indicator 13. Further technical assistance and resource tools are provided to those districts identified as having needs in this area. Formal letters are distributed to all LEA's who meet compliance specific to this indicator.

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

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

The State does not believe that COVID-19 had an impact on completeness, reliability, or validity of the data. There was uninterrupted access to student's IEP files for the I-13 review. What we expect to see in the coming year that the implementation of the transition services written in the IEP was where the interruption occurred. That would not, however, be a compliance issue in itself. It will be the LEA's response to the interruption that will be what the State will have to investigate in the upcoming year.

**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** |
| --- | --- | --- | --- |
| 3 | 3 |  | 0 |

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

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

In conducting its verification process, the WDE determined that each of the two LEAs that had noncompliance identified are correctly implementing the specific regulatory requirements—in this case 34 C.F.R §§300.320(b) and 300.321(b). This was achieved by requesting IEP files and meeting notices for a sample of students whose records were not reviewed during the initial transition review of December 2019. The WDE’s review of these students’ documentation during the spring of 2020 demonstrated that 100% of the files reviewed were compliant and the LEAs in question were following proper IEP transition practices.

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

As reported in the State’s FFY 2018 APR under Indicator 13, the WDE made findings of noncompliance for 3 students across 2 LEAs in this area during that fiscal year. In conducting its verification process, the WDE determined that each of the 2 LEAs had corrected the child-specific noncompliance by reconvening the IEP team(s) or amending the program(s) to correct the deficiencies identified in the WDE’s response letters of early 2020. The two LEAs in question were required to submit Prior Written Notice forms and revised IEPs detailing the corrections made on each student’s behalf. For each of the 3 student files found noncompliant, 100% (all 3) of those files were corrected and made compliant within 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** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## 13 - Prior FFY Required Actions

None

## 13 - OSEP Response

## 13 - Required Actions

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

# Indicator 14: Post-School Outcomes

**Instructions and Measurement**

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

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

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

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

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

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

**Data Source**

State selected data source.

**Measurement**

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

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

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

**Instructions**

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

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

**I. *Definitions***

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

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

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

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

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

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

**II. *Data Reporting***

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

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

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

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

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

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

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

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

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

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

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

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

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

## 14 - Indicator Data

**Historical Data**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure** | **Baseline** | **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| A | 2013 | Target >= | 26.43% | 26.68% | 26.93% | 27.18% | 27.43% |
| A | 26.18% | Data | 28.44% | 29.55% | 26.43% | 22.47% | 25.22% |
| B | 2013 | Target >= | 58.37% | 58.62% | 58.87% | 59.12% | 59.37% |
| B | 58.12% | Data | 63.03% | 55.40% | 57.29% | 58.10% | 65.40% |
| C | 2013 | Target >= | 73.27% | 73.77% | 74.27% | 74.77% | 75.75% |
| C | 72.77% | Data | 80.57% | 71.31% | 71.25% | 74.09% | 79.02% |

**FFY 2019 Targets**

|  |  |
| --- | --- |
| **FFY** | **2019** |
| Target A >= | 27.00% |
| Target B >= | 60.00% |
| Target C >= | 76.00% |

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**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 | 444 |
| 1. Number of respondent youth who enrolled in higher education within one year of leaving high school | 94 |
| 2. Number of respondent youth who competitively employed within one year of leaving high school | 180 |
| 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) | 29 |
| 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). | 33 |

| **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) | 94 | 444 | 25.22% | 27.00% | 21.17% | Did Not Meet Target | Slippage |
| B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2) | 274 | 444 | 65.40% | 60.00% | 61.71% | Met Target | No Slippage |
| C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4) | 336 | 444 | 79.02% | 76.00% | 75.68% | Did Not Meet Target | Slippage |

| **Part** | **Reasons for slippage, if applicable** |
| --- | --- |
| **A** | The WDE has examined the Indicator 14A rate by district to identify those districts that had a decrease from 2018-19 to 2019-20. Ten districts saw a decrease in their 14A rate; but only three districts with at least 9 respondents saw a decrease. In October 2020, the WDE did six regional data drill-downs across the state whereby districts were provided with disaggregated reports of their Indicator 14 data by gender, race/ethnicity, disability, and exit code so that the districts could identify areas of potential improvements in their data. Districts were also provided with disaggregated information on who went on to higher education and who did not and were encouraged to closely examine this data and determine why their scores surrounding Indicator 14A decreased. Note that the slippage from 2018-19 to 2019-20, is not a statistically significant difference.  Districts shared with the WDE that, for many students, the severity of Wyoming's economic situation prevented students from being able to afford higher education and had the necessity to seek employment instead. Wyoming's economy is heavily dependent on oil and coal, and both of those industries are in a serious "bust" cycle and it has had a significant impact on our citizens across the state. It is believed that this has had an impact on I-14A data. |
| **C** | The WDE has examined the Indicator 14C rate by district to identify those districts that had a decrease from 2018-19 to 2019-20. Thirteen districts saw a decrease in their 14C rate; but only six districts with at least 9 respondents saw a decrease. In October 2020, the WDE did six regional data drill-downs across the state whereby districts were provided with disaggregated reports of their Indicator 14 data by gender, race/ethnicity, disability, and exit code so that the districts could identify areas of potential improvements in their data. Districts were also provided with disaggregated information on who went on to higher education, competitive employment, and other training/work and who did not and were encouraged to closely examine this data and determine why their scores surrounding Indicator 14C decreased.   The WDE thinks it is likely that COVID impacted the Measurement C rates, particularly since it impacted the Measurement B rates. Almost 22% of exiters said that they were laid off of their job as a result of COVID, and 34% stated that their hours were reduced. The “other” training and “other” work rates did not decrease from 2018-19 to 2019-20, so the decrease in Measurement C was a result of higher education and competitive employment rates decreasing. Note that the slippage from 2018-19 to 2019-20 is not a statistically significant difference.  Wyoming's economy is heavily dependent on oil and coal, and both of these industries have been heavily affected which has had a significant impact on citizens across the state. The tuition costs are preventing many students (with and without disabilities) from accessing higher education, and job opportunities are also diminished in this economic crisis that Wyoming is in. It is believed that this has had an impact on the I-14C data. |

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

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

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

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

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

**Include the State’s analyses of the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.**

The representativeness of the responses was examined by using statistical significance testing to determine if a particular group was over-represented or under-represented in the response rate.  
  
The overall response rate (71%) is very high. Response rates by the demographic characteristics of gender, race/ethnicity, primary disability, and type of exiter were analyzed to determine if one group was more likely to respond than another group. No significant differences existed in response rates by gender, ethnicity, or disability. Students who dropped out (50%) were significantly less likely to respond than students who graduated with a certificate (83%) and students who graduated with a regular diploma (79%). While the response rate for exiters who dropped out is lower than the response rate for other types of exiters, since 2017-18, the drop-out response rate has been 50% or higher. In fact, prior to the districts assisting with making their own calls, the response rate for exiters who had dropped out was only 20%. The WDE will continue to work with districts to help them increase their response rates even higher for students who dropped out. Several districts with high response rates for their students who dropped out have been identified. The WDE will follow-up with these districts to find out what actions that WDE and/or districts could take to increase the response rate of these type of exiters.  
   
The WDE does not think COVID had an impact on the response rate given that the same process was used as before (phone interviews and emails). Further, the response rate increased by two percentage points from 2018-19 to 2019-20. Wyoming thinks it is possible that COVID impacted the Measurement B and C rates. Almost 22% of exiters said that they were laid off of their job as a result of COVID, and 34% stated that their hours were reduced.

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

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

The State does not believe that COVID-19 had an impact on completeness, reliability, or validity of the data. COVID-19 did not hinder LEA's ability to reach out to former students to gather the information. Therefore, data quality was not compromised. COVID-19 did, however, have an impact on post school outcomes and is explained within the 14A and 14C slippage statements.

## 14 - Prior FFY Required Actions

None

## 14 - OSEP Response

## 14 - Required Actions

# Indicator 15: Resolution Sessions

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

Sampling is not allowed.

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

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

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

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

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

## 15 - Indicator Data

Select yes to use target ranges

Target Range not used

**Prepopulated Data**

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

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

NO

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= |  |  |  |  |  |
| Data | 100.00% | 100.00% |  | 0.00% | 50.00% |

**Targets**

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

**FFY 2019 SPP/APR Data**

| **3.1(a) Number resolutions sessions resolved through settlement agreements** | **3.1 Number of resolutions sessions** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- |
| 0 | 0 | 50.00% |  |  | N/A | N/A |

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

## 15 - Prior FFY Required Actions

None

## 15 - OSEP Response

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

## 15 - Required Actions

# Indicator 16: Mediation

**Instructions and Measurement**

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

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

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

**Data Source**

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

**Measurement**

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

**Instructions**

Sampling is not allowed.

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

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

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

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

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

## 16 - Indicator Data

**Select yes to use target ranges**

Target Range not used

**Prepopulated Data**

| **Source** | **Date** | **Description** | **Data** |
| --- | --- | --- | --- |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1 Mediations held | 4 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.a.i Mediations agreements related to due process complaints | 0 |
| SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests | 11/04/2020 | 2.1.b.i Mediations agreements not related to due process complaints | 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.**

NO

**Targets: Description of Stakeholder Input**

The WDE uses its close working relationship with the Wyoming Association of Special Education Administrators (WASEA) and the Wyoming Advisory Panel for Students with Disabilities (WAPSD) to share the "State of the State in Special Education" and get input on priority focus areas, target setting, professional development needs, and requests for technical assistance. A review of Special Education data, both for the State and by LEA, are shared with the WAPSD and WASEA annually. In addition, the WDE uses regional and district level data analysis activities as an opportunity to share district level data regarding the performance of students with disabilities. During these annual activities, LEAs analyzed their data in comparison to statewide data and the data of similarly sized districts and provided the WDE with information on barriers, challenges, successes, district level programming and potential improvement activities. In addition to these activities the WAPSD, WASEA, district administrators of all 49 LEAs, Parents Helping Parents, and the parent advocacy group Parent Information Center (PIC) are given the opportunity to provide input and suggestions on setting the new indicator targets in the SPP when needed. This will certainly be critical over the next months when gathering stakeholder input for setting new SPP targets for FFY20.   
In addition to working with these key special education groups in WY, the WDE utilizes social media to promote involvement and disseminate information on the mechanisms in which to provide input to the WDE and when.

**Historical Data**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FFY** | **2014** | **2015** | **2016** | **2017** | **2018** |
| Target >= |  |  |  |  |  |
| Data | 100.00% | 100.00% | 100.00% | 80.00% | 100.00% |

**Targets**

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

**FFY 2019 SPP/APR Data**

| **2.1.a.i Mediation agreements related to due process complaints** | **2.1.b.i Mediation agreements not related to due process complaints** | **2.1 Number of mediations held** | **FFY 2018 Data** | **FFY 2019 Target** | **FFY 2019 Data** | **Status** | **Slippage** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 3 | 4 | 100.00% |  | 75.00% | N/A | N/A |

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

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

## 16 - Required Actions

# 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:**

Susan Shipley

**Title:**

Special Education Systems Administrator and Part B Data Manager

**Email:**

susan.shipley@wyo.gov

**Phone:**

3077772925

**Submitted on:**

04/28/21 10:47:01 AM

# ED Attachments



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