

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**

New Mexico



**PART B DUE
February 1, 2021**

**U.S. DEPARTMENT OF EDUCATION
WASHINGTON, DC 20202**

Submitted on 01/29/2021 02:58 PM ET

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 State's Integrated Special Education Accountability System (ISEAS) provides the structure for oversight of Local Education Agencies (LEAs) and assurance to the Office of Special Education Programs (OSEP) that the State has accountability mechanisms in place for carrying out its responsibilities in implementing the requirements of the Individuals with Disabilities Education Act (IDEA), Part B. The ISEAS includes systems for general supervision, technical assistance, professional development, stakeholder involvement and reporting to all stakeholders, including the public. Each system outlines the requirement and the State's process for implementing the requirements of IDEA, Part B. Each of the five systems will be described further in this Annual Performance Report (APR). These systems are requirements and are used for all LEA's in the state, which are comprised of three distinct groups.

In Federal Fiscal Year 2019, the State had a total of 145 LEAs, 89 are School Districts, 50 are State Charter Schools and 6 are State Supported Schools (SSS). The number of LEAs fluctuates each year due to the number of State Charter Schools which open, close or convert to Local Charter Schools in a particular year. Conversely, the number of School Districts and SSSs remain the same.

Although the number of School Districts remain the same from year to year, not every School District is the same. Due to the vast size of the State, eighty-five of the School Districts are rural districts that serve students in the rural areas of the State. Approximately four Districts are urban and are within the four largest cities in the state. Some rural districts are very small and do not have students enrolled in every grade, while other districts have students enrolled in every grade from preschool through grade twelve.

There are two types of charter schools in the State, State Charter Schools and Local Charter Schools. State Charter schools are considered their own LEA, operate on their own and self-govern. Local Charter schools, on the other hand, are under the auspice of a School District and are not considered their own LEA but as a part of a School District. The Local Charter School operates through the LEA's school board but still has some autonomy. Another unique aspect of Charter schools is they are allowed to select the populations they serve, some serve only elementary school students, others serve high school students only, while others choose to serve all grades, Kindergarten to grade twelve.

The 6 State Supported Schools (SSSs) in the State serve unique populations. The SSSs are as follows:

1. Juvenile Justice System (JJS): Serves students, under the age of 18, that have been adjudicated to the Juvenile Justice System. These students are educated in JJS facilities.
2. New Mexico Corrections Department (NMCD): Serves students, ages 18 and above, that have been adjudicated to the Department of Corrections. These adult students are educated in NMCD facilities.
3. New Mexico School for the Blind and Visually Impaired (NMSBVI): Serves students from preschool through grade twelve that are blind and visually impaired at one of two campuses. NMSBVI also supports other LEAs with students that are blind or visually impaired through established memorandums of understanding or agreement.
4. New Mexico School for the Deaf (NMSD): Serves students from preschool through grade twelve that are deaf on their campus. NMSD also supports other LEAs with students that are blind through established memorandums of understanding or agreement.
5. Sequoyah Adolescent Treatment Center: Serves adjudicated adolescent students requiring mental health supports in their facility. The students are educated in the Treatment Center.
6. University of New Mexico (UNM) Mimbres School: Serves students that are admitted to the children's psychiatric hospital which serves students that are under the age of 18 and are having a mental health crisis. Also, students that are admitted to the main UNM hospital are served as well. Usually, students at UNM Mimbres School are there only for a short amount of time, three to five days is the average stay.

In summary, it is important to note that each year, due to the number of State Charter Schools which open, close or convert to Local Charter schools the number of LEAs in the State changes as well. Also, data for all indicators may not be applicable for every LEA for reasons explained above which include charter schools having the option to choose the grades served, LEAs in rural areas not having the population of students for every grade or SSSs that serve specific populations. Therefore, the total number of LEAs may vary per indicator.

Additional information related to data collection and reporting

State statute identifies dates in which LEAs must report data to the State via the Student Teacher Accountability and Reporting System (STARS), which is the State's database. Statute requires LEAs to report data four times each year which are identified as the 40 day, 80 day, 120 day and End of Year (EOY) reporting periods. The dates when the reporting happens is also set by statute. 40 day reporting occurs the second Wednesday in October. 80 day reporting occurs the first Wednesday in December. 120 day occurs the second Wednesday in February and End of Year occurs the last day of each LEA's school year. EOY is staggered by LEA depending on when the school year ends for each LEA. Once LEAs submit data into the STARS database, the State reviews the data to ensure there are no errors and the data is valid and timely. This is done for each of the four reporting periods.

While the majority of data reported to OSEP or the U.S. Department of Education originates from STARS, some of the data is compiled outside of the STARS database. Within the New Mexico Public Education Department, various departments compile and report data on behalf of the State, outside of the Special Education Division which oversees special education. Graduation and assessment data is compiled and reported by the Accountability Division. Drop out data is compiled and reported by the Information Technology (IT) department. Resolution Sessions and Mediation data is compiled and reported by the Office of General Counsel. The State also uses contractors for Indicator 8 and 14 which involve surveys. This is done so that parents and students that have left school, feel comfortable reporting to an independent party instead of directly to the State. The data compiled from STARS data as well as that compiled in other methods as described here, are used for EdFacts reporting. The EdFacts Coordinator for our State, is a member of the Information Technology team and completes all the EdFacts reporting for the State.

Finally, it is important to note that the COVID-19 pandemic has had an impact on the data collection and reporting for LEAs. Due to the unique challenges the pandemic has brought forth, the State recognizes that the data reported in this APR may be impacted. For indicators that were impacted, information is provided in the "Provide additional information about this indicator (optional)" sections of this APR. To mitigate the impact the pandemic has had on data collection, the State informed LEAs that data collection would continue as usual and no waivers were granted in regard to the requirements for IDEA B by the U.S. Department of Education. A webinar was provided to all LEAs on data collection and reporting during the pandemic. LEAs that had issues arise as a result of the pandemic were supported individually to resolve the issues.

Number of Districts in your State/Territory during reporting year

145

General Supervision System

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

The State has established systems to ensure that the IDEA Part B requirements are based on data review and monitoring. As indicated in the "Additional information related to data collection and reporting" section, data reviews are completed four times each year for all the compliance indicators and the majority of the results indicators. The STARS system, the State's database, has business rules built in so that the requirements of IDEA Part B, as well as the State's requirements, are incorporated into the reports reviewed. The business rules developed cause errors to occur in reports if the data does not align with the requirements of the IDEA Part B or State requirements. Once an error is identified, LEAs must address the issues either by correcting the data in STARS or providing an explanation for the error. Some issues are more complex and require that non-compliance be identified and LEAs may be placed on a corrective action plan to resolve the issue. Once non-compliance is identified, the LEA must demonstrate correction of the individual case of non-compliance as well as compliance with the regulatory requirements within one year.

The IDEA dispute resolution process is administered by the Office of General Counsel (OGC) within the New Mexico Public Education Department. The State has special education rules that set forth the dispute resolution processes and their requirements which are contained in the New Mexico Administrative Code, 6.31.2.13 NMAC. These processes include the IDEA Part B requirements for mediation, state complaints, and due process hearings. The State contracts with independent mediators, state complaint investigators, and due process hearing officers who assist in conducting the required dispute resolution processes. The OGC maintains a database established for tracking dispute resolution and monitoring dispute resolution processes and ensuring collection of data. The Special Education Division of the Department, in collaboration with the OGC, monitor the outcomes and implementation of the dispute resolution processes to ensure that IDEA Part B violations are corrected.

Technical Assistance System

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

The State's Targeted Technical Assistance System (TTAS) is designed to ensure timely delivery of high quality, evidenced based technical assistance and support to LEAs. The goals of the State's TTAS are to improve LEAs special education programs and system operations while sustaining compliance and cultivating performance. The TTAS is also designed to inform the need for other technical assistance and new initiatives to respond to LEA needs.

The data gathered through the various systems (monitoring, self-assessment, Student Teacher Accountability Reporting System (STARS), due process hearings and State complaints) is used to identify the need for specific statewide technical assistance. Data is examined over time to gain a full understanding of what is happening statewide and to determine the type of technical assistance which is needed across the state. Statewide technical assistance is usually done regionally with the support of Regional Education Cooperatives (RECs), which provide evidence based targeted technical assistance to LEAs within each REC region.

Individual LEA data is examined to determine LEA specific issues which require targeted technical assistance. The LEA's annual determination along with any issues with significant discrepancy, disproportionate representation or significant disproportionality in any of the three areas, are key factors in determining an LEA's need for targeted technical assistance. Once the need is determined, the State identifies which evidence-based technical assistance will be provided. The State has many State and National organizations that provide technical assistance on evidence based practices, with which it draws support from. The State will work with the LEA to develop a technical assistance plan. The State will monitor supports provided to the LEA to ensure that the LEA is receiving the technical assistance needed.

As another resource for technical assistance, the State develops numerous manuals and guidance documents to assist LEAs in implementing the requirements of IDEA part B. These manuals are available on the website.

Professional Development System

The mechanisms the State has in place to ensure that service providers have the skills to effectively provide services that improve results for students with disabilities.

The State's Professional Development System ensures that service providers have the skills to effectively provide services that improve results for students with disabilities. Professional development is provided year-round for Special Education Directors, Special Education Teachers, General Education Teachers and Related Service Providers using a variety of approaches. The topics of the professional development provided are targeted to ensure needed skills are developed.

Two Special Education Director Conferences are held each year. This is usually done in person; however, due to the COVID-19 pandemic these have been converted to on-line via Zoom. A year-long webinar series is held for Special Education Directors, teachers and related service providers. If any are unable to attend a particular webinar or if any would like to refer to the information, the presentations are recorded and available to be accessed at a later date and time.

In addition, various divisions within the State collaborate to provide professional development opportunities for service providers. This is especially important as students with disabilities are integrated into all areas.

Stakeholder Involvement

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

The New Mexico IDEA panel which consists of eighteen members total provides input on all targets. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with some of the indicator targets and data as well as part of a public presentation regarding special education. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets. Most feedback received indicated that the targets for graduation and drop-out rates should be decreased to allow LEAs to close achievement gaps first then increase the rate. The goal is not to diminish the need for higher expectations for students with disabilities but to allow time for the educational

system to train up staff and improve other practices for closing the achievement gap.

The targets for FFY 2019 were established in FFY 2018 and reported with the FFY 2018 APR. OSEP accepted all proposed targets therefore the State did not change any of the targets or baselines. The State will be seeking broad stakeholder input in establishing targets for the next five years.

To establish targets for the next five years beginning with FFY 2020, the State plans to expand stakeholder engagement by having targeted stakeholder groups work on establishing baselines and targets for specific indicators and targets. The stakeholder groups would consist of parents and professionals with experience the area. For example, the secondary stakeholder group will work on establishing baselines and targets for graduation, drop-out and post-school outcomes (Indicators 1, 2 and 14). The preschool stakeholder group will work on Preschool learning environments and outcomes (Indicators 6 and 7). Once these smaller stakeholder groups have recommended baselines and targets, the information will be presented to broader groups such as the IDEA B panel, State Special Education Directors and other groups with a vested interest.

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

NO

Reporting to the Public

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

The State has developed a District Profile Reporting System (DPRS) for publicly reporting performance of each LEA in the State, on the targets in the SPP/APR. The DPRS data begins with FFY17, includes FFY18 data and will soon include FFY19 data. The system contains two levels of data, one level is the general public view which contains masked data for indicators with less than 10 students reported. The general public can look at the data for any LEA. The second level is the LEA view. This view requires a login and password as the data is not masked. Having unmasked data available for LEAs is beneficial as they can track performance over time and can analyze data for program improvement purposes. The DPRS can be found at: <http://webed.ped.state.nm.us/sites/DPR/SitePages/DPRHome.aspx>. To get to the site, go the New Mexico Public Education Department Website, click on Offices/Programs in the banner at the top of the page, click on Special Education, click on the gold button labeled "Visit the District Profile Reporting System" in the middle of the Special Education page.

A complete copy of the FFY2018 APR can also be found on the Special Education page located at: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. To get to the site, go the New Mexico Public Education Department Website, click on Offices/Programs in the banner at the top of the page, click on Special Education, on the left banner, click on District Data, click on FFY2018 Annual Performance Report.

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.

OSEP notes that one or more of the attachments included in the State's FFY 2018 SPP/APR submission are not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and will not be posted on the U.S. Department of Education's IDEA website. Therefore, the State must make the attachment(s) available to the public as soon as practicable, but no later than 120 days after the date of the determination letter.

The State's IDEA Part B determination for both 2019 and 2020 is Needs Assistance. In the State's 2020 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2019 SPP/APR submission, due February 1, 2021, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

Response to actions required in FFY 2018 SPP/APR

The attachments included in the State's FFY 2018 SPP/APR submission which were not in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), and not posted on the U.S. Department of Education's IDEA website were made available to the public within 30 days after the the date of the determination letter. The attachments can be found at <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. To get to the site, go the New Mexico Public Education Department Website, click on Offices/Programs in the banner at the top of the page, click on Special Education, on the left banner, click on District Data, click on 508 Compliance Report or the Report.

As a result of the State's IDEA Part B determination of Needs Assistance for both 2019 and 2020, (1) the State received focused and targeted technical assistance from the IDC State Liaison. Also, the State Director of Special Education participates in the SEA Leadership Collaborative through NCSI. The Data Supervisor is a part of the IDC Data Manager Connection as well as the Cross Role Data Quality Peer Group. The EDFacts Coordinator is also a member of the IDC Cross Role Data Quality Peer Group. The following were also accessed for webinars and information to improve performance: National Center on Intensive Intervention (NCII), the DaSY Center, Westat, Special Education Data Managers Affinity Group meetings (SEDMAG), OSEP's National Technical Assistance Calls, State Lead monthly calls and panels, EdFacts and the National Center on Systemic Improvement (NCSI).

(2) The actions the State took as a result of the technical assistance are: A. Develop the District Profile System so LEAs can see their unmasked data and take ownership of their LEA's performance. Previously LEAs were only provided masked data which did show how the LEA performed for some LEAs. B. Provide data for all indicators whether compliance or results, to LEAs as part of the Annual Determination letters issued. Previously, only compliance indicator data was shared with LEAs. C. Collaboration with the EdFacts Coordinator on the data which is being reported to ensure accuracy. D. Using data forecasting to assist the State to better align targets with performance to set targets that are within range of attaining. E. Expand stakeholder engagement groups so that all stakeholder have the ability to provide input on the targets established by the State.

Intro - OSEP Response

Intro - Required Actions

Indicator 1: Graduation

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

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

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

1 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2011	50.50%

FFY	2014	2015	2016	2017	2018
Target >=	73.70%	75.60%	77.40%	77.40%	77.40%
Data	56.49%	59.32%	61.85%	61.54%	65.60%

Targets

FFY	2019
Target >=	77.40%

Targets: Description of Stakeholder Input

The New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the graduation rate target. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC), Division of Vocational Rehabilitation (DVR), Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets. Most feedback received indicated that the targets for graduation and drop-out rates should be decreased to allow LEAs to close achievement gaps first then increase the rate. The goal is not to diminish the need for higher expectations for students with disabilities but to allow time for the educational system to train up staff and improve other practices for closing the achievement gap.

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	2,424
SY 2018-19 Cohorts for Regulatory Adjusted-Cohort Graduation Rate	07/27/2020	Number of youth with IEPs eligible to graduate	3,749

Source	Date	Description	Data
(EDFacts file spec FS151; Data group 696)			
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	64.66%

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
2,424	3,749	65.60%	77.40%	64.66%	Did Not Meet Target	No Slippage

Graduation Conditions

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

4-year ACGR

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

Students in New Mexico must meet both coursework and competency requirements in order to earn a New Mexico Diploma of Excellence as defined in Section 22-13-1.1 Graduation Requirements NMSA 1978. To graduate from High School, students must complete a minimum of twenty-four credits with at least one of the credits being an advanced placement (AP) or honors course, or a dual-credit course, or a distance learning course. Also, competency must be demonstrated in the five core content areas: mathematics, reading, writing, science, and social studies. Additional information can be found on the New Mexico Public Education website at https://webnew.ped.state.nm.us/wp-content/uploads/2020/02/Graduation_Requirements_Guidance_2.20.20.pdf.

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)

YES

If yes, explain the difference in conditions that youth with IEPs must meet.

Students with Disabilities have three graduation options. These graduation options enable IEP teams to develop a program of study that is most conducive to preparing a student to achieve post-secondary goals and maintain the integrity of the high school diploma. The first graduation option is the Standard Option as described in the previous section. The second is the Modified Option. Students on the Modified Option will take general assessments, with accommodations as indicated in the student's IEP. The students IEP team will also establish individualized passing scores for determining demonstration of competency. End of Course (EoC) exams can be used to demonstrate graduation competency. The third is the Ability Option. Students following the Ability Option will take the state's alternative assessment as the academic achievement assessment rather than the general assessment. IEP teams will set individualized cut scores for demonstrating competency. Students that graduate on the Modified or Ability Options still have access to a Free and Appropriate Public Education until they either age out or graduate on the Standard Option. Additional information can be found on the New Mexico Public Education website at https://webnew.ped.state.nm.us/wp-content/uploads/2020/02/Graduation_Requirements_Guidance_2.20.20.pdf.

Provide additional information about this indicator (optional)

For FFY20, the State will reestablish a baseline and targets to coincide with the measurement change, from a four-year adjusted cohort rate to 618 data.

1 - Prior FFY Required Actions

None

1 - OSEP Response

1 - Required Actions

Indicator 2: Drop Out

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

Data Source

OPTION 1:

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

OPTION 2:

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

Measurement

OPTION 1:

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

OPTION 2:

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

Instructions

Sampling is not allowed.

OPTION 1:

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

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

OPTION 2:

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

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

Options 1 and 2:

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

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

2 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2013	24.75%

FFY	2014	2015	2016	2017	2018
Target <=	23.72%	23.22%	22.97%	22.97%	22.97%
Data	23.73%	26.30%	26.94%	22.84%	25.79%

Targets

FFY	2019
Target <=	22.97%

Targets: Description of Stakeholder Input

The New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the drop out rate target. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets.

Most feedback received indicated that the targets for graduation and drop-out rates should be decreased to allow LEAs to close achievement gaps first then increase the rate. The goal is not to diminish the need for higher expectations for students with disabilities but to allow time for the educational system to train up staff and improve other practices for closing the achievement gap.

Please indicate the reporting option used on this indicator

Option 1

Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/27/2020	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,979
SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/27/2020	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (b)	0
SY 2018-19 Exiting Data Groups (EDFacts file spec FS009; Data Group 85)	05/27/2020	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (c)	18
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)	626
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)	9

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
626	2,632	25.79%	22.97%	23.78%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

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

The New Mexico Administrative Code (NMAC), 6.29.1.9(K)(13)(j) Procedural Requirements indicate that a student who does not return to complete the program of study as outlined in the continuing or transition IEP will be considered as a dropout.

Further for data collection purposes, the state indicates a dropout includes dropouts, runaways, GED recipients (in New Mexico students are required to drop out of the secondary educational program in order to pursue the GED certificate), expulsions, status unknown, students who moved and are not known to be continuing in another educational program, and other students who exited from special education without a valid exit reason.

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)

Although the target was not met, the State reduced the drop out rate by 2.01%.

2 - Prior FFY Required Actions

None

2 - OSEP Response

2 - Required Actions

Indicator 3B: Participation for Students with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

- A. Indicator 3A – Reserved
- B. Participation rate for children with IEPs
- C. Proficiency rate for children with IEPs against grade level and alternate academic achievement standards.

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

Data Source

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

Measurement

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

Instructions

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

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

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

3B - Indicator Data

Reporting Group Selection

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

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

Historical Data: Reading

Group	Group Name	Baseline	FFY	2014	2015	2016	2017	2018
A	Overall	2014	Target >=	95.00%	95.00%	95.00%	95.00%	95.00%
A	Overall	97.75%	Actual	97.75%	95.77%	99.44%	95.85%	99.56%

Historical Data: Math

Group	Group Name	Baseline	FFY	2014	2015	2016	2017	2018
A	Overall	2014	Target >=	95.00%	95.00%	95.00%	95.00%	95.00%
A	Overall	97.82%	Actual	97.82%	95.41%	99.21%	92.73%	99.56%

Targets

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

Targets: Description of Stakeholder Input

FFY 2019 Data Disaggregation from EDFacts

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

NO

Data Source:

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

Date:

Reading Assessment Participation Data by Grade

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

Data Source:

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

Date:

Math Assessment Participation Data by Grade

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

FFY 2019 SPP/APR Data: Reading Assessment

Group	Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A	Overall			99.56%	95.00%		N/A	N/A

FFY 2019 SPP/APR Data: Math Assessment

Group	Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A	Overall			99.56%	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.

Assessment results can be found in two locations on the New Mexico Public Education Department website. Data on students with disabilities can be found on the Special Education Division page under District Data: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The data on this webpage includes: (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)].

Assessment results for students without disabilities can be found on the Accountability page under Achievement Data: <https://webnew.ped.state.nm.us/bureaus/accountability/achievement-data/>.

The State does not have any FFY 2019 assessment participation rates.

Provide additional information about this indicator (optional)

Due to the unprecedented circumstances brought on by the COVID-19 pandemic and the closure of schools, the U.S. Department of Education has granted the New Mexico Public Education Department (PED) a waiver to bypass assessment and accountability requirements under the Elementary and Secondary Education Act of 1965 (ESEA), as amended by the Every Student Succeeds Act (ESSA). Specifically, the waiver addresses the state's inability to administer assessments as required under ESEA section 1111(b)(2) or to comply with the test administration, reporting requirements, and school identification, as would normally be planned due to extensive school closures in the state. This waiver is applicable for the 2019-20 SY and allows New Mexico to forgo or cancel statewide testing that would be typically administered.

3B - Prior FFY Required Actions

Within 90 days of the receipt of the State's 2020 determination letter, the State must provide to OSEP a Web link that demonstrates that it has reported, for FFY 2018, to the public, on the statewide assessments of children with disabilities in accordance with 34 C.F.R. § 300.160(f). In addition, OSEP reminds the State that in the FFY 2019 SPP/APR, the State must include a Web link that demonstrates compliance with 34 C.F.R. § 300.160(f) for FFY 2019.

Response to actions required in FFY 2018 SPP/APR

The web link that demonstrates that the State reported to public has been provided to OSEP and is also provided here. The state reports data in two areas on the New Mexico Public Education Department website. The first location is the Accountability Division website under Achievement Data. LEA level statewide assessment data is provided but does not contain all the requirements of 34 C.F.R. § 300.160(f). Accountability Division webpage link: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>

The second location statewide assessment data can be found is the Special Education Division website under District Data. This site breaks down the data for students with disabilities as required by 34 C.F.R. § 300.160(f). Special Education Division webpage link: <https://webnew.ped.state.nm.us/bureaus/accountability/achievement-data/>

3B - OSEP Response

3B - Required Actions

Indicator 3C: Proficiency for Students with IEPs

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

- A. Indicator 3A – Reserved
- B. Participation rate for children with IEPs
- C. Proficiency rate for children with IEPs against grade level and alternate academic achievement standards.

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

Data Source

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

Measurement

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

Instructions

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

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

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

3C - Indicator Data

Reporting Group Selection

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

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

Historical Data: Reading

Group	Group Name	Baseline	FFY	2014	2015	2016	2017	2018
A	Overall	2014	Target >=	5.13%	65.30%	65.30%	65.30%	65.30%
A	Overall	5.13%	Actual	5.13%	6.41%	11.83%	9.28%	9.62%

Historical Data: Math

Group	Group Name	Baseline	FFY	2014	2015	2016	2017	2018
A	Overall	2014	Target >=	5.66%	60.00%	60.00%	60.00%	60.00%
A	Overall	5.66%	Actual	5.66%	6.89%	9.50%	7.69%	7.29%

Targets

Subject	Group	Group Name	2019
Reading	A >=	Overall	65.30%
Math	A >=	Overall	60.00%

Targets: Description of Stakeholder Input

FFY 2019 Data Disaggregation from EDFacts

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

NO

Data Source:

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

Date:

Reading Proficiency Data by Grade

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

Data Source:

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

Date:

Math Proficiency Data by Grade

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

FFY 2019 SPP/APR Data: Reading Assessment

Group	Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A	Overall			9.62%	65.30%		N/A	N/A

FFY 2019 SPP/APR Data: Math Assessment

Group	Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A	Overall			7.29%	60.00%		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.

Assessment results can be found in two locations on the New Mexico Public Education Department website. Data on students with disabilities can be found on the Special Education Division page under District Data: <https://webnew.ped.state.nm.us/bureaus/special-education/district-data/>. The data on this webpage includes: (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)].

Assessment results for students without disabilities can be found on the Accountability page under Achievement Data: <https://webnew.ped.state.nm.us/bureaus/accountability/achievement-data/>.

The State does not have any FFY 2019 assessment results to report.

Provide additional information about this indicator (optional)

Due to the unprecedented circumstances brought on by the COVID-19 pandemic and the closure of schools, the U.S. Department of Education has granted the New Mexico Public Education Department (PED) a waiver to bypass assessment and accountability requirements under the Elementary and Secondary Education Act of 1965 (ESEA), as amended by the Every Student Succeeds Act (ESSA). Specifically, the waiver addresses the state's inability to administer assessments as required under ESEA section 1111(b)(2) or to comply with the test administration, reporting requirements, and school identification, as would normally be planned due to extensive school closures in the state. This waiver is applicable for the 2019-20 SY and allows New Mexico to forgo or cancel statewide testing that would be typically administered.

3C - Prior FFY Required Actions

None

3C - OSEP Response

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	0.81%

FFY	2014	2015	2016	2017	2018
Target <=	1.93%	1.90%	0.81%	0.81%	0.80%
Data	1.37%	0.68%	0.81%	0.76%	0.00%

Targets

FFY	2019
Target <=	0.80%

Targets: Description of Stakeholder Input

The New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the suspension/expulsion target. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet

the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets.

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.

3

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
1	141	0.00%	0.80%	0.71%	Met Target	No Slippage

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

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

State's definition of "significant discrepancy" and methodology

Data on the suspensions and expulsions of children with disabilities was derived from the IDEA Section 618 data submitted by LEAs via the State data collection system and database, STARS, as part of the End of Year (EOY) data collection. The information was submitted in STARS using unique student identification numbers for each student and infraction. The data uploaded in the STARS system was validated by State staff.

This validated data was used to populate the Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) for the school year 2018-2019 due in November 2019. Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) was used to determine significant discrepancy.

The State defines significant discrepancy in the rates of suspension and expulsions of greater than 10 days in a school year for students with IEPs (disabilities) among LEAs in the State if the following criteria are met:

- The LEA must have a "cell" size of greater than 10 with suspensions and expulsions of students with disabilities greater than 10 days in a school year; and
- The rate of suspensions/expulsions for students with IEPs is more than 1% higher than the average rate of suspensions and expulsions greater than 10 days among LEAs in the State.

The rates of suspensions and expulsions of greater than 10 days in a school year for students with IEPs are compared among LEAs in the State. If an LEA had a "cell" size of greater than 10 students with disabilities, who were suspended or expelled greater than 10 days and a long-term suspension and expulsion rate for students with IEPs that was more than 1% higher than the State's average of 0.251%, the LEA was considered to have significant discrepancy in the rates of suspensions and expulsions.

Provide additional information about this indicator (optional)

During FFY 2019 (using 2018-2019 data), only one (1) LEA in the State was found to have significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year of students with IEPs in which the policies, procedures, or practices contributed to the significant discrepancy. The State met the target.

Three (3) LEAs were not included in the calculation as a result of the "cell" size requirement. These three had suspension rates between 1.72% and 2.86%, but suspended only 1 or 2 students with disabilities, and as such, were excluded from the analysis.

For FFY 2019 using 2018-2019 data, Indicator 4A was not impacted by the COVID-19 pandemic since the data was from 2018-2019. The State anticipates the FFY 2020 data using 2019-2020 data and FFY 2021 using 2020-2021 for Indicator 4A will be impacted as the majority of the LEAs in the State are providing remote learning due to current public health orders in the State.

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 is currently beginning the process of reviewing policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports and procedural safeguards for the one LEA which was found to have significant discrepancy. The results of the policies, procedures and practices review will be updated on April 15, 2021, during the Clarification phase of the Annual Performance Report.

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

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

4A - Prior FFY Required Actions

None

4A - OSEP Response

4A - Required Actions

Indicator 4B: Suspension/Expulsion

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

Compliance Indicator: Rates of suspension and expulsion:

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

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

Data Source

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

Measurement

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

Include State's definition of "significant discrepancy."

Instructions

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

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

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

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

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

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

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

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

Targets must be 0% for 4B.

4B - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2016	0.81%

FFY	2014	2015	2016	2017	2018
Target	0%	0%	0%	0%	0%
Data	1.37%	0.68%	0.81%	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.

11

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	133	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

Data for Indicator 4B were gathered from the Information Collection 1820-0621 (Report of Children with Disabilities Subject to Disciplinary Removal) submitted to EdFacts in November 2019 (discipline data from the 2018-19 school year). LEAs were required to submit discipline data during the STARS End of Year (EOY), data collection period. The suspension and expulsion data was disaggregated by LEA and race and ethnicity to determine if an LEA had a significant discrepancy, by race and ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEP's.

This first step in the significant discrepancy determination process, is flagging (i.e. identifying) LEAs which meet the criteria. The State has established a minimum "cell" size. In order for a LEA to be flagged for possible significant discrepancy, by race and ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEP's, the LEA must meet the following criteria:

- An "n" size of greater than 10 students suspended or expelled for greater than 10 days in a school year; and
- An "n" size of greater than 10 students in any race or ethnicity category; and
- The rate of suspension/expulsions, by race and ethnicity, for children with IEPs is more than 1% greater than the average rate of suspension/expulsions greater than 10 days in a school year for students with IEPs among LEAs in the State.

Second, in order to determine if the LEA had significant discrepancy by race and ethnicity in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, and to determine if the LEA's policies, procedures, or practices contributed to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, use of positive behavioral interventions and supports, and procedural safeguards, the LEA is required to complete the Indicator 4 self-assessment. The State reviews the self-assessment along with the LEA's policies, procedures and practices, including student data. After the State review, it is determined if the deficient or non-compliant policies, procedures, and practices contributed to the significant discrepancy in the rates of suspension and expulsions by race and ethnicity for children with IEPs. The second step is not completed unless an LEA meets the criteria in the first step.

Provide additional information about this indicator (optional)

For FFY 2019 using 2018-2019 data, Indicator 4B was not impacted by the COVID-19 pandemic since the data was from 2018-2019. The State anticipates the FFY 2020 data using 2019-2020 data and FFY 2021 using 2020-2021 for Indicator 4B will be impacted as the majority of the LEAs in the State are providing remote learning due to current public health orders.

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

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

No LEAs were flagged (i.e. identified) to have significant discrepancy (step 1 of the process) therefore policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards were not reviewed (step 2 of the process) for any LEA. The second step is not completed unless an LEA is flagged in the first step.

When an LEA is flagged as having significant discrepancy by meeting the established criteria (step 1), the following is the process for reviewing policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards: To determine if the LEA had significant discrepancy by race and ethnicity in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, and to determine if the LEA's policies, procedures, or practices contributed to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, use of positive behavioral interventions and supports, and procedural safeguards, the LEA is required to complete the Indicator 4 self-assessment protocol. The State reviews the self-assessment along with the LEA's policies, procedures and practices, including student data. After the State review, it is determined if the deficient or non-compliant

policies, procedures, and practices contributed to the significant discrepancy in the rates of suspension and expulsions by race and ethnicity for children with IEPs. This process does not occur unless an LEA is flagged as having significant discrepancy.

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

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

Findings of Noncompliance Verified as Corrected

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

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

4B - Prior FFY Required Actions

None

4B - OSEP Response

4B- Required Actions

Indicator 5: Education Environments (children 6-21)

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

- A. Inside the regular class 80% or more of the day;
- B. Inside the regular class less than 40% of the day; and
- C. In separate schools, residential facilities, or homebound/hospital placements.

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

Data Source

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

Measurement

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

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

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

Instructions

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

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

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

5 - Indicator Data

Historical Data

Part	Baseline	FFY	2014	2015	2016	2017	2018
A	2005	Target >=	50.00%	50.00%	53.00%	53.00%	53.00%
A	50.00%	Data	50.61%	49.80%	49.82%	49.93%	48.95%
B	2005	Target <=	20.00%	19.00%	18.00%	18.00%	18.00%
B	19.00%	Data	19.64%	19.19%	18.62%	18.14%	17.66%
C	2005	Target <=	1.95%	1.90%	0.91%	0.91%	0.91%
C	1.60%	Data	0.91%	0.91%	0.87%	0.79%	0.85%

Targets

FFY	2019
Target A >=	53.00%
Target B <=	18.00%
Target C <=	0.91%

Targets: Description of Stakeholder Input

The New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the education environment target. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets.

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 Child Count/Educational Environment	07/08/2020	Total number of children with IEPs aged 6 through 21	50,330

Source	Date	Description	Data
Data Groups (EDFacts file spec FS002; Data group 74)			
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	25,861
SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS002; Data group 74)	07/08/2020	B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	8,607
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	166
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	30
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	1

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

NO

FFY 2019 SPP/APR Data

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	25,861	50,330	48.95%	53.00%	51.38%	Did Not Meet Target	N/A
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	8,607	50,330	17.66%	18.00%	17.10%	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]	197	50,330	0.85%	0.91%	0.39%	Met Target	N/A

Use a different calculation methodology (yes/no)

NO

Provide additional information about this indicator (optional)

The number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day increased by 2.43% between FFY 2018 and FFY 2019. The number of children with IEPs inside the regular class less than 40% of the day and the number of children inside separate schools, residential facilities, or homebound/hospital placements decreased by .55% and .46% respectively in FFY 2019.

The COVID-19 pandemic had an impact on the number of students that were served in the regular class 80% or more of the day. To report valid data, LEAs reported a reduced percentage of students that were served in the regular class 80% or more of the day since students were not in a classroom but in a distance model of learning. The state served students in a distance learning model from April 2020 through the end of the school year.

5 - Prior FFY Required Actions

None

5 - OSEP Response

5 - Required Actions

Indicator 6: Preschool Environments

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

- A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and
- B. Separate special education class, separate school or residential facility.

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

Data Source

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

Measurement

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

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

Instructions

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

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

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

6 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2014	2015	2016	2017	2018
A	2011	Target >=	50.00%	50.00%	52.00%	52.00%	52.00%
A	47.70%	Data	44.90%	43.86%	41.57%	44.12%	46.13%
B	2011	Target <=	30.00%	28.00%	26.00%	26.00%	26.00%
B	33.50%	Data	41.73%	42.26%	43.75%	40.49%	25.52%

Targets

FFY	2019
Target A >=	52.00%
Target B <=	26.00%

Targets: Description of Stakeholder Input

The New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the education environment target. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets.

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	3,817

Source	Date	Description	Data
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	1,988
SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/08/2020	b1. Number of children attending separate special education class	1,152
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	100
SY 2019-20 Child Count/Educational Environment Data Groups (EDFacts file spec FS089; Data group 613)	07/08/2020	b3. Number of children attending residential facility	1

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

NO

FFY 2019 SPP/APR Data

Preschool Environments	Number of children with IEPs aged 3 through 5 served	Total number of children with IEPs aged 3 through 5	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	1,988	3,817	46.13%	52.00%	52.08%	Met Target	N/A
B. Separate special education class, separate school or residential facility	1,253	3,817	25.52%	26.00%	32.83%	Did Not Meet Target	N/A

Use a different calculation methodology (yes/no)

NO

Provide additional information about this indicator (optional)

For Indicator 6B, although there was slippage, the actual number of children with IEPs aged 3 through 5 served in a separate special education class, separate school or residential facility decreased from 1686 in FFY2018 to 1253 in FFY 2019. The total number of children with IEPs aged 3 through 5 served reduced from 6607 in FFY 2018 to 3017 in FFY 2019.

The COVID 19 pandemic resulted in the need for IEP teams to meet and consider different settings and supports for students based on the needs of students. To mitigate the impact, the State has provided guidance to LEAs on serving students with disabilities during the pandemic.

6 - Prior FFY Required Actions

None

6 - OSEP Response

6 - Required Actions

Indicator 7: Preschool Outcomes

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and
- C. Use of appropriate behaviors to meet their needs.

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

Data Source

State selected data source.

Measurement

Outcomes:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

- a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.
- b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
- c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.
- d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.
- e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

Summary Statements for Each of the Three Outcomes:

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

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

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

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

Instructions

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

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

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

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

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

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

7 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Part	Baseline	FFY	2014	2015	2016	2017	2018
A1	2014	Target >=		77.73%	77.73%	77.73%	77.80%
A1	77.73%	Data	77.73%	78.41%	75.95%	78.16%	72.82%
A2	2014	Target >=		54.43%	54.43%	54.43%	54.50%

A2	54.43%	Data	54.43%	54.33%	51.10%	49.82%	45.17%
B1	2014	Target >=		76.49%	76.49%	76.49%	76.50%
B1	76.49%	Data	76.49%	77.68%	73.70%	75.31%	73.02%
B2	2014	Target >=		50.31%	50.31%	50.31%	50.35%
B2	50.31%	Data	50.31%	49.89%	49.54%	45.19%	40.01%
C1	2014	Target >=		76.85%	76.85%	76.85%	76.86%
C1	76.85%	Data	76.85%	78.37%	76.84%	78.44%	74.75%
C2	2014	Target >=		62.15%	62.33%	62.33%	62.35%
C2	62.15%	Data	62.15%	62.33%	60.28%	58.18%	53.04%

Targets

FFY	2019
Target A1 >=	77.80%
Target A2 >=	54.50%
Target B1 >=	76.50%
Target B2 >=	50.35%
Target C1 >=	76.86%
Target C2 >=	62.35%

Targets: Description of Stakeholder Input

The New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the post-school outcomes targets. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets.

FFY 2019 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed

3,769

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	95	2.52%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	759	20.14%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,244	33.01%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	928	24.62%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	743	19.71%

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	2,172	3,026	72.82%	77.80%	71.78%	Did Not Meet Target	Slippage

Outcome A	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>							
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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,671	3,769	45.17%	54.50%	44.34%	Did Not Meet Target	No Slippage

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

Outcome B Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	104	2.76%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	814	21.60%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,332	35.34%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	895	23.75%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	624	16.56%

Outcome B	Numerator	Denominator	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
B1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. <i>Calculation: (c+d)/(a+b+c+d)</i>	2,227	3,145	73.02%	76.50%	70.81%	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. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	1,519	3,769	40.01%	50.35%	40.30%	Did Not Meet Target	No Slippage

Outcome C: Use of appropriate behaviors to meet their needs

Outcome C Progress Category	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	93	2.47%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	604	16.03%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1,045	27.73%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	918	24.36%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1,109	29.42%

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. <i>Calculation: (c+d)/(a+b+c+d)</i>	1,963	2,660	74.75%	76.86%	73.80%	Did Not Meet Target	No Slippage
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. <i>Calculation: (d+e)/(a+b+c+d+e)</i>	2,027	3,769	53.04%	62.35%	53.78%	Did Not Meet Target	No Slippage

Part	Reasons for slippage, if applicable
A1	Due to the COVID 19 pandemic, the few months of a pre-school student's education in the State was provided online. This attributed to the slippage, in the rate of those children who entered or exited the program below age expectations in positive social-emotional skills (including social relationships), the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. Completing accurate final assessments to attain the student's level of positive social-emotional growth via Zoom was another factor which attributed to the slippage.
B1	Due to the COVID 19 pandemic, the final few months of a pre-school student's education in the State was provided online. This attributed to the slippage, in the rate of those children who entered or exited the program below age expectations in acquisition and use of knowledge and skills (including early language/communication), the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. Completing accurate final assessments to attain the student's level of use of growth via Zoom was another factor which attributed to the slippage.

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

YES

Sampling Question	Yes / No
Was sampling used?	NO

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

YES

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

The State allows LEAs to choose the instrument for gathering data for this indicator, from four state approved instruments. The State approved Instruments are Brigance, Creative Curriculum, Work Sampling, and NM Pre-K Observational Assessment. LEAs may also petition the State to use a different instrument. The State can elect to approve or disapprove the proposed instrument.

Students with disabilities, ages 3 to 5, enrolled in an Early Childhood Program, must have an entry and exit early childhood assessment completed in three content areas, Behavior, Social Emotional and Language Acquisition. Students enrolled in an early childhood program for more than 30 days, from the end of the school year, are required to have an early childhood entry assessment completed. The entry early childhood assessment is required to be administered within 30 days from the child's program start date, in the current school year. Exit early childhood assessments are administered at least six months after the entry assessment was administered. An exit assessment is required if the student was enrolled in the program for at least six months.

LEAs utilize the Childhood Outcomes Summary Form (COSF) calculator to determine a Progress Achieved Code which best identifies each child's level of performance. The data from the entry and exit assessments are then reported in the STARS system. The entry and exit data can be reported during any of the four State reporting periods, 40, 80, 120 and End of Year; however, the State requires the data to be reported in STARS at the earliest reporting period after the assessment was administered.

Provide additional information about this indicator (optional)

The COVID 19 pandemic had an impact on Indicator 7 as LEAs reported numerous issues in gathering data for exit assessments. In-person observations were not feasible due to the health pandemic, so data to the extent possible, had to be gathered using Zoom or other virtual platforms. A final determination score had to be made using the limited information gathered through the virtual platform. It is possible the student outcomes could have been higher than what was reported but LEAs used data which was available and reliable.

7 - Prior FFY Required Actions

None

7 - OSEP Response

7 - Required Actions

Indicator 8: Parent involvement

Instructions and Measurement

Monitoring Priority: FAPE in the LRE

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

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

Data Source

State selected data source.

Measurement

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

Instructions

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

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

Provide the actual numbers used in the calculation.

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

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

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

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

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

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

8 - Indicator Data

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

Targets: Description of Stakeholder Input

The New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the parent participation target. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets.

Historical Data

Baseline Year	Baseline Data
2010	80.20%

FFY	2014	2015	2016	2017	2018
Target >=	82.00%	83.00%	84.00%	84.00%	84.00%
Data	82.69%	86.17%	82.45%	84.21%	81.83%

Targets

FFY	2019
Target >=	84.00%

FFY 2019 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2018 Data	FFY 2019 Target	FFY 2019 Data	Status	Slippage
865	1,007	81.83%	84.00%	85.90%	Met Target	No Slippage

The number of parents to whom the surveys were distributed.

15,906

Percentage of respondent parents

6.33%

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.

Parents of a representative sample of students with disabilities, including preschool students with disabilities, are given an opportunity to complete the State's parent survey. Parents of students at all grade levels, including preschool, received and responded to the survey.

In FFY 2019, the survey was distributed to a stratified, representative number of 15,906 parents of children receiving special education services, including parents of preschool children. A total of 1,015 surveys were returned for a response rate of 6.38%. Out 1,015 parents who responded to the overall survey, 1,007 specifically answered the question reporting how the schools facilitated parent involvement as a means of improving services and results for children with disabilities for a response rate of 6.33% for that particular question. Preschool children are identified as a target group in the survey. Data are analyzed specific to grade level. Preschool parents represented 7.49% of the total respondents, with 76 parents responding. Results are weighted by LEA to make sure that the overall state parent involvement percentage is an accurate reflection of the experiences of parents of students with disabilities age 3 to 21.

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 was previously approved by OSEP. Sampling is done at the LEA and school level. A stratified, random sample of students with disabilities is selected from each school within each LEA. When calculating state-level results, responses are weighted by the student with disability population size (e.g., a LEA that has four times the number of students with disabilities as another LEA 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 LEA, and because the proper weighting is done in the analysis, the State is assured that the Indicator 8 results are reliable and valid.

Survey Question	Yes / No
Was a survey used?	YES
If yes, is it a new or revised survey?	
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 extent to which the demographics of the parents responding are representative of the surveys received, was assessed by examining the demographic characteristics of the children of the parents who responded to the survey in comparison to the demographic characteristics of all special education students. 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 primary disability of the child.

Parents of Hispanic students were under-represented. 45% of the parents who responded as having a child who was Hispanic whereas less than 45% of students in the sample were Hispanic. To ensure parents of Hispanic students are represented in the survey, the State will establish a stakeholder group to review the survey used to ensure that it is reader friendly. The State will also work with LEAs with large Hispanic populations to obtain input on the survey process and best practices which may have been successful for the LEA. An electronic survey completed through an application will also be considered as it will be more convenient than the multi-step process of completing a paper survey then returning it in the mail.

Provide additional information about this indicator (optional)

The State does not believe the COVID-19 pandemic had an impact on the response rate, given that the same process was used as in previous years. Surveys were mailed to parents and then parents returned completed surveys by mail. Further, the response rate slightly increased from 2018-19 to 2019-20. The State also has no reason to suspect that the COVID-19 pandemic had an impact on the positivity of the survey responses. The parent involvement percentage increased by four percentage points from 2018-19 to 2019-20 and individual item responses increased as well, but the State has no reason to believe this was a function of the COVID-19 pandemic.

Going forward, the State will compare the response rates by LEA to determine which LEAs have a relatively high response rate and will follow-up with these LEAs to find out how they are encouraging parents to complete the survey.

8 - Prior FFY Required Actions

None

8 - OSEP Response

8 - Required Actions

Indicator 9: Disproportionate Representation

Instructions and Measurement

Monitoring Priority: Disproportionality

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

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

Data Source

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

Measurement

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

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

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

Instructions

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

States are not required to report on underrepresentation.

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

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

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

Targets must be 0%.

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

9 - Indicator Data

Not Applicable

Select yes if this indicator is not applicable.

NO

Historical Data

Baseline Year	Baseline Data
2016	0.00%

FFY	2014	2015	2016	2017	2018
Target	0%	0%	0%	0%	0%
Data	0.00%	0.00%	0.00%	0.00%	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.

20

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	125	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).

In order for an LEA to be considered as having disproportionate representation of racial and ethnic groups in special education and related services that was the result of inappropriate identification, the following criteria must be met:

- A "cell" size of greater than 10 students or more in the racial and ethnic groups; and
- Risk Ratio (RR) and Alternate Risk Ratio (ARR) of 3.0 or above (over-representation) for students aged 6 – 21; and
- Deficient policies, procedures, and/or practices.

One year of data is used in the calculation.

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.

No LEAs were identified as demonstrating possible disproportionate representation of racial and ethnic groups in special education and related services. If an LEA(s) were identified, the LEA(s) would be notified in writing of the possible disproportionate representation and be required to complete the Indicator 9 self-assessment protocol. The purpose of the self-assessment is to identify if the LEA(s) has deficient policies, procedures, and practices. The State would examine the self-assessment to determine if the policies, procedures, and practices are deficient and contributed to the inappropriate identification.

In addition, the State would send a list of students to the LEA(s) who may have been inappropriately identified in the "possible disproportionate representation" finding. The LEA(s) is then required to submit the following documents for a review by the State: Student Assistance Team (SAT) paperwork for each flagged student, reason for referral, length of time in SAT, interventions implemented, reason student was sent for testing/evaluation, diagnostic report, and/or Review of Existing Evaluation Data (REED). The information is reviewed to determine what portion(s) of the LEA's policies, procedures, and practices need to be updated.

Upon conclusion of this process, the State determines if the identified LEA(s) is non-compliant for this Indicator.

Provide additional information about this indicator (optional)

Out of one hundred forty-five LEAs, twenty LEAs were not included in the calculation because the LEAs did not meet the minimum "cell" size of 11. In other words, the LEA did not have greater than 10 students in any of the seven racial/ethnic categories. One hundred twenty-five LEAs met the State's minimum "cell" size. In FFY 2019, zero LEAs were considered to have disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification. The State met the target.

Twenty LEAs, which includes the 6 State Supported Schools (SSSs), did not meet the "cell" size requirement. The six (6) SSSs are not included in the Indicator 9 calculation because they never meet the "cell" size requirement due to the nature of the population they serve. These populations include those with low-incidence disabilities of deaf/hard of hearing and blind/visually impaired. The other populations of SSSs are those students that are incarcerated in the juvenile justice system or adult prisons, as well as those being treated in mental health facilities.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

9 - Prior FFY Required Actions

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.

49

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	96	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).

An LEA is considered to have disproportionate representation of racial and ethnic groups in a specific disability category that was the result of inappropriate identification if the following criteria are met:

- A "cell" size of greater than 10 students or more in the racial and ethnic groups and the specific disability category; and
- A risk ratio (RR) and alternate risk ratio (ARR) of 3.0 or above (over representation) for students aged 6-21; and
- Deficient policies, procedures, and/or practices.

One year of data is used in the calculation.

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.

Using the criteria established above, the State identified two LEAs with disproportionate representation in specific disability categories out of the ninety-six LEAs who met the minimum "cell" size requirement. The LEA(s) were notified in writing of the possible disproportionate representation.

The two LEAs identified were then required to complete the Indicator 10 self-assessment protocol. The purpose of the self-assessment is to determine if the LEAs have deficient policies, procedures, and practices. The State examined the self-assessment completed by the LEAs and determined the policies, procedures, and practices were not deficient and did not contribute to the inappropriate identification.

In addition, the State sent a list of students to the LEA(s) who may have been inappropriately identified in the possible disproportionate representation finding. The LEA(s) were required to submit the following documents for a review by the State: Student Assistance Team (SAT) paperwork for each flagged student, reason for referral, length of time in SAT, interventions implemented, reason student was sent for testing/evaluation, diagnostic report, and/or Review of Existing Evaluation Data (REED). The information was reviewed to help determine what portion(s) of the LEA's policies, procedures, and practices, if any, needed to be updated.

Provide additional information about this indicator (optional)

Out of one hundred forty-five LEAs, forty-nine LEAs were excluded from the calculation because the LEAs did not meet the minimum "cell" size requirement. In other words, the LEA did not have greater than 10 students in any of the seven racial/ethnic categories. Ninety-six LEAs met the State's minimum "n" size. In FFY 2019, zero (0) LEAs were considered to have disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. The State met the target.

Correction of Findings of Noncompliance Identified in FFY 2018

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

Correction of Findings of Noncompliance Identified Prior to FFY 2018

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

10 - Prior FFY Required Actions

None

10 - OSEP Response

10 - Required Actions

Indicator 11: Child Find

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Data Source

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

Measurement

- a. # of children for whom parental consent to evaluate was received.
- b. # of children whose evaluations were completed within 60 days (or State-established timeline).
Account for children included in (a), but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

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

Instructions

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

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

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

Targets must be 100%.

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

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

11 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2005	80.00%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	99.34%	99.40%	99.06%	99.66%	99.64%

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
7,690	7,665	99.64%	100%	99.67%	Did Not Meet Target	No Slippage

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

25

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.

Twenty-five children were included in (a) but not included in (b). The range of days beyond the timeline are from one day to one hundred sixteen days. Sixty percent (60%) of the delays occurred prior to the start of the COVID-19 pandemic. The delays can be attributed to the shortage of qualified evaluators available in the State and also to gaps in the LEA's processes for evaluating students. Forty (40%) percent of the delays occurred during the COVID-19 pandemic. The State closed schools for a three week period from March 16 to April 3, 2020. Following the school closure, LEAs started a distance learning model where student's learned online, this model was in place for the remainder of the 2019-2020 school year. LEAs were informed that there were no waivers to the requirements granted during the school closure or distance learning.

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.

The State collects the data for Indicator 11 through the State database, the Student Teacher Accountability Reporting (STARS) System, four times each school year. State statute defines when the collection periods are, which are the 40th, 80th, 120th and End of Year reporting periods. LEAs upload their data into the STARS system each reporting period, the STARS system contain business rules which check the dates for the signed parental consent for evaluation to the date when evaluations were completed to ensure the process happened within 60 days. State staff run reports in the STARS system to ensure the LEAs have properly entered data and no errors remain. This process is completed each of the four reporting periods.

Provide additional information about this indicator (optional)

The COVID 19 pandemic had an impact on Indicator 11 as LEAs reported numerous causes in delays such as in-person evaluations were not feasible, Tribal communities were on a complete lock-down and thus students in those communities could not be evaluated. Obtaining signed parental consent was another issue especially when parents did not have access to internet services which is an issue state-wide. To mitigate the impact on data collection, the State allowed for the use of electronic signatures and the use of on-line meeting platforms to collect data for eligibility determinations.

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

The State verified that the 11 LEAs which are the source of non-compliance are correctly implementing the regulatory requirements in a three step process. First, each LEA completed a Root Cause Analysis (RCA). The RCA requires LEAs to review their policies, practices and procedures to ensure compliance with 34 CFR § 300.301 (c)(1)(i) and identify any issues with their own policies, practices and procedures which are causing the non-compliance. Each LEA submitted a completed RCA to the State. Second, the State reviewed each LEA's RCA along with the policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify that each LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, updated data submitted by each LEA in the STARS system, the State's data collection system, was reviewed by the State. Each LEA had a score of 100% for Indicator 11 at the time of the data review. The above conditions were met for each of the three steps and each LEA was considered to be correctly implementing the regulatory requirements 34 CFR § 300.301 (c)(1)(i).

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

The State verified that each individual case of non-compliance was corrected in a two step process. First, the State reviewed the Indicator 11 Summary Report generated by the STARS system to obtain a list of students that did not have an evaluation completed in the 60 day timeline. Second, the State reviewed the Indicator 11 Summary Report to determine if an evaluation date was entered for the student, even if the date was after the 60 day timeline. If the evaluation date was in the STARS system, the individual case of non-compliance was considered as corrected. If the evaluation date was not in the STARS system, the State contacted the LEA and requested the status of the evaluation. The State monitored the STARS system until each evaluation was completed. Step 2 is completed when all students identified in the first step have an evaluation completed within one year, which means each individual case of non-compliance is 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
FFY 2017	1	1	0
FFY 2016	1	1	0
FFY 2015	2	2	0

FFY 2017

Findings of Noncompliance Verified as Corrected

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

The State verified that the 1 LEA which was the source of non-compliance is correctly implementing the regulatory requirements in a three step process. First, the LEA completed a Root Cause Analysis (RCA). The RCA requires the LEA to review LEA policies, practices and procedures to ensure

compliance with 34 CFR § 300.301 (c)(1)(i) and identify any issues with the LEA's own policies, practices and procedures which are causing the non-compliance. The LEA submitted a completed RCA to the State. Second, the State reviewed the LEA's RCA along with the policies, practices and procedures. The State worked with the LEA to correct issues identified in the LEA and State review of the RCA and policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify that the LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, updated data submitted by the LEA in the STARS system, the State's data collection system, was reviewed by the State. The LEA had a score of 100% for Indicator 11 at the time of the data review. The above conditions were met for each of the three steps and the LEA was considered to be correctly implementing the regulatory requirements of 34 CFR § 300.301 (c)(1)(i).

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

The State verified that each individual case of non-compliance was corrected in a two step process. First, the State reviewed the Indicator 11 Summary Report generated by the STARS system to obtain a list of students that did not have an evaluation completed in the 60 day timeline. Second, the State reviewed the Indicator 11 Summary Report to determine if an evaluation date was entered for the student, even if the date was after the 60 day timeline. If the evaluation date was in the STARS system, the individual case of non-compliance was considered as corrected. If the evaluation date was not in the STARS system, the State contacted the LEA and requested the status of the evaluation. The State monitored the STARS system until each evaluation was completed. Step 2 is completed when all students identified in the first step have an evaluation completed within one year which means each individual case of non-compliance is corrected. The LEA had evaluation data entered in STARS for each individual case of non-compliance within one year, Step 2 was completed and each individual case of non-compliance was corrected.

FFY 2016

Findings of Noncompliance Verified as Corrected

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

The State verified that the 1 LEA which was the source of non-compliance is correctly implementing the regulatory requirements in a three step process. First, the LEA completed a Root Cause Analysis (RCA). The RCA requires the LEA to review LEA policies, practices and procedures to ensure compliance with 34 CFR § 300.301 (c)(1)(i) and identify any issues with the LEA's own policies, practices and procedures which are causing the non-compliance. The LEA submitted a completed RCA to the State. Second, the State reviewed the LEA's RCA along with the policies, practices and procedures. The State worked with the LEA to correct issues identified in the LEA and State review of the RCA and policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify that the LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, updated data submitted by the LEA in the STARS system, the State's data collection system, was reviewed by the State. The LEA had a score of 100% for Indicator 11 at the time of the data review. The above conditions were met for each of the three steps and the LEA was considered to be correctly implementing the regulatory requirements of 34 CFR § 300.301 (c)(1)(i).

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

The State verified that each individual case of non-compliance was corrected in a two step process. First, the State reviewed the Indicator 11 Summary Report generated by the STARS system to obtain a list of students that did not have an evaluation completed in the 60 day timeline. Second, the State reviewed the Indicator 11 Summary Report to determine if an evaluation date was entered for the student, even if the date was after the 60 day timeline. If the evaluation date was in the STARS system, the individual case of non-compliance was considered as corrected. If the evaluation date was not in the STARS system, the State contacted the LEA and requested the status of the evaluation. The State monitored the STARS system until each evaluation was completed. Step 2 is completed when all students identified in the first step have an evaluation completed within one year which means each individual case of non-compliance is corrected. The LEA had evaluation data entered in STARS for each individual case of non-compliance within one year, Step 2 was completed and each individual case of non-compliance was corrected.

FFY 2015

Findings of Noncompliance Verified as Corrected

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

The State verified that the 2 LEAs which are the source of non-compliance are correctly implementing the regulatory requirements in a three step process. First, each LEA completed a Root Cause Analysis (RCA). The RCA requires LEAs to review their policies, practices and procedures to ensure compliance with 34 CFR § 300.301 (c)(1)(i) and identify any issues with their own policies, practices and procedures which are causing the non-compliance. Each LEA submitted a completed RCA to the State. Second, the State reviewed each LEA's RCA along with the policies, practices and procedures. The State worked with each LEA to correct issues identified in the LEA and State review of the RCA and policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify that each LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, updated data submitted by each LEA in the STARS system, the State's data collection system, was reviewed by the State. Each LEA had a score of 100% for Indicator 11 at the time of the data review. The above conditions were met for each of the three steps and each LEA was considered to be correctly implementing the regulatory requirements of 34 CFR § 300.301 (c)(1)(i).

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

The State verified that each individual case of non-compliance was corrected in a two step process. First, the State reviewed the Indicator 11 Summary Report generated by the STARS system to obtain a list of students that did not have an evaluation completed in the 60 day timeline. Second, the State reviewed the Indicator 11 Summary Report to determine if an evaluation date was entered for the student, even if the date was after the 60 day timeline. If the evaluation date was in the STARS system, the individual case of non-compliance was considered as corrected. If the evaluation date was not in the STARS system, the State contacted the LEA and requested the status of the evaluation. The State monitored the STARS system until each evaluation was completed. Step 2 is completed when all students identified in the first step have an evaluation completed within one year which means each individual case of non-compliance is corrected. Each LEA had evaluation data entered in STARS for each individual case of non-compliance within one year, Step 2 was completed and each individual case of non-compliance was corrected.

11 - Prior FFY Required Actions

None

11 - OSEP Response

11 - Required Actions

Indicator 12: Early Childhood Transition

Instructions and Measurement

Monitoring Priority: 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	94.40%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	97.90%	96.73%	96.06%	99.48%	83.90%

Targets

FFY	2019
Target	100%

FFY 2019 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	1,258
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	51

c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	977
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.	94
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	110
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.	977	1,003	83.90%	100%	97.41%	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

26

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.

Twenty-six children were included in (a) but not included in b, c, d, e, or f. These children were served in Part C and referred to Part B for eligibility determination but were found to be non-eligible for special education services under Part B. The range of days beyond the timeline are from two days to one hundred twenty-four days. Seventy-five percent (75%) of the delays occurred prior to the start of the COVID-19 pandemic. The reasons for the delays can be attributed to the the shortage of qualified evaluators available in the State and also to gaps in the LEA's processes for evaluating students. Twenty-five (25%) percent of the delays occurred during the COVID-19 pandemic. The State closed schools for a three week period from March 16 to April 3, 2020. Following the school closure, LEAs started a distance learning model where students learned online which was in place for the remainder of the 2019-2020 school year. LEAs were informed that there were no waivers to the requirements granted during the school closure or distance learning.

Attach PDF table (optional)

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

State database that includes data for the entire reporting year

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

The state collects the data for Indicator 12 through the state database called the Student Teacher Accountability Reporting (STARS) System, four times each school year. State statute defines when the collection periods are, which are the 40th, 80th, 120th and End of Year reporting periods. LEAs upload their data into the STARS system which contains business rules that check the dates for the students third birthday and compares it to the date the child was found eligible for Part B and has an IEP developed and implemented, to ensure the requirement is met. State staff then run reports in the STARS system to ensure the LEAs have properly entered data and no errors remain. This process is completed each of the four reporting periods.

Provide additional information about this indicator (optional)

In FFY 2019, the numerator or the number of students found eligible for Part B, increased by 10% while the denominator decreased by 3.27%. This decrease in the denominator can be attributed to a 21.53% reduction in the number of students that were referred to Part C and determined to be NOT eligible and whose eligibility was determined prior to third birthday. There was also a 14.72% decrease in the number of children who were referred to Part C less than 90 days before their third birthdays. These decreases were offset by a 1.19% increase in the number of children who have been served in Part C and referred to Part B for Part B eligibility determination. Also, the number of parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied increased by 99.87%.

The COVID 19 pandemic had an impact on Indicator 12 as LEAs reported numerous causes in delays such as in-person evaluations were not feasible, Tribal communities were on a complete lock-down and thus students in those communities could not be evaluated. Obtaining signed parental consent was another issue especially when parents did have access to internet services which is an issue state-wide. To mitigate the impact on data collection, the State allowed for the use of electronic signatures and the use of on-line meeting platforms to collect data for eligibility determinations.

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
5	5	0	0

FFY 2018 Findings of Noncompliance Verified as Corrected

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

The State verified that the 5 LEAs which are the source of non-compliance are correctly implementing the regulatory requirements in a three step process. First, each LEA completed a Root Cause Analysis (RCA). The RCA requires LEAs to review their policies, practices and procedures to ensure compliance with 34 CFR § 300.124 (b) and identify any issues with their own policies, practices and procedures which are causing the non-compliance. Each LEA submitted a completed RCA to the State. Second, the State reviewed each LEA's RCA along with the policies, practices and procedures. The State worked with each LEA to correct any issues identified in the LEA and State review of the RCA and policies, practices and procedures by

developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify each LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, updated data submitted by each LEA in the STARS system, the State's data collection system, was reviewed by the State. The LEA must have a score of 100% for Indicator 12 at the time of the data review. Once the conditions are met for each of the three steps, an LEA is considered to be correctly implementing the regulatory requirements. Each of the 5 LEAs met these conditions for each of the three steps and are therefore, correctly implementing the regulatory requirements of 34 CFR § 300.124 (b).

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

The State verified that each individual case of non-compliance was corrected in a two step process. First, the State reviewed the Indicator 12 Summary Report generated by the STARS system to obtain a list of students who are found eligible for Part B but did not have an IEP developed and implemented by the student's third birthday. Second, the State reviewed the Indicator 12 Summary Report to determine if an IEP date was entered for the student, even if the date was beyond the child's third birthday. If the IEP development and implementation date was in the STARS system, the individual case of non-compliance was considered as corrected. If the IEP development and implementation date was not in the STARS system, the State contacted the LEA and requested the status of the IEP. The State monitored the STARS system until each child had an IEP developed and implemented. Step 2 is completed when all students identified in the first step have an IEP developed and implemented, which means each individual case of non-compliance was corrected in 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
FFY 2017	1	1	0

FFY 2017

Findings of Noncompliance Verified as Corrected

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

The State verified that the 1 LEA which was the source of non-compliance is correctly implementing the regulatory requirements in a three step process. First, the LEA completed a Root Cause Analysis (RCA). The RCA requires the LEA to review LEA policies, practices and procedures to ensure compliance with 34 CFR § 300.124 (b) and identify any issues with the LEA's own policies, practices and procedures which are causing the non-compliance. The LEA submitted a completed RCA to the State. Second, the State reviewed the LEA's RCA along with the policies, practices and procedures. The State worked with the LEA to correct any issues identified in the LEA and State review of the RCA and policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify the LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, updated data submitted by each LEA in the STARS system, the State's data collection system, was reviewed by the State. The LEA must have a score 100% for Indicator 12 at the time of the data review. Once these conditions are met for each of the three steps, an LEA is considered to be correctly implementing the regulatory requirements. The 1 LEA met the conditions for each of the three steps and is therefore, correctly implementing the regulatory requirements of 34 CFR § 300.124 (b).

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

The State verified that each individual case of non-compliance was corrected in a two step process. First, the State reviewed the Indicator 12 Summary Report generated by the STARS system to obtain a list of students who are found eligible for Part B but did not have an IEP developed and implemented by their third birthday. Second, the State reviewed the Indicator 12 Summary Report to determine if an IEP date was entered for the student, even if the date was beyond the child's third birthday. If the IEP development and implementation date is in the STARS system, the individual case of non-compliance is considered as corrected. If the IEP development and implementation date is not in the STARS system, the State will contact the LEA and request the status of the IEP. The State monitors the STARS system until each child has an IEP developed and implemented. Step 2 is completed when all students identified in the first step have an IEP developed and implemented, which means each individual case of non-compliance is corrected in one year.

12 - Prior FFY Required Actions

None

12 - OSEP Response

12 - Required Actions

Indicator 13: Secondary Transition

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Data Source

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

Measurement

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

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

Instructions

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

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

Targets must be 100%.

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

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

13 - Indicator Data

Historical Data

Baseline Year	Baseline Data
2009	98.45%

FFY	2014	2015	2016	2017	2018
Target	100%	100%	100%	100%	100%
Data	96.36%	87.35%	93.08%	95.87%	96.33%

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
1,443	1,478	96.33%	100%	97.63%	Did Not Meet Target	No Slippage

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

State database that includes data for the entire reporting year

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

The data is collected at the State level for each LEA with students age sixteen and above. A sample is drawn from the LEAs' 40 day student data reported in STARS, the State's data system. LEAs are required to submit IEPs to the State for the sample drawn. The State has a secure Special Education Monitoring site where LEAs upload the IEPs. The State reviews the IEPs to determine if each of the required eight components for compliance are documented in the student's IEP. IEPs that are compliant and those that are non-compliant are identified through this process.

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

If no, please explain

The State was in a multi-year process of implementing fourteen year old students with disabilities into the state's process for monitoring secondary transition. The first phase occurred in FFY2018 and it was to include fourteen year old students in the data gathered for Indicator 13 in STARS, the State's data system. In FFY 2019, the second phase occurred and IEPs for students with disabilities ages fourteen to fifteen were reviewed. The State has chosen to exclude fourteen year old students from the baseline data because it is not a Federal requirement. For this reason, the State maintains the data separate for the Federal and State requirements.

Provide additional information about this indicator (optional)

Over the past four years beginning in FFY 2016, the State has improved the State rate for secondary transition. In FFY 2016, the rate was 87.35%, in FFY 2017 the rate increased to 95.87%, FFY2018 the rate increased to 96.33% and then in FFY 2019 the rate increased to 97.62%. The State has implemented strong training programs for strengthening secondary transition including on-site technical support for LEAs.

Correction of Findings of Noncompliance Identified in FFY 2018

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

FFY 2018 Findings of Noncompliance Verified as Corrected

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

The State verified that the 8 LEAs which are the source of non-compliance, are correctly implementing the regulatory requirements in a three step process. First, each LEA completed a Root Cause Analysis (RCA). The RCA requires LEAs to review their policies, practices and procedures to ensure compliance with 34 CFR § 300.43 and identify any issues with their own policies, practices and procedures which are causing the non-compliance. Each LEA submitted a completed RCA to the State. Second, the State reviewed each LEA's RCA along with the policies, practices and procedures. The State worked with each LEA to correct any issues identified in the LEA and State review of the RCA and policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify each LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, updated data submitted by each LEA in the STARS system, the State's data collection system, was reviewed by the State. The LEA must have a score of 100% for Indicator 13 at the time of the data review. The LEAs met the conditions for each of the three steps and are considered to be correctly implementing the regulatory requirements of 34 CFR § 300.43.

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

The State verified that each individual case of non-compliance was corrected in a two step process. First, the State reviewed the Indicator 13 Summary Report generated by the STARS system, to obtain a list of students that did not have each of the eight components of Indicator 13 completed. Second, the State reviewed the Indicator 13 Summary Report to determine if each component required by 34 CFR § 300.43 is present on each IEP. If the completion date for each required component is in the STARS system, the individual case of non-compliance is considered as corrected. If the date for each required component is not in the STARS system, the State contacted the LEA and requested the status of the transition IEP. The State monitors the STARS system until each required component is completed. Step 2 is completed when all students identified in the first step have all the eight required components present in each IEP. Each IEP contained all 8 components and therefore each individual case of non-compliance was determined to be corrected in 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
FFY 2017	2	2	0

FFY 2017

Findings of Noncompliance Verified as Corrected

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

The State verified that the 8 LEAs which are the source of non-compliance are correctly implementing the regulatory requirements in a three step process. First, each LEA completed a Root Cause Analysis (RCA). The RCA requires LEAs to review their policies, practices and procedures to ensure compliance with 34 CFR § 300.43 and identify any issues with their own policies, practices and procedures which are causing the non-compliance. Each LEA submitted a completed RCA to the State. Second, the State reviewed each LEA's RCA along with the policies, practices and procedures. The State

worked with each LEA to correct any issues identified in the LEA and State review of the RCA and policies, practices and procedures by developing a Corrective Action Plan (CAP). The State identified action steps, timelines for completion and the documentation required to verify each LEA has completed the action step(s). Once all action steps of the CAP were completed, the CAP was closed. Third, updated data submitted by each LEA in the STARS system, the State's data collection system, was reviewed by the State. The LEA must have a score 100% for Indicator 13 at the time of the data review. The LEAs met the conditions for each of the three steps and are considered to be correctly implementing the regulatory requirements of 34 CFR § 300.43.

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

The State verified that each individual case of non-compliance was corrected in a two step process. First, the State reviewed the Indicator 13 Summary Report generated by the STARS system to obtain a list of students that did not have each of the eight components of Indicator 13 completed. Second, the State reviewed the Indicator 13 Summary Report to determine if each component required by 34 CFR § 300.43 is present on each IEP. If the completion date for each required component is in the STARS system, the individual case of non-compliance is considered as corrected. If the date for each required component is not in the STARS system, the State will contact the LEA and request the status of the transition IEP. The State monitors the STARS system until each required component is completed. Step 2 is completed when all students identified in the first step have all the eight required components present in each IEP. Each IEP contained all 8 components and therefore each individual case of non-compliance was determined to be corrected in one year.

13 - Prior FFY Required Actions

None

13 - OSEP Response

13 - Required Actions

Indicator 14: Post-School Outcomes

Instructions and Measurement

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

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

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

Data Source

State selected data source.

Measurement

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

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

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

Instructions

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

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

I. Definitions

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

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

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

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

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

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

II. Data Reporting

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

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

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

III. Reporting on the Measures/Indicators

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

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

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

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

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

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

14 - Indicator Data

Historical Data

Measure	Baseline	FFY	2014	2015	2016	2017	2018
A	2009	Target >=	49.00%	49.00%	49.00%	49.00%	49.00%
A	48.00%	Data	43.26%	42.85%	41.13%	40.01%	36.80%
B	2009	Target >=	76.00%	76.00%	76.00%	76.00%	76.00%
B	75.00%	Data	76.10%	75.34%	76.39%	75.47%	73.08%
C	2009	Target >=	80.00%	80.00%	80.00%	80.00%	80.00%
C	79.00%	Data	80.71%	81.37%	80.94%	82.82%	77.76%

FFY 2019 Targets

FFY	2019
Target A >=	49.00%
Target B >=	76.00%
Target C >=	80.00%

Targets: Description of Stakeholder Input

The New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the post school outcome target. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets.

FFY 2019 SPP/APR Data

Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	1,584
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	564
2. Number of respondent youth who competitively employed within one year of leaving high school	621
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).	44
--	----

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)	564	1,584	36.80%	49.00%	35.61%	Did Not Meet Target	Slippage
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1,185	1,584	73.08%	76.00%	74.81%	Did Not Meet Target	No Slippage
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	1,258	1,584	77.76%	80.00%	79.42%	Did Not Meet Target	No Slippage

Part	Reasons for slippage, if applicable
A	The number of total respondents decreased by 8.49%, while the number of enrolled in higher education decreased by 11.45% while the rates in B. and C increased. More students are turning to the work force over enrolling in post-secondary education.

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.

Hispanic student responses were slightly below responses from other ethnic groups. There was a 4.7% difference between total amount of surveys collected, however that is statistically insignificant due to large number of students in the Hispanic category.

Primary disability category, Emotional Disturbance (ED) was below responses from those in other categories. There was 4.0% difference between total and the number collected from students in the ED category. This is consistent with previous year and can be attributed to the low attendance rate and high drop-out rate for students in this disability category.

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 anticipates these numbers to decrease over the next few years due to the COVID-19 pandemic. Less students may choose to enroll in virtual learning being offered at colleges and universities due the challenges distance learning has on students with disabilities. Jobs available for students may also be scarce as the pandemic has closed many business in the State.

To mitigate the impact of the COVID-19 pandemic, the State will work with post-secondary stakeholder groups including the Division of Vocational Rehabilitation and Higher Education Institutions to ensure that there are supports in place for students with disabilities that choose to enroll in post-secondary education during the distance model of learning. The State will work with LEAs to make available supports for finding available jobs and possibly securing a job prior to leaving high school.

The state will also consider developing an electronic survey completed through an application to increase the number of responses received and to ensure the data is representative of all demographics in the state.

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 ED Facts Metadata and Process System (EMAPS)).

Measurement

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

Instructions

Sampling is not allowed.

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

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

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

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

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

15 - Indicator Data

Select yes to use target ranges

Target Range is used

Prepopulated Data

Source	Date	Description	Data
SY 2019-20 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/04/2020	3.1 Number of resolution sessions	2
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	2

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 New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the resolution session target. The panel consists of seven parents, representatives from two (2) disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBV), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three (3) years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets.

Historical Data

Baseline Year	Baseline Data
2005	100.00%

FFY	2014	2015	2016	2017	2018
Target >=	55.00% - 70.00%	55.00% - 70.00%	55.00% - 70.00%	55.00% - 70.00%	55.00% - 70.00%
Data	100.00%	100.00%	100.00%		100.00%

Targets

FFY	2019 (low)	2019 (high)
Target	55.00%	70.00%

FFY 2019 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2018 Data	FFY 2019 Target (low)	FFY 2019 Target (high)	FFY 2019 Data	Status	Slippage
2	2	100.00%	55.00%	70.00%	100.00%	Met Target	No Slippage

Provide additional information about this indicator (optional)

15 - Prior FFY Required Actions

None

15 - OSEP Response

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 ED Facts Metadata and Process System (EMAPS)).

Measurement

Percent = $(2.1(a)(i) + 2.1(b)(ii))$ 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 is 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	23
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	11
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	5

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

NO

Targets: Description of Stakeholder Input

The New Mexico IDEA panel which consists of eighteen members total provides input on the targets, including the education environment target. The panel consists of seven parents, representatives from two disability parent support groups, and one representative from each of the following: Higher Education, New Mexico Corrections, Homeless Liaison, New Mexico School for the Blind (NMSBVI), Regional Education Cooperative (REC, Division of Vocational Rehabilitation, Part C, Special Education Director and School Administrator. The panel was provided with information on the State's performance for the previous three years. The performance was compared to the established targets to determine if the State is on the trajectory to meet the targets, if performance is below the established targets or if performance is higher. The IDEA panel will be meeting again to continue the work.

The New Mexico Legislative Education Study Committee (LESC) was provided with the indicator targets and data as well. The New Mexico Secretary of Education and Special Education Director reviewed this information with the LESC who requested additional follow-up data. The LESC has a vested interest in improving outcomes for students with disabilities.

Special Education Directors from the school districts and charter schools in the state had the opportunity to provide input on the established targets.

Historical Data

Baseline Year	Baseline Data
2005	61.30%

FFY	2014	2015	2016	2017	2018
Target >=	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%	75.00% - 85.00%
Data	75.86%	72.50%	78.05%	68.29%	71.43%

Targets

FFY	2019 (low)	2019 (high)
Target	75.00%	85.00%

FFY 2019 SPP/APR Data

2.1.a.i Mediation agreements related to due process complaints	2.1.b.i Mediation agreements not related to due process complaints	2.1 Number of mediations held	FFY 2018 Data	FFY 2019 Target (low)	FFY 2019 Target (high)	FFY 2019 Data	Status	Slippage
11	5	23	71.43%	75.00%	85.00%	69.57%	Did Not Meet Target	Slippage

Provide reasons for slippage, if applicable

In one due process case, the parties participated in mediation but were unable to resolve the dispute in mediation. However, the parties were able to later resolve before the due process hearing took place. This one case impacted our percentage and caused slippage. If we had been able to count this case, we would have had 17 mediated agreements related to due process. This would have changed out FFY 19 percentage to 73.91%.

Provide additional information about this indicator (optional)**16 - Prior FFY Required Actions**

None

16 - OSEP Response**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:

Deborah Dominguez-Clark

Title:

Director of Special Education

Email:

deborah.clark@state.nm.us

Phone:

505-819-1337

Submitted on: