



**Wyoming  
Annual Performance Report  
For Special Education  
FFY 2009**

Special Programs Division  
320 West Main Street  
Riverton, WY 82501  
<http://edu.wyoming.gov>

**February 1, 2011**

**Wyoming  
Annual Performance Report for Special Education  
FFY 2009 (2009-2010)**

**Submitted to the  
Office of Special Education Programs  
U.S. Department of Education  
February 1, 2011**

**Special Programs Division  
320 West Main Street  
Riverton, WY 82501  
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### Part B State Annual Performance Report (APR) for FFY 2009

#### Overview of the Annual Performance Report Development:

In accordance with the Individuals with Disabilities Education Act (IDEA) of 2004, States must have in place a State Performance Plan (SPP) that guides the State's efforts to implement the requirements and intent of Part B and explains the process by which the State will implement improvement activities. Additionally, each state is required to report annually to its stakeholders the progress or slippage results for each indicator in the SPP. The SPP plays an essential role in the work that Wyoming does in meeting the general supervision requirements of IDEA. The APR improvement strategies and/or improvement activities impact our work by providing opportunities to evaluate the effectiveness of state initiatives and program as well as determine their relevance for students with disabilities. These evaluations can unveil new areas upon which to focus our efforts.

The APR for FFY 2009 provides a description of the process that Wyoming used to develop this report, including how and when the state will report to the public on: 1) Wyoming's progress and/or slippage in meeting the "measurable and rigorous targets" found in the SPP; and 2) the performance of each of the state's local educational agencies on the targets in the SPP. Appendix A includes reporting of the status of each improvement activity in the APR and describes the results of all completed and deleted activities (with the rationale for deletion).

#### Wyoming's Broad Stakeholder Input

The Wyoming Department of Education (WDE) Special Programs Division staff, and the Early Intervention and Education Program (EIEP) staff of the Developmental Disabilities Division (DDD) in the Wyoming Department of Health collected and analyzed data for the development of the Annual Performance Report for FFY 2009.

To meet the requirements of IDEA 2004, the WDE Special Programs Division annually solicits broad stakeholder involvement with the State Performance Plan (see Overview of the State Performance Plan Development, Wyoming's Broad Stakeholder Input, page 1). The Stakeholder Group serves as the guiding group for the WDE's Continuous Improvement Focused Monitoring Process established in FFY 2005, as well as the broad stakeholder representation for the SPP/APR. Local special education directors, teachers and parents, members of the Wyoming Advisory Panel for Students with Disabilities, members of the Wyoming Association of Special Education Administrators, members of the Wyoming Association of Secondary School Principals, members of the Wyoming Association of Elementary and Middle School Principals, members of the Wyoming Chapter of the Council for Exceptional Children (CEC), representatives from the Parent Information Center (PIC), persons with disabilities, building principals and district superintendents all have representation in this broad stakeholder group. In the past, stakeholder participation at face-to-face meetings was very low and WDE was concerned about the low turnout to meetings during the year. In order to increase involvement, the WDE established alternate ways to gather input such as video conferencing and accepting written comment.

The Wyoming Advisory Panel for Students with Disabilities (State Advisory Panel operating in accordance with 34 C.F.R. §§300.167 through 300.169) also reviewed the SPP/APR indicators and data throughout the FFY 2009. Parents of children with disabilities make up the majority of the panel's membership which brings a very valuable perspective to the analysis of the data and subsequent improvement activities. At the January 2011 meeting, the APR and SPP documents were distributed to the panel in its initial draft for additional input prior to submission to the Office of Special Education Programs (OSEP).

The EIEP worked with additional stakeholders specifically around indicators six through eight and twelve, as well as the indicators pertinent to monitoring and accountability required for the state's preschool population. This stakeholder group included members of the State Early Intervention Council (EIC), the Child Development Center (CDC) directors and family members from each of the state's fourteen regions. The EIC membership

includes parents who have young children with special needs, directors from the CDCs, service providers from the CDCs, state legislators, staff from higher education, PIC, consultants, representatives from both the Wyoming Department of Education and the Wyoming Department of Health, preschool providers, and other key community representatives.

### **Ensuring Data Accuracy**

The Special Programs Division works in collaboration with the Careers/Technology/Data and Standards/Assessment/Accountability Divisions of the WDE in the collection of data regarding students with disabilities ages three through twenty-one and the ensuing verification of data accuracy. Since the implementation of a unique student identification system (Wyoming Integrated Statewide Education Data System – WISE), the WDE has the capability to cross validate the various data collections that come into the state from the local school districts. As a result, the state has evidence that the data submitted by the school districts continue to become more accurate with each subsequent collection.

The Wyoming Department of Education continues its concerted effort to ensure valid and accurate data collection from the local school districts and other public agencies. These efforts include the work of the WDE Data Quality Council which includes members from every division of the WDE. This council meets on a regular basis to discuss necessary improvements to current data collections, any technical assistance needed by district/agency personnel and clarification or revision of data definitions.

### **Wyoming State Performance Plan and Annual Performance Report Dissemination to the Public**

The State Performance Plan continues to be the driving force for all of the major projects, initiatives, and monitoring efforts of the Special Programs Division. After revisions are made to the SPP, it will again be placed on the WDE website for public review. The Annual Performance Report (APR) for FFY 2009 will accompany the revised SPP on the WDE website: [http://edu.wyoming.gov/Programs/special\\_education/spp\\_apr.aspx](http://edu.wyoming.gov/Programs/special_education/spp_apr.aspx). Both documents will be sent to each school district and the EIEP through the on-line process used to provide superintendents and special education directors with memoranda and information from the WDE (Superintendents' Memos).

Each member of the Wyoming Advisory Panel for Students with Disabilities will receive a copy of the SPP and APR documents at their meeting in February 2011. The parent advocacy groups, as well as Protection and Advocacy Inc., will be sent information about where the documents can be accessed. WDE will work with PIC to send pertinent information to parents of students with disabilities across the state. The WDE Special Programs Division includes, and will continue to include, a review of the indicators in the SPP when conducting training regarding IDEA 04 and the revised (June 2009) Wyoming Education Rules, Chapter 7: Services for Children with Disabilities.

Presentations at various venues (such as the School Improvement Conference and Special Education Leadership Symposium) will include data from the APR and the justification for progress or slippage related to the targets established in the SPP. Improvement activities and their effect on improving outcomes for students with disabilities will continue to be reviewed and revised as needed through a data-based, decision-making process.

### **Annual Report to the Public Regarding the Measurable and Rigorous Targets**

In accordance with 20 U.S.C. 1416(b)(C)(ii), the WDE reports annually to the public on the performance of each local educational agency and intermediate education unit on the targets in the State Performance Plan. Additionally, the WDE Special Programs Division continues to report annually in June to the general public, using the Annual Performance Report and individual school district "Report Cards."

The District Report Cards may be accessed on the WDE website at [http://edu.wyoming.gov/Programs/special\\_education/spp\\_apr.aspx](http://edu.wyoming.gov/Programs/special_education/spp_apr.aspx). Each District Report Card lists whether or not a district met the indicator targets, compares the district rates to the State rates and to the actual targets, as well as compares the district rates to other districts in the population cohort. The District Report Cards, data from the self-assessment component of the monitoring system, and results of on-site monitoring visits are used to make *determinations* for each of the local school districts as outlined in proposed Chapter 7 Rules Section 9: General Supervision. Determinations are reported annually to each district no later than 120 days from the submission of the APR.

In addition, Report Cards are reviewed annually by the WDE and stakeholders as part of the Continuous Improvement Focused Monitoring Process to determine the need for technical assistance and professional development in the process of correcting noncompliance. These efforts are conducted for the purpose of general oversight for ensuring positive functional and academic outcomes for children with disabilities ages three through twenty-one in the State of Wyoming.

### **Effective System of General Supervision: Part B**

Under federal law, Wyoming is required to have an effective system of general supervision that monitors the implementation of the Individuals with Disabilities Education Act (IDEA) by local education agencies. Therefore, the WDE has worked diligently to develop a system that enforces the requirements through data-based monitoring and ensures continuous improvement. While the state has had independent components in place for some time, WDE has worked to ensure that they connect, interact and articulate to form a comprehensive system of general supervision. In addition, attention has been given to how the components interact within a fiscal and/or school year construct in order to achieve improved outcomes and results for Wyoming's students with disabilities.

As a result of a self-evaluation of our current system, WDE has developed a comprehensive system of general supervision that does the following:

- Supports practices that improve educational results and functional outcomes for children and youth with disabilities;
- Uses multiple methods to identify and correct noncompliance as soon as possible but no later than one year after the noncompliance is identified; and
- Utilizes mechanisms to encourage and support improvement and to enforce compliance.

Evidence is provided in this document of the general supervision components informing the work of the Special Programs Division throughout the Indicator reports of data, resulting progress and/or slippage and the revised improvement activities. Those components include: 1) the State Performance Plan; 2) Policies, Procedures, and Effective Implementation; 3) Data on Processes and Results; 4) Targeted Technical Assistance and Professional Development; 5) Effective Dispute Resolution; 6) Integrated Monitoring Activities; 7) Improvement, Correction, Incentives and Sanctions; and 8) Fiscal Management.

The data collected from one component inform the decision-making processes of the other components. For example, the findings from both on-site monitoring and district self-assessment conducted annually inform the WDE's targeted technical assistance and professional development efforts. The distribution and use of federal funds by the local districts are also tied to student outcome data and the results of district implementation of IDEA (including correction of noncompliance and professional development needs). Dispute resolution data identify patterns or trends of ineffective implementation of local policies and procedures, inform corrective actions, improvement activities, and targeted technical assistance and professional development.

Our Continuous Improvement Focused Monitoring on-site visits are used to monitor individual districts with regard to specific performance issues, with particular attention paid to requirements most closely associated

with improving student outcomes and educational results. This includes the use of protocols designed to investigate compliance hypotheses which may explain inadequate performance on one or more SPP indicators. Continuous Improvement Focused Monitoring activities are geared toward identifying solutions and implementing change to enhance and improve performance as well as correct noncompliance.

**Improvement Activity Tables**

Wyoming's previous APR submissions have included improvement activities in each indicator area of the report. However, beginning with the FFY 2009 APR, the state has opted to include all improvement activities in an appendix (Appendix A) for easier reference. The Improvement Activity Table lists each of the activities organized by general improvement area. The table also gives a brief description of improvement strategies, resources accessed and the Indicator(s) for which each activity is designed to improve. There are eight improvement areas: 1) Technical Assistance/Professional Development, 2) Transition, 3) LRE, 4) Pre-Service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. As shown below, each improvement strategy is color-coded according to whether the activity is completed/deleted, continuing, revised, or new:

Light pink	Completed/Deleted
Light green	Continuing
Light blue	Revised
Light purple	New

Beginning with the FFY 2010 APR, WDE will be changing how it presents the improvement activities as part of the APR. In recent years, the Special Programs Division has focused its efforts to improve direct, intermediate and long term outcomes for students with disabilities in Wyoming's schools. The work of the Special Programs Division can be divided into eight focus areas: monitoring, dispute resolution, technical assistance/professional development, fiscal, data, SPP/APR, incentives/sanctions and policy/procedures. Each area has been organized to maximize the resources and processes of WDE in order to assist Wyoming's forty-eight public school districts in providing IDEA Part B services to its 12,405 special education students.

## Monitoring Priority: FAPE in the LRE

**Indicator –1:** Percent of youth with IEPs graduating from high school with a regular diploma.

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

**Measurement:** Wyoming uses the graduation rate calculation and timeline established for AYP purposes and described in the State’s Accountability Workbook approved by the USDE. The rate incorporates 4 years worth of data and thus, is an estimated cohort rate. It is calculated by dividing the number of students who receive a regular diploma by the sum of dropouts from grade 9 through 12 in consecutive years, plus the number of students completing high school.

Students Receiving a Regular Diploma in Year 4

Dropouts (Grade 9 Year 1 + Grade 10 Year 2 + Grade 11 Year 3 + Grade 12 Year 4) + Students Completing High School Year 4

This formula used by the Wyoming Department of Education for calculating graduation rates is an “exiter” rate. The denominator is the total of all “exiters” from a school over a 4 year period for a grade cohort. The exiters are the 9<sup>th</sup> grade drop-outs 3 years ago, the 10<sup>th</sup> grade drop-outs 2 years ago, 11<sup>th</sup> grade drop-outs last year, and this year’s 12<sup>th</sup> grade drop-out plus completers. These are all the students that “exited” from education for that cohort. The numerator is the count of this year’s regular diploma recipients.

**Data Source:** Wyoming uses the same data reported in the *NCLB* Consolidated State Performance Report (CSPR).

FFY	Measurable and Rigorous Target
2009 (2009 – 2010)	49.5% of youth with IEPs graduating from high school with a regular diploma

**Target Data for FFY 2009:**

**Display 1-1: Graduation Rate for Students with Disabilities**

	Students w/Disabilities
Number of students who graduated	584
Number of Students with Disabilities Eligible to Graduate	881
<b>Percent of students with disabilities who graduated</b>	<b>66.29%</b>

There is a data lag for Indicator 1; the data reported for FFY 2009 reflects 2008-2009 data and aligns with data reported in the *NCLB* Consolidated State Performance Report (CSPR).

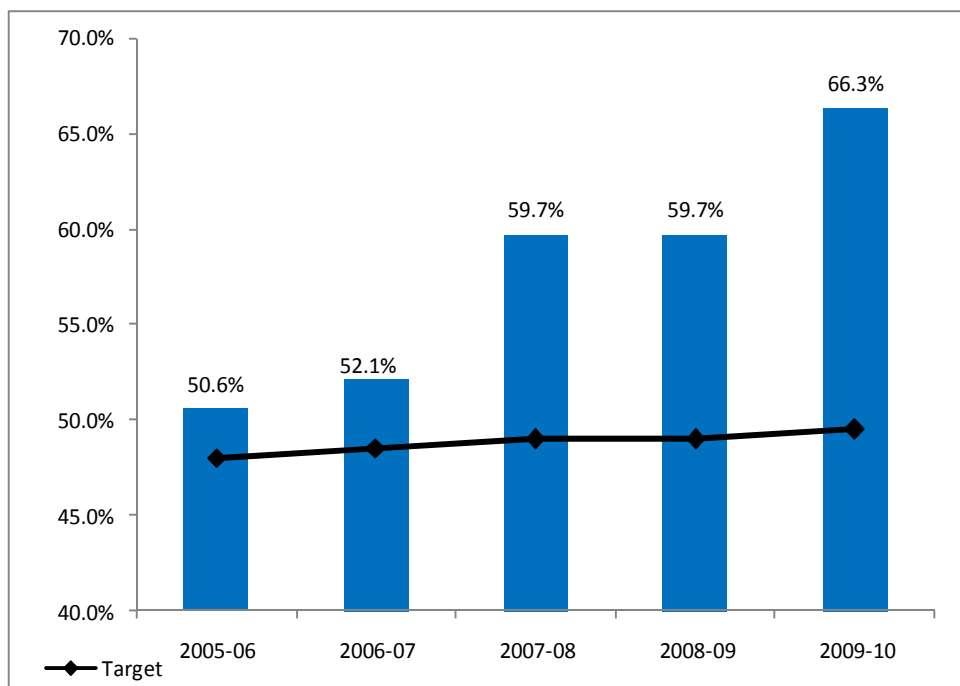


**Display 1-2: Graduation Rates for Students with Disabilities and All Students, Results over Time**

School Year	Overall Graduation Rates *	Number of Overall Graduates	Graduation Rates for Students with Disabilities	Number of Graduating Students with Disabilities
2005-2006	81.6%	5,942	50.5%	462
2006-2007	79.1%	5,409	52.1%	474
2007-2008	79.29%	5,483	59.72%	553
2008-2009*	79.29%	5,483	59.72%	553
2009-2010	81.35%	5,480	66.29%	584

\*Beginning in the 2008-2009 school-year WDE used the OSEP “data lag” option.

**Display 1-3: Percent of Special Education Students Graduating – Results Over Time**



**Valid and Reliable Data:**

The scores reported for Indicator 1 have been obtained through the Wyoming Department of Education (WDE) Data Division after they have been through a rigorous process of validation and adjudication. The data is the same as that reported in the *NCLB* CSPR. Wyoming has aligned the data source and measurement with ESEA, therefore the figures used in this indicator are from 2008-2009 graduation data and reflect a one year data lag.

### **Wyoming Graduation Requirements:**

The requirements for earning a high school diploma from any school district in the State of Wyoming are as follows:

- The successful completion of 4 years of English; 3 years of mathematics; 3 years of science; 3 years of social studies.
- Satisfactory passing an examination of the principles of the Constitution of the United States and the State of Wyoming.
- Evidence of proficient performance, at a minimum, on the uniform student conduct and performance standards for the common core of knowledge and skills.

Upon the completion of these requirements, a student receives a regular diploma with one of the following endorsements stated on the student's transcript: Advanced Endorsement; Comprehensive Endorsement; or General Endorsement. Beginning with students graduating in 2006 and thereafter, each student shall demonstrate proficient performance on five out of the nine content and performance standards for language arts, mathematics, science, social studies, health, physical education, foreign language, career/vocational education and fine and performing arts.

### **Explanation of Progress that Occurred for FFY 2009:**

For FFY 2009, WDE is reporting 66.29% of youth with IEPs graduated from high school with a regular diploma. The target of 49.5% for Indicator 1 was met and exceeded.

As indicated in Display 1-2 and Display 1-3, the graduation rate for students with disabilities has increased by nearly 30% since FFY 2005. The graduation rate for students with disabilities is still lower than it is for all students. However, the gap has decreased from 30 percentage points in 2005-2006 to 15 percentage points in 2009-2010.

WDE includes graduation rates as a goal in its Five-Year Strategic Plan. In addition, graduation rates are a focus of the Governor's office and the State Board of Education. As a result, statewide technical assistance and professional development opportunities for all educators are being provided annually. Increasing the awareness of educators on key issues that influence graduation rates is seen as essential for overcoming the obstacles in programming effectively for students' needs K-12.

As required by the October 2009 announcement, WDE will be migrating towards implementing the "Uniform, Comparable Graduation Rate." Wyoming's first step in enabling calculation of the new USDE rate began with student level reporting of graduates and dropouts following the 2006-2007 school year. The WDE continues to work in partnership with districts and national student information system (SIS) vendors to enable the comprehensive collection of student exit status necessary to meet federal requirements.

Wyoming will officially begin reporting under USDE guidelines effective with the class of 2011. As graduation rates are cohort based, therefore requiring tracking (data collection) of a student population over four years, the phase-in process has already begun. As such, the accuracy of Wyoming's reported rates will continue to grow in response to changes in data collection methodology and increasing data quality at districts.

### **Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities is listed in Appendix A, and consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has

specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

## APR Template – Part B (4)

## Wyoming

**Monitoring Priority:** FAPE in the LRE

**Indicator –2:** Percent of youth with IEPs dropping out of high school.

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

**Measurement:** Wyoming uses the same dropout data used in the *NCLB* Consolidated State Performance Report (CSPR). The dropout rates are calculated using the annual event school dropout rate for students leaving a school in a single year determined in accordance with the National Center for Education Statistics' (NCES) Common Core of Data (CCD) for the previous school year (SY 2007-2008).

**Data Source:** Wyoming uses the data reported in the cumulative completer collection compiled by WDE on an annual basis.

FFY	Measurable and Rigorous Target
2009 (2009 – 2010)	13.4% of youth with IEPs dropping out of high school

**Actual Target Data for FFY 2009:**

**Display 2-1: Drop-out Rate for Students with Disabilities**

	Students w/Disabilities
Number of students who dropped out	167
Number of Students with Disabilities in the Cohort Denominator	3,027
<b>Percent of students with disabilities who dropped out</b>	<b>5.52%</b>

There is a data lag for Indicator 2; the data reported for FFY 2009 reflects 2008-2009 data and aligns with data reported in the CSPR.

## APR Template – Part B (4)

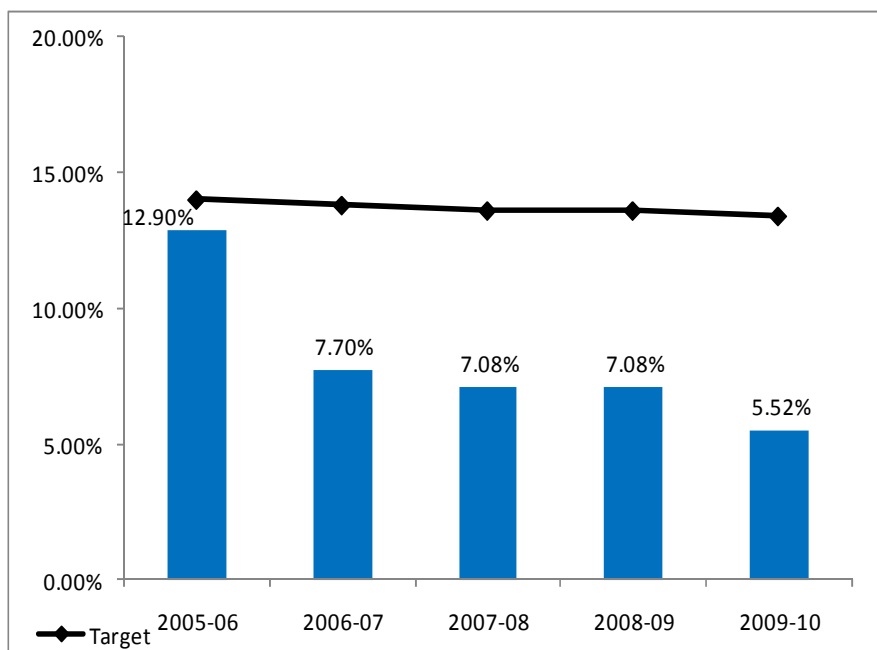
## Wyoming

**Display 2-2: Drop-out Rates for Students with Disabilities and All Students, Results over Time**

School Year	Overall Dropout Rates	Overall Number of Dropouts	Dropout Rates for Students with Disabilities	Number of Dropouts for Students with Disabilities
2005-2006	5.6%	1,499	12.9%	419
2006-2007	5.3%	1,384	7.7%	228
2007-2008	5.06%	1,365	7.08%	218
2008-2009*	5.06%	1,365	7.08%	218
2009-2010	3.81%	1,000	5.52%	167

\*Beginning in the 2008-2009 school-year WDE used the OSEP “data lag” option.

**Display 2-3: Percent of Special Education Students Dropping Out – Results Over Time**



### Valid and Reliable Data:

The scores reported for Indicator 2 are obtained through the WDE Data Division after they have been through a rigorous process of validation and adjudication. The data is the same as that reported in the ESEA CSPR. Wyoming has aligned the data source and measurement with ESEA; therefore the figures used in this indicator are from 2008-2009 dropout data and reflect a one-year data lag.

Wyoming's annual dropout rate is calculated by taking one year's dropout counts from grades 9-12, divided by an average enrollment using October 1 enrollments and completer figures. The denominator is half the sum of the following: student count for grades 9-12 of the previous school year, the student count for grades 10-12 of the current year, completers for the current year and dropouts for the current year. The assumption of the denominator is that the sum of each of the four elements captures each student in a two-year period twice.

## APR Template – Part B (4)

## Wyoming

Therefore, dividing by two ensures there are no duplicate counts. The numerator is the number of dropouts for the current year.

The current dropout/graduation formulas exclude students that have been verified as transferring out of the district. The formulas include students that transfer into the district and complete or dropout as indicated in the formula. The dropout formula is the same for students with and without disabilities.

The dropout formula is:

$$\frac{2008-2009 \text{ Dropouts Grades 9-12}}{([9-12 \text{ enrollment}_{\text{Oct 1, 2008}}] + [10-12 \text{ enrollment}_{\text{Oct 1 2009}}] + [\text{Completers}_{2008-2009}] + [9-12 \text{ Dropouts}_{2008-2009}]) / 2}$$

### Explanation of Progress that Occurred for FFY 2009:

For FFY 2009, WDE is reporting 5.52% of students with disabilities who dropped out of high school. The target of 13.4% for Indicator 2 was met.

As indicated in Display 2-2 and 2-3, the drop-out rate for students with disabilities in Wyoming has decreased by over fifty percent since 2005-2006. The exit data for students with disabilities each year (June WDE-427 data collection for students with disabilities) shows a significant number of students take longer than four years to graduate from high school. These students are not counted as completers in the current dropout rate formula. Additionally, students with disabilities who age out and/or receive a Certificate of Attendance or Achievement are considered dropouts in this formula. The dropout rate for students with disabilities is still slightly higher than that for all students, however, the gap has decreased from 7 percentage points in FFY 2005 to less than 2 percentage points in FFY 2009.

Across LEAs, Wyoming's drop-out rate is comparatively small statewide. However, within the central part of the state there is one county comprised of eight school districts, three of which are located on the Wind River Indian Reservation (WRIR). The data for Native American students is consistent with other neighboring states which have large Native American populations: graduation rates are very low and dropout rates are higher compared to non-native populations. In May 2009, the State Superintendent of Public Instruction and the Deputy Superintendent met with tribal leaders of the Joint Business Council of the Eastern Shoshone and Northern Arapaho Tribes to discuss educational issues regarding children on the WRIR. The WDE initiated the formation of the Tribal Triad Committee, which encompasses state government-tribal government-community partnerships in order to improve educational outcomes for children residing on and near the WRIR. The Triad committee held community meetings to gather information on educational issues or concerns. From these meetings, the Triad focused on two strategic goals: 1) increasing the enrollment number of children ages 5 – 18 in schools, and 2) increasing the daily attendance rate. The Triad Committee consists of the eight school districts on and near the WRIR, various tribal community agencies, and WDE staff. The Triad meets regularly with the goal of organizing community partners to work together to problem-solve ways to get youth who are no longer attending school to re-enroll and attend more consistently. The Triad project hopes that by increasing the number of Native youth enrolled in school and increasing attendance, the state will see a decrease in the number of students dropping out of school. The community partners are encouraged to keep data and report back to the WDE.

### Discussion of Improvement Activities Completed:

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5)

## **APR Template – Part B (4)**

## **Wyoming**

Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

## Monitoring Priority: FAPE in the LRE

**Indicator 3:** Participation and performance of children with IEPs on statewide assessments:

- A. Percent of the districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP targets for the disability subgroup.
- B. Participation Rate for children with IEP's.
- C. Proficiency rate for children with IEPs against grade level, modified and alternate academic achievement standards.

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

**Measurement:**

- A. AYP percent = [(# of districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP targets for the disability subgroup) divided by the (total # of districts that have a disability subgroup that meets the State's minimum "n" size)] times 100.
- B. Participation rate percent = [(# of children with IEPs participating in the assessment) divided by the (total # of children with IEPs enrolled during the testing window, calculated 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.
- C. Proficiency rate percent = [(# of children with IEPs enrolled for a full academic year scoring at or above proficient) divided by the (total # of children with IEPs enrolled for a full academic year, calculated separately for reading and math)].

**Data Source:** AYP data used for accountability reporting under Title 1 of the ESEA.

FFY	Measurable and Rigorous Target
<b>2009</b> (2009-2010)	<b>3A:</b> Language Arts: Elementary – <b>82%</b> , Middle – <b>64%</b> , High – <b>64%</b> Math: Elementary – <b>82%</b> , Middle – <b>69%</b> , High – <b>50%</b>
<b>2009</b> (2009-2010)	<b>3B:</b> Reading Participation – <b>100%</b> Math Participation – <b>100%</b>
<b>2009</b> (2009-2010)	<b>3C:</b> Reading Proficiency: Elementary – <b>53.60%</b> , Middle – <b>56.33%</b> , High – <b>65.60%</b> Math Proficiency: Elementary – <b>49.20%</b> , Middle – <b>50.20%</b> , High – <b>57.20%</b>



## APR Template – Part B (4)

## Wyoming

Actual Target Data for FFY 2009:

**Display 3-1: Indicator 3A - Districts Meeting AYP**

2008-2009	% Districts Meeting AYP * and # of Districts Meeting AYP/Districts with a subgroup n>30 by grade level**			
	Language Arts (%)	Language Arts (n)	Math (%)	Math (n)
Elementary	54.3%	19/35	100.0%	35/35
Middle	66.7%	14/21	76.2%	16/21
High	100.0%	5/5	80.0%	4/5

\*There are 48 school districts that serve grades K-8 and 46 districts that serve grades 9-11.

\*\*The denominator in this category represents the number of districts who meet the subgroup “n” requirement of 30 students. Not all 48 districts meet this requirement

Please note that the data reported in Displays 3-1 and 3-2 is 2008-2009 data. WDE received a waiver from the USED, dated November 16, 2010, that not only requests but requires that the WDE not use FFY 2009 statewide assessment data for accountability purposes—with the exception of alternative assessment results. Due to a statewide failure of Wyoming’s online assessment delivery system during the 2009-2010 testing window, the WDE requested the one-year waiver and received approval (see Appendix B for a copy of OESE’s waiver letter).

**Display 3-2: Indicator 3A - Five of six targets for 3A were met.**

	Language Arts	Math
Elementary	Did not meet target	Met target
Middle	Met target	Met target
High	Met target	Met target

**Display 3-3: Indicator 3B – Participation Rates**

Indicator 3B Measurement	2009-2010 IEP Assessment Participation						
	Subject	Reading			Math		
	Grade	Elementary	Middle	High	Elementary	Middle	High
	Exempt	0	0	0	0	0	0

## APR Template – Part B (4)

## Wyoming

	Not Tested	0	0	0	0	0	0
b #	Tested Regular Assessment Without Accommodations	n/a	n/a	n/a	n/a	n/a	n/a
c #	Tested Regular Assessment With Accommodations	n/a	n/a	n/a	n/a	n/a	n/a
d #	Tested Alternate Assessment at Grade Level Standards	0	0	0	0	0	0
e #	Tested Alternate Assessment at Alternate Standards	247	132	49	246	132	48
<b>(b+c+d+e) #</b>	<b>TOTAL Tested</b>	<b>247</b>	<b>132</b>	<b>49</b>	<b>246</b>	<b>132</b>	<b>48</b>
a #	TOTAL Tested + Not Tested + Exempt	247	132	49	246	132	48
b / a %	Tested Regular Assessment Without Accommodations	n/a	n/a	n/a	n/a	n/a	n/a
c / a %	Tested Regular Assessment With Accommodations	n/a	n/a	n/a	n/a	n/a	n/a
d / a %	Tested Alternate Assessment at Grade Level Standards	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
e / a %	Tested Alternate Assessment at Alternate Standards	100%	100%	100%	100%	100%	100%
<b>(b+c+d+e) / a %</b>	<b>Participation Rate - Overall IEP %</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

## APR Template – Part B (4)

## Wyoming

**Display 3-4: Indicator 3B – Six out of the six targets for 3B were met.**

	Reading	Math
Elementary	Met target	Met target
Middle	Met target	Met target
High	Met target	Met target

The WDE met the targets set for participation in reading and math assessments. However, since the state is only reporting results based on those students who took the alternate assessment (due to the waiver granted by OESE), participation rates do not include the numbers of students who took the Regular Assessment.

**Display 3-5: Indicator 3C - Proficiency Rate**

Indicator 3C Measurement	2009-2010 Students with Disability Statewide Assessment Proficiency						
	Subject	Reading			Math		
	Grade	Elementary	Middle	High	Elementary	Middle	High
b #	Tested PROFICIENT Regular Assessment Without Accommodations	N/A	N/A	N/A	N/A	N/A	N/A
c #	Tested PROFICIENT Regular Assessment With Accommodations	N/A	N/A	N/A	N/A	N/A	N/A
d #	Tested PROFICIENT Alternate Assessment at Grade Level Standards	0	0	0	0	0	0
e #	Tested PROFICIENT Alternate Assessment at Alternate Standards	143	76	27	127	79	28
(b+c+d+e) #	TOTAL Tested PROFICIENT or ABOVE	143	76	27	127	79	28

**APR Template – Part B (4)****Wyoming**

a #	TOTAL Tested Proficient or Non- Proficient	247	132	49	246	132	48
(b+c+d+e) / a %	TOTAL % Tested Proficient or Above	57.9%	57.6%	55.1%	51.6%	59.9%	58.3%

**Display 3-6: Indicator 3C - Five out of the six targets for 3C were met.** Wyoming met its proficiency target in all areas except high school reading. The targets for this indicator mirror those established in the state's accountability workbook for the purposes of NCLB. The WDE Special Programs Division examines data for growth in each category even when targets are not achieved. Improvement Activities will also continue and/or be adjusted in order to improve proficiency rates for Wyoming's students with disabilities.

	Reading	Math
Elementary	Met target	Met target
Middle	Met target	Met target
High	Did not meet target	Met target

**Valid and Reliable Data:**

The scores that are reported here are obtained through the WDE Standards, Assessment & Accountability Division after they have been through a rigorous process of validation and adjudication. Measurements A, B, and C are based on scores from the Proficiency Assessment for Wyoming Students (PAWS) and the PAWS-ALT. Test administration follow strict procedures which are monitored by WDE staff. The same scores are reported in the Consolidated State Performance Report to the OESE of the USDE. The Special Programs Division is confident in their accuracy.

Wyoming has chosen to continue to report AYP Participation and Proficiency data using the protocol established in alignment with the state's accountability workbook approved by the OESE. We believe combining or establishing a different reporting method for AYP Participation or Proficiency would be confusing to the public and stakeholders.

Wyoming encountered substantial difficulties during the administration of the regular spring 2010 statewide assessments required by ESEA. In particular, Wyoming's online assessment system experienced a significant malfunction, and consequently, no valid achievement data from the 2009 – 2010 regular test administration can be recovered. Moreover, the malfunction prevented Wyoming from determining student progress toward achieving the State's academic standards (which is the additional indicator for AYP determinations at the elementary and middle school grade levels), and participation rates cannot be calculated. As a result, Wyoming cannot use FFY 2009 regular assessment data in reporting on Measurements A and B of this indicator. This

dilemma prompted the WDE's waiver request in July of 2010, and the waiver was granted in November of the same year. However, Wyoming's alternate assessment (PAWS-ALT) is not administered through an online platform. Results of the alternate assessment administered in FFY 2009 *are* included in Measurements B and C.

**Explanation of Progress that Occurred for FFY 2009:**

*Please note that for indicator 3A, the FFY 2009 results are actually the FFY 2008 results (see previous note). As can be seen in Display 3-4, progress was made on the percent of districts meeting AYP for the student with disabilities subgroup from FFY 2007 to FFY 2008 for five of the six groups. Only middle school math showed a decreased percentage of districts meeting AYP for the students with disabilities subgroup. However, scores decreased in FFY 2007. All groups show an increased percentage of districts meeting AYP since FFY 2005. FFY 2006 represents an oddity because in FFY 2006, PAWS was administered in both the winter and spring. Districts then "counted" the higher of each student's two scores. However, since then, the PAWS was administered in the spring only, giving students only one opportunity to acclimate to the assessment and demonstrate their mastery of the state standards in these content areas.*

Please note that for Indicator 3B, the FFY 2009 data are based solely on the state's participation rates in the PAWS-ALT alternate statewide assessment. As mentioned above, significant technical difficulties with the state's online testing platform for the regular assessment invalidated the calculation of regular assessment participation rates. Wyoming's statewide assessment in FFY 2010 will be administered entirely via paper and pencil to avoid further technical problems with the online testing platform. PAWS-ALT participation rates are the only valid participation rates that Wyoming is able to report for FFY 2009.

*Additionally, for Indicator 3C, the FFY 2009 results are based only on PAWS-ALT scores. Wyoming's technical difficulties with the online assessment in FFY 2009 resulted in the invalidation of significant numbers of regular statewide assessment results—for students with and without disabilities. As advised by USED in the waiver letter of November 2010, the state is only using the results of its alternate assessment in calculating Measurement C of this indicator*

**Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

## Monitoring Priority: FAPE in the LRE

## Indicator 4: 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; and  
(20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

## Measurement:

- A. Percent = [(# of districts 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)] times 100.

For the purpose of measurement, WDE uses a minimum “n” size that is defined as at least 2 students must have been suspended or expelled for more than 10 days for that percentage to be considered as having a significant discrepancy. All districts’ rates were examined for significant discrepancy

The Wyoming Department of Education has defined significant discrepancy as any district that suspends or expels two or more students and at a rate of five percent or more of its students with disabilities.

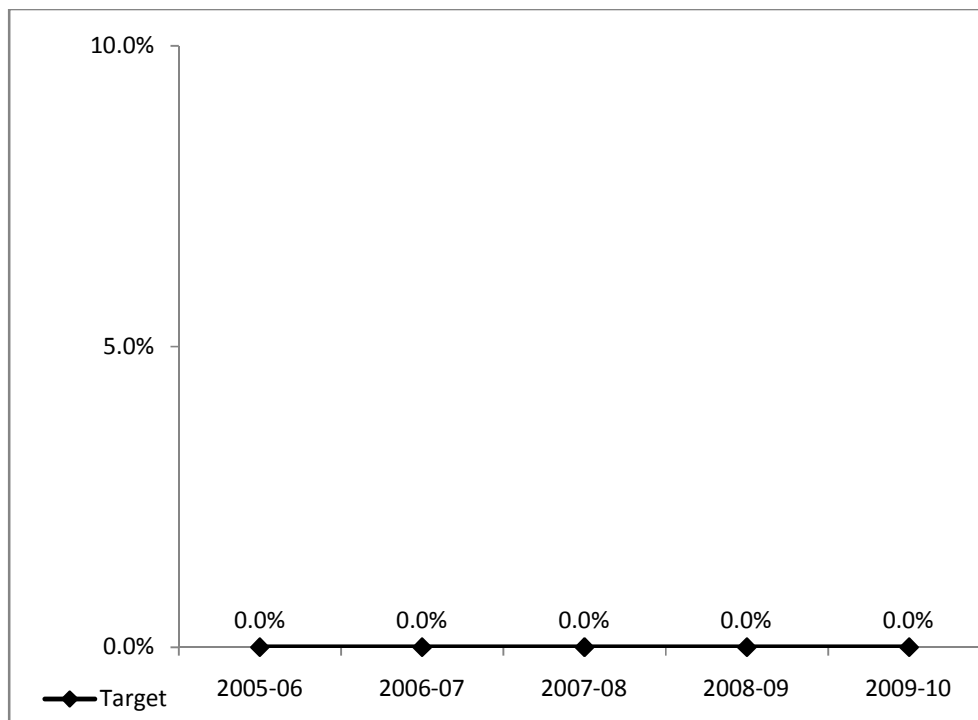
**Data Source:** Data for collecting and reporting under section 618.

FFY	Measurable and Rigorous Target
<b>2009</b> (2009-2010)	0% of districts with significant discrepancies in rates of suspension and expulsions.

## Actual Target Data for FFY 2009 (using 2008-2009 data):

## Display 4-1: LEAs with Significant Discrepancy in Rates for Suspension and Expulsion

Year	Total Number of LEAs	Number of LEAs that have Significant Discrepancies	Percent
FFY 2009 (using 2008-2009 data)	48	0	0.0%

**Display 4-2: Percent of Districts with Significant Discrepancy – Results Over Time**

Beginning in the 2008-2009 school-year WDE used the OSEP “data lag” option.

#### **Valid and Reliable Data:**

Data on suspensions and expulsions of children with disabilities is derived from Section 618 data submitted annually by districts to the WDE Data Division. All data is verified through a rigorous process of validation and adjudication.

#### **Explanation of Progress that Occurred in FFY 2009:**

For FFY 2009, WDE is reporting 0% of districts with significant discrepancies in rates of suspension and expulsions of greater than 10 days in a school year for students with IEPs. The target of 0% for Indicator 4A was met.

States were advised to examine the data from the previous year for comparison between the rates of suspensions and expulsions for children with IEPs among all LEA’s within the State. For the FFY 2009, data reported for Indicator 4A is from the 2008-2009 school year.

For Indicator 4A, 35 Wyoming school districts reported one or fewer suspensions or expulsions for students with disabilities. The fourteen developmental preschool regions reported zero suspensions or expulsions for students with disabilities. Therefore, the percent of Wyoming school districts identified as having a significant discrepancy in suspension/expulsion rates for students with disabilities is zero percent. The State has maintained its 0% rate for the last five school years.

**Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

**Correction of FFY 2008 Findings of Noncompliance:**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009) using 2007-2008 data	0
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	0
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

**Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):**

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of FFY 2008 findings <u>not</u> yet verified as corrected [(4) minus (5)]	0

**Actions Taken if Noncompliance Not Corrected:**

Wyoming did not have any findings of noncompliance for the FFY 2008; therefore, no action was needed to correct noncompliance.

**Verification of Correction (either timely or subsequent):**

Wyoming did not have any findings of noncompliance for the FFY 2008; therefore, verification of correction was not necessary.



## APR Template – Part B (4)

## Wyoming

### Correction of Remaining FFY 2007 Findings of Noncompliance:

1. Number of remaining FFY 2007 findings (identified in July 1, 2007 – June 30, 2008 using 2006-2007 data), noted in OSEP's June 1, 2010, FFY 2008 APR response table for this indicator	0
2. Number of remaining FFY 2007 findings the State has verified as corrected	0
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)] .	0

### Correction of Any Remaining Findings of Noncompliance from FFY 2006 or Earlier:

Wyoming did not have any findings of noncompliance from FFY 2006 or earlier, therefore no correction was necessary.

## APR Template – Part B (4)

## Wyoming

### Monitoring Priority: FAPE in the LRE

**Indicator – 5:** Percent of children with IEPs aged 6 through 21:

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

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

#### Measurement:

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

**Data Source:** Section 618 data submitted annually by districts to WDE Data Division.

FFY	Measurable and Rigorous Target		
	5A	5B	5C
2009 (2009 – 2010)	57.5% Regular Classrooms >80%	9.39% Regular Classrooms <40%	2.42% Out of District

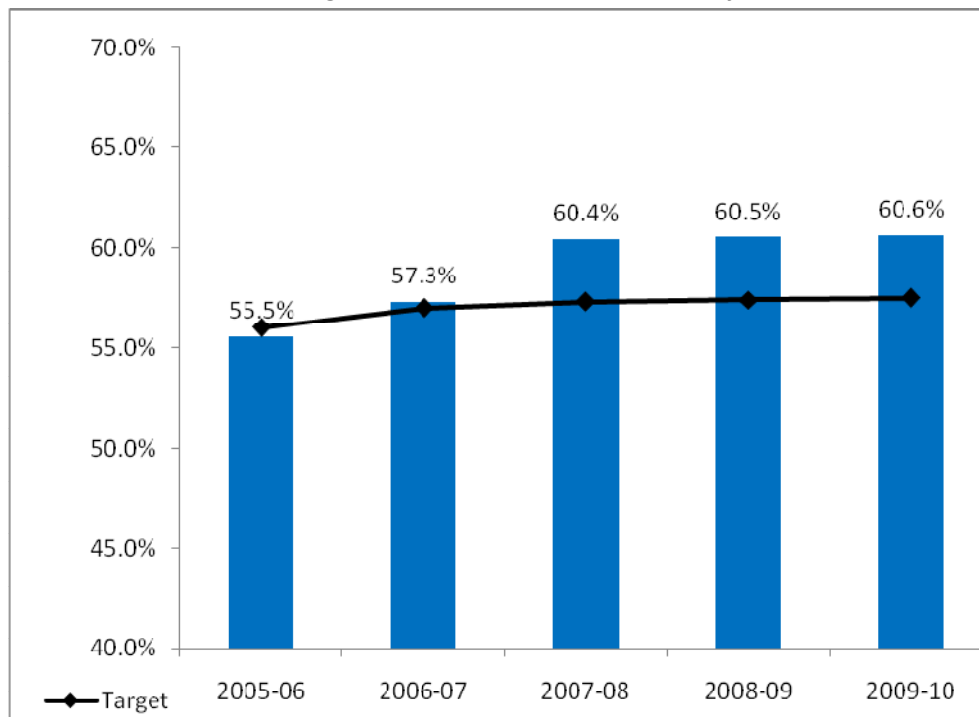
**Actual Target Data for FFY 2009:**

**Display 5-1: Percent of Students with Disabilities in Various Settings**

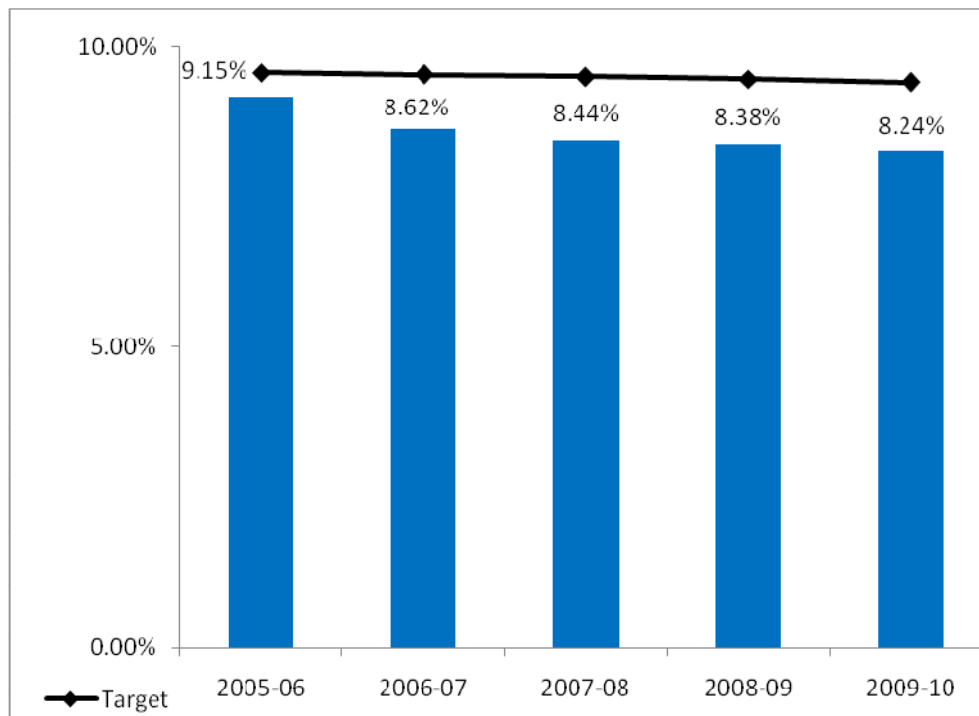
	5A	5B	5C
Total number of students	12,321	12,321	12,321
Number of students in this setting	7465	1015	171
Percentage of students in this setting	60.59%	8.24%	1.39%
Met Target	Yes	Yes	Yes

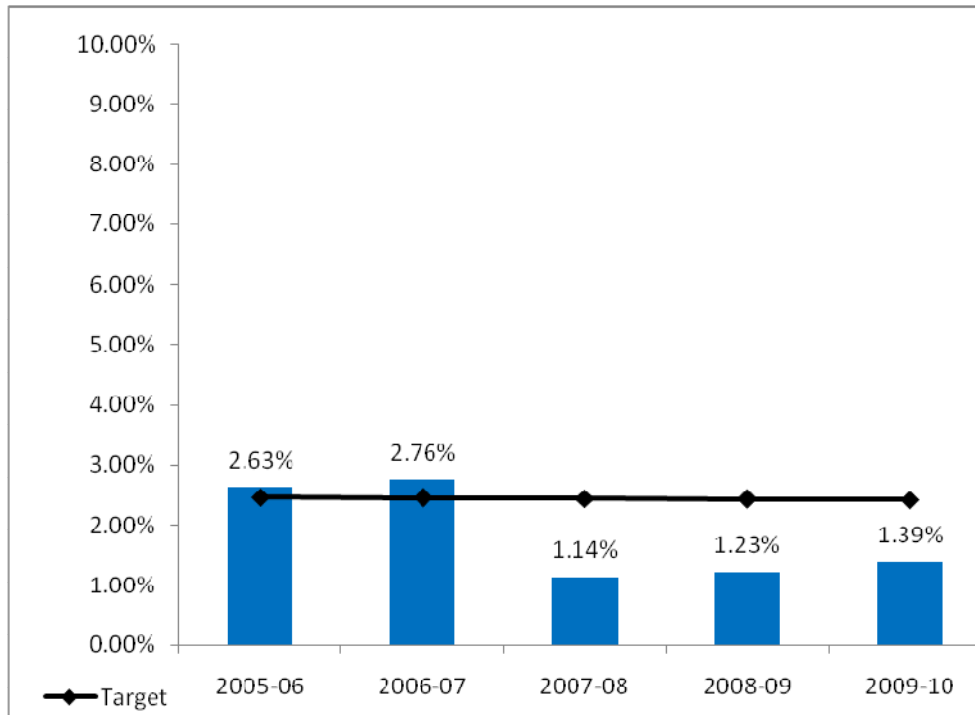
Display 5-2: Percent of Students with Disabilities in Various Settings – Results Over Time

Indicator 5A: Inside the Regular Class 80% or More of the Day



Indicator 5B: Inside the Regular Class Less than 40% of the Day



**Indicator 5C: In Separate Schools, Residential Facilities, or Homebound Placements**

Prior to FFY 2007, court-placed students were not subtracted from the calculation. Therefore, trend data from FFY 2005 and FFY 2006 are not comparable to FFY 2007, FFY 2008 and FFY 2009.

**Valid and Reliable Data:**

The data reported for Indicator 5 does not match the data in the 618 Data Table 3. For purposes of Indicator 5C, the WDE does not count those students that were placed by the courts (Court Order Placed Students or COPS) but these students are included in the data reported in Table 3 of the 618 data. By including only students placed by IEP Teams, WDE is focusing on the procedures and practices that are within the control of the LEAs. Stakeholders also pointed out that students parentally placed in private schools are also not being placed by district IEP teams. Therefore, these students are also removed from the data reported in Indicator 5C. All data are verified through a rigorous process of validation and adjudication.

**Explanation of Progress and Slippage that Occurred for FFY 2009:**

For FFY 2009, WDE is reporting 60.59% of students with disabilities are in regular classrooms greater than 80% of their school day; 8.24% of students with disabilities are in regular classrooms less than 40% of their school day; 1.39% of students with disabilities are in out of district placements. WDE met the target for Indicator 5A by reporting a percentage greater than 57.5%. WDE also met the targets for 5B and 5C by reporting a percentage less than 9.39% for 5B and 2.42% for 5C.

The data in Display 5-2 shows the percentage of students who spend a majority of their school day in the regular classroom environment has increased every year for the last five years. During the 2009 FFY, over 60% of Wyoming children with disabilities were included in a general education class for greater than 80% of their school day. The percentage of students in separate classrooms has also steadily decreased over the same time. FFY 2009 saw only 8.24% of Wyoming children with disabilities educated in separate classrooms or in a general

education class for less than 40% of their school day. The percentage of students in separate facilities in FFY 2009 is slightly higher than the percentage in FFY 2008 but is still below the target of 2.42%.

The WDE has developed a collaborative effort with the Department of Family Services, the Juvenile Justice system, and the Department of Health to review the processes involved in working with students who are either court placed or at risk of being court placed in residential placements. WDE is seeking to improve the process and the outcomes for children in these settings, and the state continues to monitor to ensure the provision of FAPE for students placed by the courts in residential settings.

**Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities and the deleted activities; the second table (if applicable) contains the new improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

## Monitoring Priority: FAPE in the LRE

**Indicator 7:** 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))

### Measurement:

- A. Positive social-emotional skills (including social relationships)
- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy)
- 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 =  $\left[ \frac{\text{(\# of preschool children who did not improve functioning)}}{\text{(\# of preschool children with IEPs assessed)}} \right] \text{ times } 100.$
- b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers =  $\left[ \frac{\text{(\# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers)}}{\text{(\# of preschool children with IEPs assessed)}} \right] \text{ times } 100.$
- c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it =  $\left[ \frac{\text{(\# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it)}}{\text{(\# of preschool children with IEPs assessed)}} \right] \text{ times } 100.$
- d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers =  $\left[ \frac{\text{(\# of preschool children who improved functioning to reach a level comparable to same-aged peers)}}{\text{(\# of preschool children with IEPs assessed)}} \right] \text{ times } 100.$
- e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers =  $\left[ \frac{\text{(\# of preschool children who maintained functioning at a level comparable to same-aged peers)}}{\text{(\# of preschool children with IEPs assessed)}} \right] \text{ times } 100.$

### 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 =  $\frac{\text{\# of preschool children reported in progress category (c) plus \# of preschool children reported in category (d)}}{\text{\# of preschool children reported in progress category (a) plus \# of preschool children reported in progress category (b) plus \# of preschool children reported in progress category (c) plus \# of preschool children reported in progress category (d)}}$  times 100.

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.

**Data Source:** Data for Indicator 7 is taken from the State data system. Progress data are reported on all children who enter and exit the Part B 619 program; because data is collected from all children and not a sample of children, the EIEP and WDE do not need to be concerned about any response bias or non-representativeness.

Measurable and Rigorous Targets			
FFY2009	Positive Social-Emotional Skills	Acquiring and Using Knowledge and Skills	Taking Appropriate Action to Meet Needs
1. Of those children who entered the program below age expectations, the percent who substantially increased their rate of growth by the time they exited.	60.68%	61.12%	63.81%
2. Percent of children who were functioning at a level comparable to same-aged peers by the time they exited.	56.87%	54.77%	67.05%

#### Actual Target Data for FFY 2009:

#### Display 7-1: Targets and Actual Data for Preschool Children Exiting in FFY 2009 (2009-10)

	Positive Social-Emotional Skills		Acquiring and Using Knowledge and Skills		Taking Appropriate Action to Meet Needs	
	Target	Actual	Target	Actual	Target	Actual
1. Of those children who entered the program below age expectations, the percent who substantially increased their rate of growth by the time they exited.	60.68%	<b>69.72%</b>	61.12%	<b>67.13%</b>	63.81%	<b>73.07%</b>
2. Percent of children who were functioning at a level comparable to same-aged peers by the time they exited.	56.87%	<b>63.00%</b>	54.77%	<b>56.60%</b>	67.05%	<b>71.26%</b>

#### Display 7-2: Number and Percentage of Children in Each Progress Category and Summary Statement Calculations for Preschool Children Exiting in FFY 2009

## APR Template – Part B (4)

## Wyoming

	Positive Social-Emotional Skills		Acquiring and Using Knowledge and Skills		Taking Appropriate Action to Meet Needs	
	# of children	% of children	# of children	% of children	# of children	% of children
<b>a</b> - Children who did not improve functioning	16	1.30%	15	1.21%	18	1.46%
<b>b</b> - Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	265	21.46%	291	23.56%	198	16.03%
<b>c</b> - Children who improved functioning to a level nearer to same-aged peers but did not reach it	176	14.25%	230	18.62%	139	11.26%
<b>d</b> - Children who improved functioning to reach a level comparable to same-aged peers	471	38.14%	395	31.98%	447	36.19%
<b>e</b> - Children who maintained functioning at a level comparable to same-aged peers	307	24.86%	304	24.62%	433	35.06%
<b>Total</b>	1235	100.0%	1235	100.0%	1235	100.0%
<b>Summary Statements:</b>						
1. Of those children who entered the program below age expectations, the percent who substantially increased their rate of growth by the time they exited.		69.72%		67.13%		73.07%
2. Percent of children who were functioning at a level comparable to same-aged peers by the time they exited.		63.00%		56.60%		71.26%

**Display 7-3: Summary Statement - Results Over Time**

	Positive Social-Emotional Skills			Acquiring and Using Knowledge and Skills			Taking Appropriate Action to Meet Needs		
	2007-08	2008-09	2009-10	2007-08	2008-09	2009-10	2007-08	2008-09	2009-10
<b>Number of Children:</b>	293	953	1,235	293	953	1,235	293	953	1,085
1. Of those children who entered the program below age expectations, the percent who substantially increased their rate of growth by the time they exited.	73.89%	60.68%	69.72%	73.58%	61.12%	67.13%	74.01%	63.81%	73.07%
2. Percent of children who were functioning at a level comparable to same-aged peers by the time they exited.	59.73%	56.87%	63.00%	65.75%	54.77%	56.60%	70.98%	67.05%	71.26%

Note: In 2007-08, only a sample of exiting students had both entering and exiting COSFs due to the gradual phase-in of the data collection.



**Valid and Reliable Data:**

Progress data are reported on all children who enter and exit the Part B 619 program. Because data are collected from all children and not a sample of children, the EIEP and WDE have eliminated any potential response bias or non-representativeness.

To ensure that the data reported on the COSF are reliable and valid, EIEP examined the supporting documentation on the COSF and how it corresponded with the outcomes rating given the child. For example, if a child receives an overall rating of 6 or 7 on the COSF, then the supporting documentation was verified to check age-level skills the child demonstrated. If the supporting documentation included only foundational skills, EIEP staff contacted the rater of the COSF for additional explanation and reconciliation.

**Explanation of Progress or Slippage that Occurred for FFY 2009:**

For FFY 2009, WDE and the EIEP are reporting that six of six targets were met. As noted in Display 7-3, from FFY 2008 to FFY 2009, scores increased in all areas. Scores from FFY 2007 are based on only a subset of exiting students due to the gradual phase-in of the COSF data collection process and thus are not as robust as those reported in the most recent two years. For each of the three outcomes areas, more than 67% of exiting children increased their rate of growth by the time they exited. For each of the three outcomes areas, at least 56% of exiting children were functioning at a level comparable to same-aged peers at the time they exited. The increase in scores from FFY 2008 to FFY 2009 could possibly be attributed to a number of factors including, improved targeted technical assistance to the state's CDCs, an increase in professional development opportunities for preschool staff, feedback from monitoring activities and collection of more valid and reliable data. The EIEP uses a web-based program to collect data on the COSFs. Results are examined by the EIEP and the regional Child Development Centers to look for any areas of strengths or concerns. The EIEP continues to monitor the validity and reliability of data collected by the COSFs.

**Discussion of Improvement Activities Completed:**

The EIEP continues to provide on-going training and technical assistance to the fourteen Regional Child Development Centers. Twice a year the EIEP staff monitors the COSF data system for valid and reliable data and the completion of individual Child Outcome Summary Forms. This is our third year of collecting the COSFs on a web-based data system. This system provides a unique identification number to all children which allows the EIEP to monitor individual children's COSFs.

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

**Monitoring Priority: FAPE in the LRE**

**Indicator - 8:** 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))

**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.

**Data Source:** Wyoming uses sampling for data collection with the parent survey. The survey is completed by a stratified, representative sample of parents from each LEA in the State.

FFY	Measurable and Rigorous Target
<b>2009</b> (2009 – 2010)	<b>54.55%</b> of parents with a child receiving special education services will report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

**Actual Target Data for FFY 2009:**

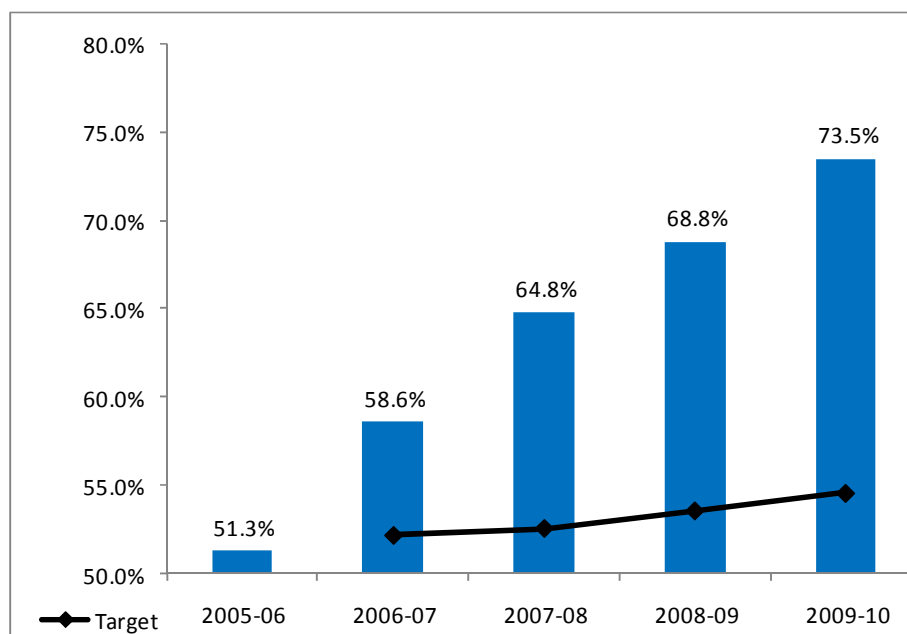
**Display 8-1: Percent of Parents Who Report that the School Facilitated Their Involvement**

	FFY 2009
Total number of Parent respondents	771
Number who reported school facilitated their involvement	567
Percentage who reported school facilitated their involvement	73.5%

**Display 8-2: Percent of Parents Who Report that the School Facilitated Their Involvement, Results Over Time**

	FFY2005	FFY2006	FFY2007	FFY2008	FFY2009
Total number of Parent respondents	429	759	783	770	771
Number who reported school facilitated their involvement	223	445	507	530	567
Percentage who reported school facilitated their involvement	51.9%	58.6%	64.8%	68.8%	73.5%

**Display 8-3: Percent of Parents Who Report that the School Facilitated Their Involvement - Results Over Time**



**Valid and Reliable Data:**

In FFY 2009, the survey was distributed to a stratified, representative sample of 3,571 parents of children receiving special education services. A total of 771 surveys were returned for a response rate of 21.6%.

To arrive at the percent of parents who report that the school facilitated their involvement, a “percent of maximum” scoring procedure was used. Each survey respondent received a percent of maximum score based on their responses to all 25 items. A respondent who rated their experiences with the school a “6” (Very Strongly Agree) on each of the 25 items received a 100% score; a respondent who rated their experiences with the school a “1” (Very Strongly Disagree) on each of the 25 items received a 0% score. A respondent who rated their experiences with the school a “4” (Agree) on each of the 25 items received a 60% score. (Note: a respondent who, on average rated, their experiences a “4”, e.g., a respondent who rated 7 items a “4”, 9 items a “3” and 9 items a “5,” would also receive a percent of maximum score of 60%.) A parent who has a percent of maximum score of 60% or above was identified as one who reported that the school facilitated his/her involvement. A 60% cut-score is representative of a parent who, on average, agrees with each item. As such, the parent is agreeing that the school facilitated their involvement.

The representativeness of the surveys was assessed by examining the demographic characteristics of the children of the parents who responded to the survey to the demographic characteristics of all special education students. This comparison indicates the results are representative (1) by geographic region where the child attends school; (2) by the race/ethnicity of the child; (3) by the grade level of the child; and (4) by the primary disability of the child. For example, 26% of the parents who returned a survey indicated that their children's primary disability is a speech/language impairment, and 29% of special education students have a speech impairment; 33% of the parents who returned a survey indicated that their children's primary disability is a learning disability, and 35% of special education students have a learning disability. Furthermore, 87% of parent respondents indicated that their student is White, and 81% of special education students are White. Parents from each district responded to the survey, with response rates by district ranging from 3.5-37.5%.

**Explanation of Progress or Slippage that Occurred for FFY 2009:**

For FFY 2009, WDE is reporting 73.5% of parents with a child receiving special education services reported that school facilitated their involvement as a means of improving services and results for children with disabilities. WDE exceeded the target of 54.55%.

As indicated in Display 8-2, the percentage of parents who reported that the school facilitated their involvement increased from 68.8% in FFY 2008 to 73.5% FFY 2009. This increase may be attributed to an improvement in the quantity and quality of targeted technical assistance provided to Wyoming's LEAs, the state's Advisory Panel for Students with Disabilities, and parent advocacy groups in an attempt to increase parental involvement in the special education process.

**Preschool Measurable and Rigorous Targets for Percentage of Parents who State that the Preschool Facilitated their Involvement:**

FFY	Measurable and Rigorous Target Preschool Settings (3 – 5 year olds)
<b>2009</b> (2009 – 2010)	<b>73.2%</b> of parents with a child receiving special education services will report that preschools facilitated parent involvement as a means of improving services and results for children with disabilities.

**Actual Target Data for FFY 2008 for Preschool:**

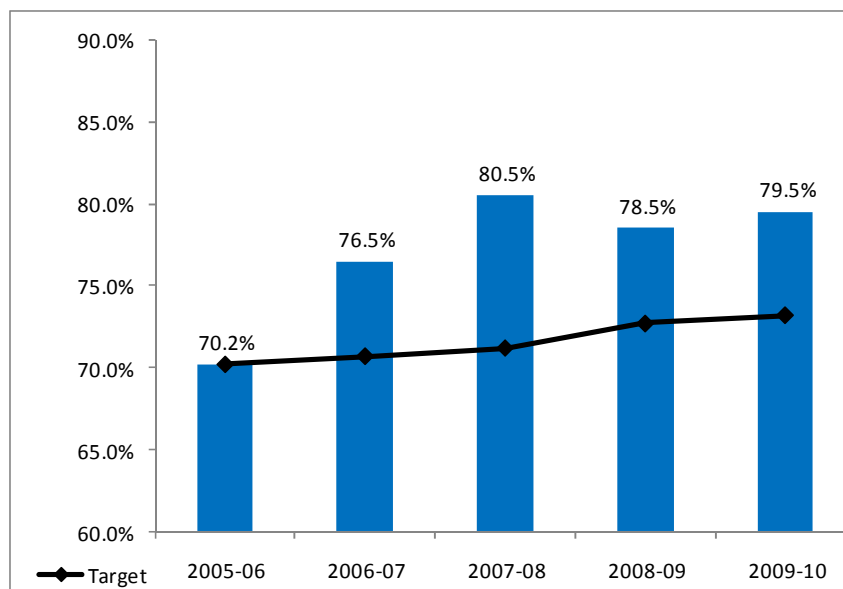
**Display 8-4: Percent of Parents Who Report that the Preschool Facilitated Their Involvement**

	FFY 2009
Total number of Parent respondents	1252
Number who reported school facilitated their involvement	995
Percentage who reported school facilitated their involvement	79.5%

**Display 8-5: Percent of Parents Who Report that the Preschool Facilitated Their Involvement, Results Over Time**

	FFY2005	FFY2006	FFY2007	FFY2008	FFY2009
Total number of Parent respondents	309	972	1008	1177	1252
Number who reported school facilitated their involvement	217	744	811	924	995
Percentage who reported school facilitated their involvement	70.2%	76.5%	80.5%	78.5%	79.5%

**Display 8-6: Percent of Parents Who Report that the Preschool Facilitated Their Involvement - Results Over Time**



**Valid and Reliable Data:**

In FFY 2009, the surveys were distributed in person by local CDC staff in conjunction with IEP meetings. Surveys were distributed to parents whose child had been enrolled in the CDC for at least six months. CDC directors ensured that parents were provided with a private space to complete the survey and provided an envelope in which to seal their responses. A total of 1,252 surveys were returned. During FFY 2009, 2,717 children were enrolled in the Part B 619 program; thus, the estimated response rate is 46.1%. However, not all of these children were enrolled in the program for at least six months, so the response rate represents a conservative estimate of the actual response rate.

To arrive at the percent of parents who report that the school facilitated their involvement, a “percent of maximum” score based on the 20 items in Section A of the survey was calculated for each respondent. A respondent who rated the preschool a “5” (Strongly Agree) on each of the 20 items received a 100% score; a respondent who rated the preschool a “1” (Strongly Disagree) on each of the 20 items received a 0% score. A respondent who

rated the preschool a “4” (Agree) on each of the 20 items received a 75% score. A parent who has a percent of maximum score of 80% or above was identified as one who reported that the school facilitated his/her involvement. An 80% cut-score represents a parent who is slightly more positive than “agree,” i.e., the parent has to have “strongly agreed” with at least one other item.

The representativeness of the surveys was assessed by examining the demographic characteristics of the children of the parents who responded to the survey to the demographic characteristics of all special education students. This comparison indicates the results are representative (1) by geographic region where the child attends school; (2) by the race/ethnicity of the child; (3) by the age of the child; and (4) by the primary disability of the child. For example, 64% of the parents who returned a survey indicated that their children’s primary disability is speech/language impairment, and 73% of preschool special education students have speech impairment. Furthermore, 82% of parent respondents indicated that their student is White; and 84% of preschool special education students are White. Parents from each region responded to the survey, with response rates by region ranging from 24-90%.

**Explanation of Progress or Slippage that Occurred for FFY 2009:**

For FFY 2009, WDE is reporting 79.5% of parents with a child receiving special education services reported that preschools facilitated their involvement as a means of improving services and results for children with disabilities. The target of 73.2% for Indicator 8 was met.

As indicated in Display 8-4, the percentage of parents who reported that the school facilitated their involvement has significantly increased from FFY 2005 to FFY 2009. It decreased from FFY 2007 to FFY 2008 but increased again in FFY 2009. Possible reasons for the increase since FFY 2005 are the Regional Child Development Centers report more parent involvement activities and trainings.

**Discussion of Improvement Activities Completed:**

The EIEP continues to provide ongoing professional development and technical assistance to the Regional Child Development Centers on how to improve parents’ understanding of and involvement with their child’s special education services. The Regional Child Development Centers continue to distribute surveys in person during IEP meetings. The EIEP believes this method of distribution continues to provide productive communication with parents and contributes to the increase in response rates and the increase in the percentage of parents who report that the Preschool Programs facilitate their involvement as a means of improving services and results for their children.

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities and the deleted activities; the second table (if applicable) contains the new improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1)TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

**Monitoring Priority: Disproportionality**

**Indicator 9:** 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))

**Measurement:** Percent = [(# of districts 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)] times 100.

**Data Source:** Data collected for reporting under section 618 and the State's analysis to determine if the disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification.

FFY	Measurable and Rigorous Target
<b>2009</b> (2009 – 2010)	<b>0%</b> of districts with disproportionate representation of racial and ethnic groups in special education or related services categories are the result of inappropriate identification.

**Actual target data from FFY 2009:**

**Display 9-1: Districts with Disproportionate Representation of Racial and Ethnic Groups that is the Result of Inappropriate Identification**

Year	Total Number of Districts	Number of Districts with Disproportionate Representation	Number of Districts with Disproportionate Representation of Racial and Ethnic Groups that was the Result of Inappropriate Identification	Percent of Districts
FFY 2009	48	2	0	0.00%

**Display 9-2: Cut-Scores for Flagging the LEAs for Possible Inappropriate Identification**

Level	Alternate Risk Ratio
<b>Over-Representation</b>	3.00 and up
<b>Under-Representation</b>	.25 and below

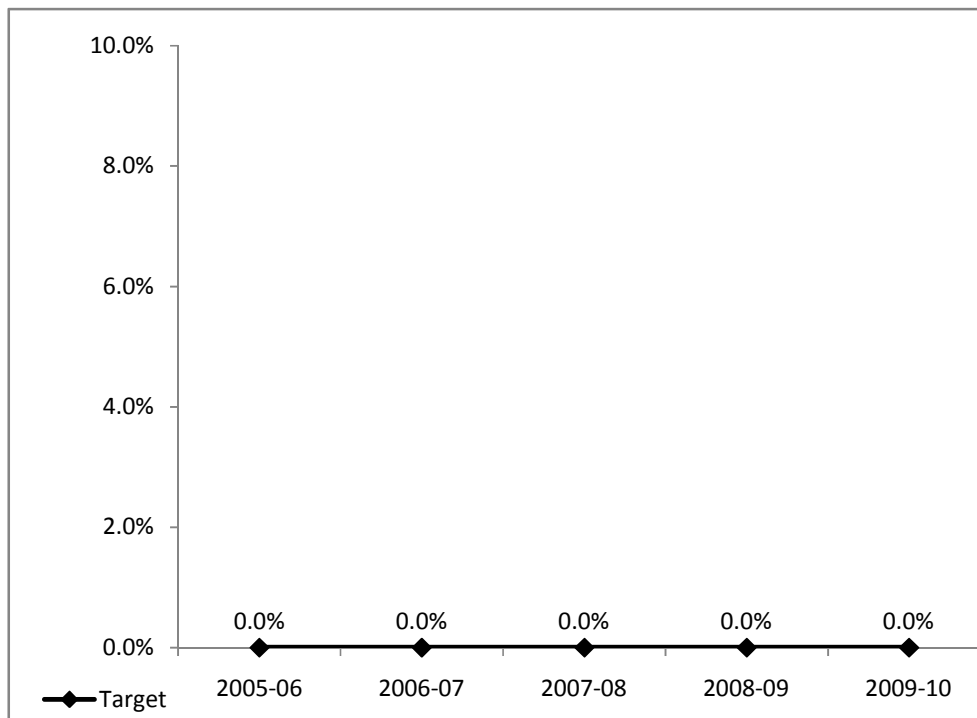
Wyoming will continue to use the above cut-scores for the identification of possible inappropriate identification.

For Indicator 9, the review of district data is conducted through the risk-based self-assessment portion of Wyoming's Continuous Improvement Focused Monitoring System. All districts that have been flagged are required to provide the WDE district policies and procedures and then the WDE uses a series of probing questions that provide further data on the district's practices around the appropriate identification of students with disabilities. As a result of these activities, WDE determined that neither district had disproportionate representation as a result of inappropriate identification.

**Display 9-3: Percent of LEAs with Disproportionate Representation that is a result of Inappropriate Identification**

	Under-representation	Over-representation
Total # of LEAs	48	48
# of LEAs flagged for disproportionate representation	0	2
% of LEAs flagged for disproportionate representation	0%	4.2%
# of LEAs found to have disproportionate representation due to inappropriate identification	0	0
<b>Percent of LEAs that had disproportionate representation due to inappropriate identification</b>	<b>0.0%</b>	<b>0.0%</b>



**Display 9-4: Percent of LEAs with disproportionate representation that is the result of inappropriate identification****Valid and Reliable Data:**

Wyoming defines disproportionate representation as an Alternate Risk Ratio of 3.00 or above (over-representation) or .25 or below (under-representation).

$$\text{Alternate Risk Ratio} = \frac{\text{District-level risk for racial/ethnic group for disability}}{\text{State-level risk for comparison group for disability}}$$

The Wyoming Department of Education collects the data used for Indicator 9 through the November 1 snapshot data collection. An Alternate Risk Ratio, based on the identification rate of each racial/ethnic group in each LEA, is calculated. The WDE uses the Alternate Risk Ratio (as defined by OSEP/WESTAT) for determining disproportionate representation because it is most relevant and meaningful for Wyoming's small, rural population.

Risk ratios are difficult to interpret when they are based on small numbers of students (either in the racial/ethnic group or the comparison group). When risk ratios are based on small numbers, minor variations in the number of students in either the racial/ethnic group or the comparison group can produce dramatic changes in the size of the risk ratio. Thus, an Alternate Risk Ratio was determined only if there were 10 or more students in the group of interest (based on child count data).

Disproportionate representation is defined as an Alternate Risk Ratio of 3.00 or above (over-representation) or .25 or below (under-representation). Once a ratio is flagged for disproportionate representation, the policies and procedures of that LEA are reviewed to determine if the disproportionate representation is due to inappropriate identification.

**Explanation of Progress or Slippage that Occurred for FFY 2009:**

For FFY 2009, WDE is reporting 0% of districts with disproportionate representation of racial and ethnic groups in special education or related services are the result of inappropriate identification. The target of 0% for Indicator 9 was met.

In each of the last five years, Wyoming has met the target of 0%. Even though no district was identified as having disproportionate representation in FFY 2009, WDE would like to emphasize that a ratio is calculated in every district for each of the five racial/ethnic groups. The ratios based on 10 or more students in each target group are considered for disproportionate representation. Because WDE uses the Alternate Risk Ratio, there is no minimum *n* requirement for the comparison group. Given the low minimum *n* size in the target group and the lack of minimum *n* size for the comparison group, a very high proportion of ratios are reviewed for disproportionate representation. Additionally, WDE provides each district with a detailed report of every one of their risk ratios so that they can continue to be proactive in identifying racial/ethnic groups for which there may be potential for over or under-representation in the future.

As indicated in Display 9-3, there were 2 districts flagged at the disproportionate level during FFY 2009. The two districts flagged for disproportionate representation have been flagged for the same racial/ethnic group in past years. As per WDE policy, special education files for each of the identified students from the flagged districts were requested and reviewed in order to determine noncompliance for inappropriate identification of students in specific disability categories for race/ethnicity. After WDE staff performed a thorough file review, examining the comprehensiveness of the evaluation procedures and eligibility determination in compliance with 34 C.F.R. §§300.301 – 300.311, it was determined the two districts flagged for disproportionate representation were not the result of inappropriate identification.

Reasons for maintaining the target of 0% of districts with disproportionate representation of racial and ethnic groups in special education or related services are the result of inappropriate identification may be attributed to the WDE's focus on providing high quality targeted technical assistance specifically relating to correctly implementing 34 C.F.R. §§300.301 – 300.311.

**Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities and the deleted activities; the second table (if applicable) contains the new improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

## APR Template – Part B (4)

## Wyoming

### Correction of FFY 2008 Findings of Noncompliance:

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **0%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	0
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	0
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

### Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of FFY 2008 findings <u>not</u> yet verified as corrected [(4) minus (5)]	0

### Actions Taken if Noncompliance Not Corrected:

No LEAs were out of compliance for FFY 2008, therefore, no correction was necessary.

### Verification of Correction (either timely or subsequent):

No LEAs were out of compliance for FFY 2008, therefore, no verification of correction was necessary.

### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

No LEAs were out of compliance for FFY 2008, therefore, no specific action to verify correction was necessary.

## APR Template – Part B (4)

## Wyoming

### Correction of Remaining FFY 2007 Findings of Noncompliance:

1. Number of remaining FFY 2007 findings noted in OSEP's June 2010 FFY 2008 APR response table for this indicator	0
2. Number of remaining FFY 2007 findings the State has verified as corrected	0
3. Number of remaining FFY 2007 findings the State has not verified as corrected [(1) minus (2)]	0

### Verification of Correction of Remaining FFY 2007 findings:

No LEAs were out of compliance for FFY 2007, therefore, correction or verification of correction was not necessary.

### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007:

No LEAs were out of compliance for FFY 2007, therefore, correction or verification of correction was not necessary.

### Correction of Any Remaining Findings of Noncompliance from FFY 2006 or Earlier:

WDE does not have any LEAs that are in or remain in noncompliance from FFY 2006 or earlier.

### Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
OSEP will be carefully reviewing each State's definition of disproportionate representation and will contact the State if there are questions or concerns.	Wyoming defines disproportionate representation as an Alternate Risk Ratio of 3.00 or above (over-representation) or .25 or below (under-representation)

## Monitoring Priority: Disproportionality

**Indicator 10:** 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))

**Measurement:** Percent = [(# of districts 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)] times 100.

**Data Source:** Data for Indicator 10 is derived from section 618 data submitted annually by districts to the WDE Data Unit and the State's analysis to determine if the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.

FFY	Measurable and Rigorous Target
FFY 2009 (2009 - 2010)	0% of districts with disproportionate representation of racial and ethnic groups in specific disability categories are the result of inappropriate identification.

Actual Target Data for FFY 2009:

**Table 10-2: Percent of LEAs with Disproportionate Representation that is the result of Inappropriate Identification**

Year	Total Number of Districts	Number of Districts with Disproportionate Representation	Number of Districts with Disproportionate Representation of Racial and Ethnic Groups in specific disability categories that was the Result of Inappropriate Identification	Percent of Districts
FFY 2009	48	2	0	0.00%

**Display 10-2: Cut-Scores for Flagging the LEAs for Possible Inappropriate Identification**

Level	Alternate Risk Ratio
<b>Over-Representation</b>	3.00 and up
<b>Under-Representation</b>	.25 and below

For Indicator 10, the review of district data is conducted through the risk-based self-assessment portion of Wyoming's Continuous Improvement Focused Monitoring System. All districts that have been flagged are required to provide the WDE with current evaluation reports and eligibility determination documents for students in the flagged disability categories and racial/ethnic groups. Then, the WDE reviews each student's documentation to determine whether or not the identification was appropriate. If the file reviews appear to indicate inappropriate evaluation or eligibility practices in any student's case, the WDE team pursues the information by interviewing district staff members involved in the evaluation and eligibility determinations of affected students. In conducting these activities in the two LEAs flagged, WDE determined that neither district had disproportionate representation (for any student in the target racial/ethnic group) as a result of inappropriate identification.

LEA	Target Ethnic Group	Primary Disability	Number in target ethnic group	Target Risk	Number in other ethnic groups	Other group risk	Alternate RR
1	n	ED	12	3.36%	49	2.32%	3.71
2	h	LD	59	17.51%	103	10.43%	3.57

\*Displays 10-2 and 10-3 illustrate the cut-scores the WDE uses to identify potential disproportionate representation and provides the districts which were flagged at the disproportionate level during FFY 2008.

**Display 10-4: Percent of LEAs with Disproportionate Representation that is the Result of Inappropriate Identification**

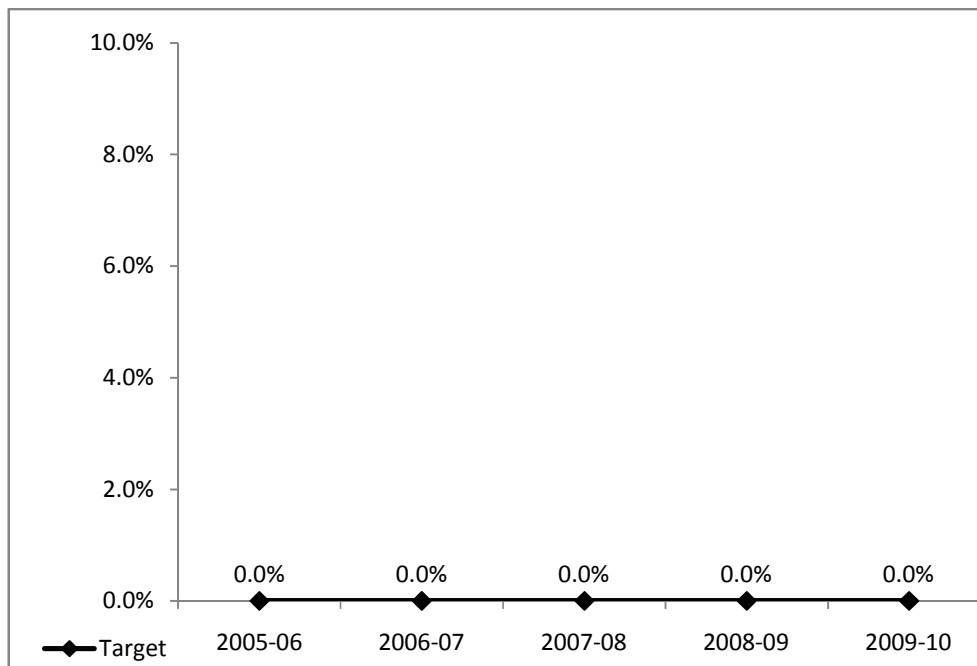
	FFY2006	FFY2007	FFY2008	FFY2009
Total # of LEAs	48	48	48	48
# of LEAs flagged for potential disproportionate representation – Over-representation	12	6	5	2
# of LEAs found to have disproportionate representation due to inappropriate identification – Over-representation	0	0	0	0

## APR Template – Part B (4)

## Wyoming

<b>Percent who had disproportionate representation due to inappropriate identification – Over-representation</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>
# of LEAs flagged for potential disproportionate representation – Under-representation	2	1	0	0
# of LEAs found to have disproportionate representation due to inappropriate identification – Under-representation	0	0	0	0
<b>Percent who had disproportionate representation due to inappropriate identification – Under-representation</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>

**Display 10-5: Percent of LEAs with Disproportionate Representation that is the Result of Inappropriate Identification -- Results Over Time**



### Valid and Reliable Data:

The WDE collects this data through the November 1 snapshot data collection. An Alternate Risk Ratio is calculated based on the identification rate for each racial/ethnic group in every LEA. WDE uses the Alternate Risk Ratio, as defined by OSEP/WESTAT, for determining disproportionate representation because it is most relevant for Wyoming's small, rural population.

Risk ratios are difficult to interpret when they are based on small numbers of students from either the racial/ethnic group or the comparison group. When risk ratios are based on small numbers, minor variations in the number of students in a group can produce significant changes in the size of the risk ratio. Therefore, an Alternative Risk Ratio was determined only if there were 10 or more students in the group of interest.

$$\begin{aligned} &\textbf{Alternate Risk Ratio =} \\ &\textbf{District-level risk for racial/ethnic group for disability} \\ &\textbf{divided by} \\ &\textbf{State-level risk for comparison group for disability} \end{aligned}$$

Wyoming defines disproportionate representation is defined as an Alternate Risk Ratio of 3.00 or above (over-representation) or .25 or below (under-representation). Once a ratio is flagged for disproportionate representation, the policies and procedures of that LEA are reviewed to determine if the disproportionate representation is a result of inappropriate identification.

**Explanation of Progress or Slippage that Occurred for FFY 2009:**

For FFY 2009, WDE is reporting 0% of districts with disproportionate representation of racial and ethnic groups in specific disability categories are the result of inappropriate identification. The target of 0% for Indicator 10 was met.

Even though no district was found to have disproportionate representation as a result of inappropriate identification, the State would like to emphasize that five ratios, one for each racial/ethnic group, are calculated for each of the 48 districts. The ratios based on ten or more students in the target group are considered for disproportionate representation. Because an Alternate Risk Ratio is used, there is no minimum n size for the other group. Given the low n size in the target group and the lack of minimum n size for the other group, a very high proportion of ratios are reviewed for disproportionate representation. Each district gets a detailed report of every one of their risk ratios so that they may be proactive in identifying racial/ethnic groups for which there might potentially be over- or under- representation in the future.

As indicated in Display 10-4, there were 2 districts flagged at the disproportionate level during FFY 2009. The two districts flagged for disproportionate representation have been flagged for the same racial/ethnic group in past years. As per WDE policy, special education files for each of the identified students from the flagged districts were requested and reviewed in order to determine noncompliance for inappropriate identification of students in specific disability categories for race/ethnicity. After WDE staff performed a thorough file review, examining the comprehensiveness of the evaluation procedures and eligibility determination in compliance with C.F.R. §§300.301 – 300.311, it was determined the two districts flagged for disproportionate representation were not the result of inappropriate identification.

To test the process explained above, WDE conducted an on-site review in one district flagged as disproportionate in its over-representation of Hispanic students with a Specific Learning Disability. WDE created a target sample of students who might have such a disability; the target sample totaled 72 students. These students were ELL students who were reported to be identified under the LD and/or SL eligibility criteria and were also coded as Hispanic according to district data.

During the CIFM process, the WDE reviewed cumulative student records, pre-referral records (Building Intervention Team records) and special education files as applicable in each student's case. The WDE wanted to determine whether or not any of these students might have been identified as having a Specific Learning Disability or a Speech/Language Impairment as the result of inappropriate identification policies, procedures or



## APR Template – Part B (4)

## Wyoming

practices. After the CIFM process, the WDE determined that the district's over-representation of Hispanic students in the LD category was not the result of inappropriate identification.

### Discussion of Improvement Activities Completed:

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities and the deleted activities; the second table (if applicable) contains the new improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

### Correction of FFY 2008 Findings of Noncompliance:

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **100%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	0
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	0
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

### Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

1. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	0
2. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
3. Number of FFY 2008 findings <u>not</u> yet verified as corrected [(4) minus (5)]	0

### Actions Taken if Noncompliance Not Corrected:

No LEAs were out of compliance for FFY 2008, therefore, correction was not necessary.

### Verification of Correction (either timely or subsequent):

No LEAs were out of compliance for FFY 2008, therefore, verification of correction was not necessary.

## APR Template – Part B (4)

## Wyoming

### Describe of the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

No LEAs were out of compliance for FFY 2008, therefore, specific action to verify correction was not necessary.

### Correction of Remaining FFY 2007 Findings of Noncompliance:

1. Number of remaining FFY 2007 findings noted in OSEP's June 2010 FFY 2008 APR response table for this indicator	0
2. Number of remaining FFY 2007 findings the State has verified as corrected	0
3. Number of remaining FFY 2007 findings the State has not verified as corrected [(1) minus (2)]	0

### Verification of Correction of Remaining FFY 2007 findings:

No LEAs were out of compliance for FFY 2007, therefore, correction or verification of correction was not necessary.

### Describe of the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007:

No LEAs were out of compliance for FFY 2007, therefore, correction or verification of correction was not necessary.

### Correction of Any Remaining Findings of Noncompliance from FFY 2006 or Earlier:

WDE does not have any LEAs that are in or remain in noncompliance from FFY 2006 or earlier.

### Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
OSEP will be carefully reviewing each State's definition of disproportionate representation and will contact the State if there are questions and concerns.	Wyoming defines disproportionate representation as an Alternate Risk Ratio of 3.00 or above (over-representation) or .25 or below (under-representation).

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

**Indicator 11:** 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))

**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.

**Data Source:** Data for Indicator 11 is taken from cumulative State data collection (WDE-427) and based on actual number of days. Wyoming's timeline for initial evaluations is 60 days.

FFY	Measurable and Rigorous Target
<b>2009</b> (2009 – 2010)	<b>100%</b> of children with parental consent to evaluate, who were evaluated within 60 days (or State established timeline).

**Actual Target Data for FFY 2009:****Display 11-1: Children Evaluated Within 60-Day Timeline:**

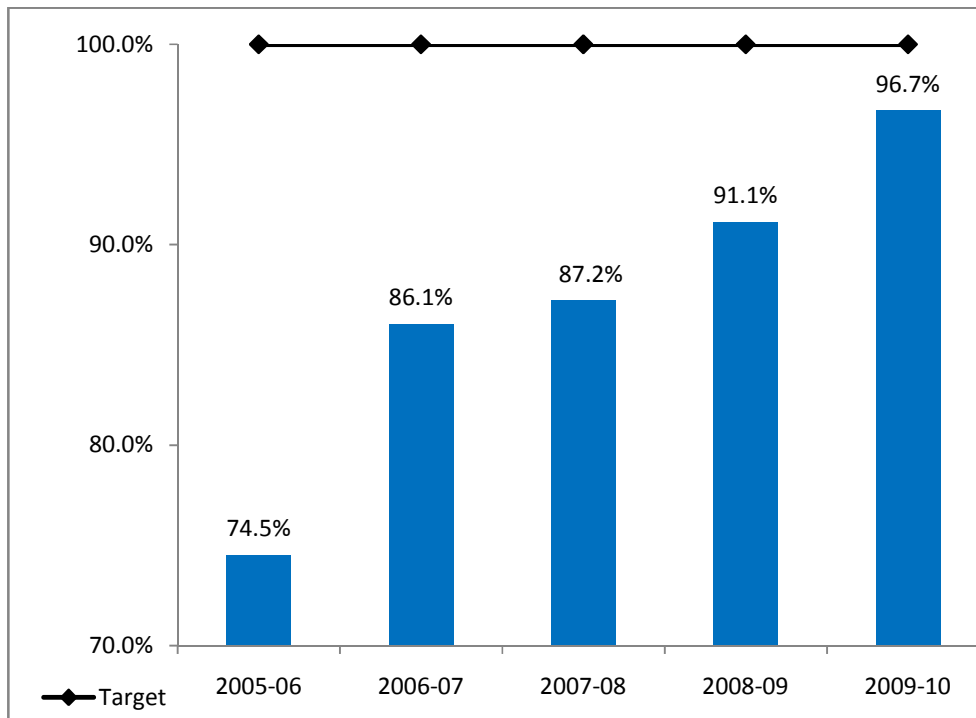
a. Number of children for whom parental consent to evaluate was received	2,133
b. Number of children whose evaluations were completed within 60 days (or State-established timeline)	2,062
Percent of children with parental consent to evaluate, who were evaluated within 60 days (or State established-timeline) (Percent = [(b) divided by (a)] times 100)	<b>96.7%</b>

**Display 11-2: Account for Children Evaluated Outside of 60-Day Timeline**

Range of Days Beyond the 60 –day Timeline	Reasons for Delay
1 to 102 days	Delays in doctors' reports; parental cancellation of meetings; breaks in school schedule; difficulty contacting parents; full testing schedule; and lack of qualified evaluators.

**Display 11-3: Percent of Children Evaluated within the 60-Day Timeline – Results Over Time**

	FFY2005	FFY2006	FFY2007	FFY2008	FFY2009
a. # of children for whom parental consent to evaluate was received	1,549	2,123	2,011	2,108	2,133
b. #of children whose evaluations were completed within 60 days	1,154	1,827	1,754	1,920	2,062
<b>Percent who met the indicator</b>	<b>74.5%</b>	<b>86.1%</b>	<b>87.2%</b>	<b>91.1%</b>	<b>96.7%</b>

**Display 11-4: Percent of Children Evaluated within the 60-Day Timeline – Results Over Time****Explanation of Progress that Occurred for FFY 2009:**

For the FFY 2009 APR, WDE is reporting that 96.7% of children with parental consent to evaluate were evaluated within 60 days. The target of 100% was not met.

While the State did not meet the target of 100% of children with parental consent to evaluate were evaluated within 60 days, as indicated in Displays 11-1, 11-3 and 11-4, it did continue the trend of upward progress. Since 2005, Wyoming has increased its percentage of children evaluated within 60 day timeline from 74.5% to 96.7%. The progress is even more apparent when looking at actual student numbers. In 2005-2006, 395 students with parental consent to evaluate were not evaluated within 60 days. In 2009-2010, only 71 of the state's initial evaluations took longer than 60 days.

The reasons for the improvement in Indicator 11 may include an increase in targeted technical assistance given to LEAs specifically involving student evaluations as described in 34 C.F.R. §§300.301 – 300.311, general guidance in the form of monthly statewide technical assistance calls and specific feedback during and after the Continuous Improvement Focused Monitoring process conducted by the WDE.

The 71 evaluations that did not meet the 60 day requirement were from nineteen of forty-eight school districts in Wyoming. LEAs that did not complete all evaluations within the 60-day timeframe received notification instructing them to examine their current policies, procedures and practices in order to ensure future compliance with initial evaluation requirements. In response, these districts were required to provide WDE with evidence special education staff received appropriate training on meeting requirements for Indicator 11 as described in 34 C.F.R. §§300.301.

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### Discussion of Improvement Activities Completed:

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities and the deleted activities; the second table (if applicable) contains the new improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in one or more performance indicators. The improvement strategies are color coded to reflect their status.

### Correction of FFY 2008 Findings of Noncompliance:

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **91.08%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	<b>188</b>
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	<b>188</b>
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

### Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	<b>0</b>
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	<b>0</b>
6. Number of FFY 2008 findings <u>not</u> verified as corrected [(4) minus (5)]	<b>0</b>

### Actions Taken if Noncompliance Not Corrected:

All instances of noncompliance reported in FFY 2008 have been corrected by the LEAs within one year, therefore, no action was necessary.

### Verification of Correction (either timely or subsequent):

All instances of noncompliance reported in FFY 2008 have been corrected by the LEAs within one year and subsequently verified by WDE using its verification methodology.

### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

The WDE made a verification monitoring visit to the LEAs with the outstanding transition finding in order to determine if the LEA had corrected the finding and was correctly implementing C.F.R. §300.301(c)(1). After

## APR Template – Part B (4)

## Wyoming

applying WDE's verification methodology (review of data, file reviews and interviews with district staff), consistent with OSEP Memo 09-02, it was determined that the LEA did correct the finding and was correctly implementing C.F.R. §300.301(c)(1).

### Correction of Remaining FFY 2007 Findings of Noncompliance:

1. Number of remaining FFY 2007 findings noted in OSEP's June 2010 FFY 2008 APR response table for this indicator	1
2. Number of remaining FFY 2007 findings the State has verified as corrected	1
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)]	0

### Verification of Correction of Remaining FFY 2007 findings:

All instances of noncompliance reported in FFY 2007 have been corrected by the LEAs and subsequently verified by WDE using its verification methodology.

### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007:

In reviewing initial evaluation data for the single LEA in question (District X), the WDE noted that this LEA's Indicator 11 rate has improved from 24.39% in FFY 2007, to 35.71% in FFY 2008, and 69.7% in FFY 2009. The WDE asked the district for additional information regarding its FFY 2009 initial evaluations and learned that the district conducted 33 initial evaluations during that year. Of the ten initial evaluations that were reportedly completed after the 60-day deadline, WDE staff verified that in six of the ten instances, district staff had completed the evaluation processes, but eligibility determination meetings were held after the 60-day timeframe. The LEA provided assurance that it is now correctly implementing the specific requirements outlined in 34 C.F.R. §300.301(c)(1), and although late, an initial evaluation has been completed for all children unless the child is no longer within the jurisdiction of the LEA (see Display 11-5).

### Display 11-5: Completion of Initial Evaluations in District X for FFY 2009

	≤ Day 65	≤ Day 70	≤ Day 71	≤ Day 80	≤ Day 81
Number of Students Whose Initial Evaluations were Completed	2	4	1	1	2

### Preschool Measurable and Rigorous Targets for Percentage of Children with Parental Consent to Evaluate, Who were Evaluated within 60-Day Timeline.

FFY	Measurable and Rigorous Target Preschool Setting (3 - 5 year olds)
2009 (2009-2010)	100% of children with parental consent to evaluate, who were evaluated within 60 days.

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Actual Target Data for FFY 2009:

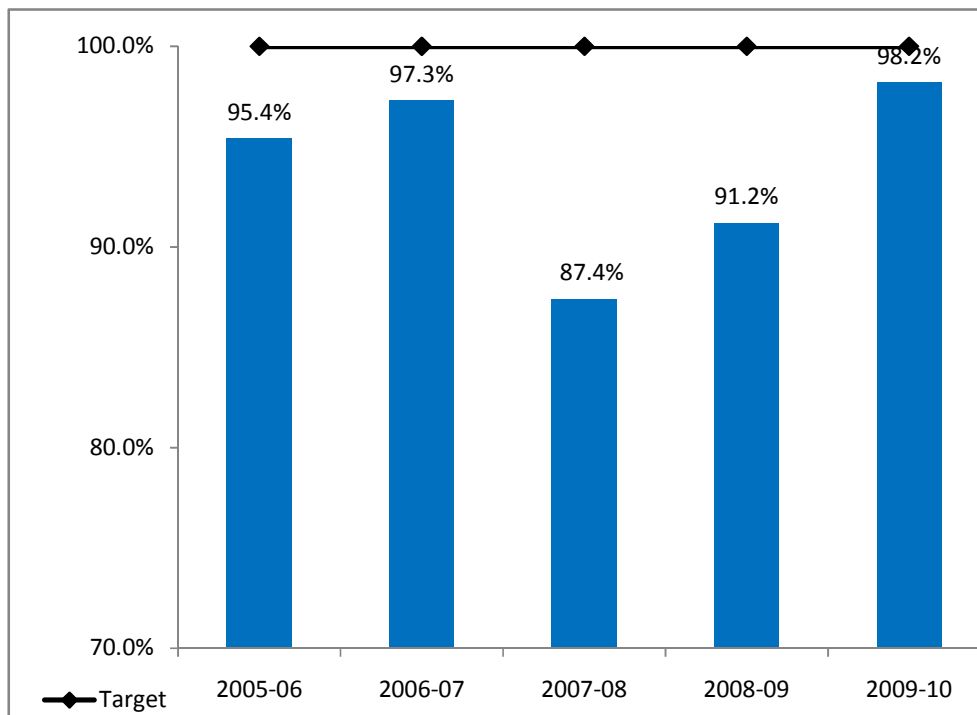
**Display 11-6: Children Evaluated Within 60 Days: Part B 619**

a. Number of children for whom parental consent to evaluate was received	1703
b. Number of children whose evaluations were completed within 60 days (or State-established timeline)	1673
Percent of children with parental consent to evaluate, who were evaluated within 60 days (or State established-timeline) (Percent = [(b) divided by (a)] times 100)	98.2%

**Display 11-7: Account for Children Evaluated Outside of 60-Day Timeline**

Range of Days Beyond the 60 –day Timeline	Reasons for Delay
1 – 96 days	Lack of communication between CDC's and parents; child custody issues; staff errors

**Display 11-8: Percent of Preschool Children Evaluated within 60-Day Timeline – Results Over Time**





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### Explanation of Progress or Slippage that Occurred for FFY 2009:

The Early Intervention and Education Program (EIEP) reports progress from FFY2008 (91.2%) to FFY 2009 of (98.2%). This increase may be attributed to the technical assistance provided to the fourteen Regional Child Development Centers throughout the year and the use of a web-based data collection system. The data system provides a more accurate look at the data across the state and at the individual student level allowing for better technical assistance to those Regional Child Development Centers that did not meet the target of 100%. Although the target of 100% was not met, the number of preschool children evaluated within the 60 day timeline is improving.

### Correction of FFY 2008 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **91.2%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	<b>165</b>
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	<b>165</b>
3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>0</b>

### Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

1. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	<b>0</b>
2. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	<b>0</b>
3. Number of FFY 2008 findings <u>not</u> verified as corrected [(4) minus (5)]	<b>0</b>

### Verification of Correction (either timely or subsequent):

All instances on noncompliance in the Child Development Centers were corrected and verified through the web based data system and on-site monitoring of individual child files. For the corrections of noncompliance the EIEP provided on-site targeted technical assistance.

### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

All instances on noncompliance in the Child Development Centers were corrected and verified through the web based data system and on-site monitoring of individual child files.

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### Correction of Remaining FFY 2007 Findings of Noncompliance (if applicable):

1. Number of remaining FFY 2007 findings noted in OSEP's June 2010 FFY 2008 APR response table for this indicator	0
2. Number of remaining FFY 2007 findings the State has verified as corrected	0
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)]	0

### Verification of Correction of Remaining FFY 2007 findings:

All findings in the CDCs in FFY 2007 were corrected and verified (consistent with OSEP Memo 09-02) within one year.

### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007:

No CDCs had uncorrected findings of noncompliance from FFY 2007 or earlier, therefore, no correction was necessary.

### Correction of Any Remaining Findings of Noncompliance from FFY 2006 or Earlier:

There are no remaining findings from FFY 2006 or earlier.

### Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2009:

The EIEP continues to provide technical assistance to all fourteen of the Regional Child Development Centers with the monitoring of individual child files through the web-based data system and on-site monitoring. In the summer of 2011, the EIEP will hold a conference to provide professional development to the staff of the Child Development Centers in Wyoming.

### Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
The State must demonstrate, in the FFY 2009 APR, that the State is in compliance with the timely initial evaluation requirement in C.F.R. §300.301(c)(1).	For the FFY 09, Wyoming is reporting a 97% timely initial evaluation rate. While the State did not reach the target of 100%, it continues to demonstrate an upward trend, from a rate of 74.5% in FFY 05 to 97% in FFY 09. Additionally, the state has verified that every LEA with late initial evaluations has completed them, and each LEA has submitted an assurance that evaluation teams are aware of the requirements found in 34 C.F.R. §300.301 and are now properly following them.
Because the State reported less than 100% compliance for FFY 2008, the State must report on	All instances of noncompliance reported in FFY 2008 have been corrected by the LEAs within one

## APR Template – Part B (4)

## Wyoming

the status of correction of noncompliance reflected in the data the State reported for this indicator.	year. After completing verification visits to the noncompliant LEAs and applying verification methodology, WDE is confident the LEAs are correctly implementing the requirements of 34 C.F.R. §300.301(c)(1).
The State must demonstrate, in the FFY 2009 APR, that the one remaining uncorrected noncompliance finding identified in FFY 2007 was corrected.	The one remaining instance of uncorrected noncompliance from 2007 has been corrected and verified by WDE.

<b>Monitoring Priority: Effective General Supervision Part B / Effective Transition</b>
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**Indicator 12:** 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))

**Measurement:**

- # of children who have been served in Part C and referred to Part for Part B eligibility determination.
- # of those referred determined to be NOT eligible and whose eligibilities were determined prior to their third birthdays.
- # of those found eligible who have an IEP developed and implemented by their third birthdays.
- # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 C.F.R. §300.301(d) applied.
- # of children who were referred to Part C less than 90 days before their third birthdays.

Account for children included in a, but not included in b, c, d, or e. 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)] times 100.

**Data Source:** Data to be taken from the State data system.

FFY	Measurable and Rigorous Target
<b>2009</b> (2009-2010)	<b>100%</b> of children eligible transition from Part C to Part B by their third birthday.

**Actual Target Data for FFY 2009:**

**Display 12-1: Percentage of Preschool Children Referred by Part C Who are Found Eligible for Part B and Have IEPs Developed by Their Third Birthdays**

a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.	536
b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday	78

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c. # of those found eligible who have an IEP developed and implemented by their third birthdays	400
d. # for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 C.F.R. §300.301(d) applied.	19
e. # of children who were referred to Part C less than 90 days before their third birthdays.	18
# in a but not in b, c, d, or e.	21
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  Percent = $[(c) / (a-b-d-e)] * 100$	<b>95%</b>

**Display 12-2: Account for Children Referred from Part C and Found Eligible for Part B but Did Not Have an IEP in Place by Their Third Birthday**

Range of Days Beyond the Third Birthday	Reasons for Delay
1-43 days	Parents cancelling meetings; parents not showing up for scheduled meetings; staff errors

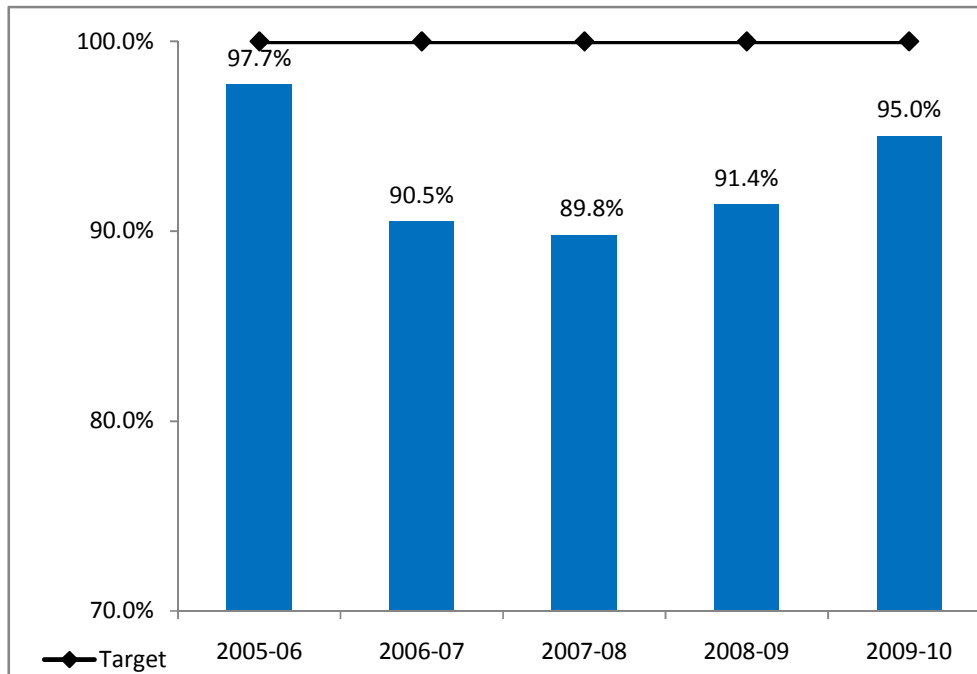
## APR Template – Part B (4)

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**Display 12-3: Percent of Children Referred by Part C Who are Found Eligible for Part B and Have IEPs Developed by Their Third Birthdays**

	FFY2005	FFY2006	FFY2007	FFY 2008	FFY 2009
a. # of children served in Part C and referred to Part B	133	218	375	523	536
b. # found not eligible and whose eligibility was determined prior to third birthday	3	53	69	81	78
c. # of those found eligible who have an IEP developed and implemented by their third birthdays	127	143	275	382	400
d. # for whom parent refusals to provide consent caused delays in evaluation or initial services	0	7	0	24	19
<b>Percent who met the indicator</b>	<b>97.7%</b>	<b>90.5%</b>	<b>89.8%</b>	<b>91.4%</b>	<b>95%</b>

**Display 12-4: Percent of Children Meeting Indicator Over Time**



**Valid and Reliable Data:**

During the FFY 2009, the Regional Child Development Centers (CDC) in Wyoming continued to gather data for Indicator 12 through an electronic data collection system used for children in both Part C and Part B. The electronic data system helped to improve data accuracy across the state and allowed for better technical assistance to those Regional Child Development Centers that did not meet the target of 100%. This data system also allowed the EIEP to monitor all individual child files and instance of noncompliance and the correction on noncompliance. Since FFY 2007, the EIEP has systematically reviewed all the Regional CDCs and report on all Regional CDCs and all children enrolled in the Part C and Part B/619 preschool programs.

**Explanation of Progress or Slippage that Occurred for FFY 2009:**

For FFY 2009, WDE is reporting 95% of children eligible transition from Part C to Part B by their third birthday. Although the state made progress, the target of 100% for Indicator 12 was not met.

Display 12-1 indicates, Wyoming had an increase in the percentage of children referred by IDEA Part C who were found eligible for Part B and had IEP's developed by their third birthdays, from 91.4% in FFY 2008 to 95% in FFY 2009. While not yet able to attain the target of 100%, Wyoming improved in this area during FFY 2009. As part of the improvement process, the WDE and EIEP engaged in on-site monitoring and verification of the regional CDCs to ensure compliance with the requirements of IDEA Part B and C. The regions with the ten findings of noncompliance during FFY 2008 received verification visits during FFY 2009 to determine if they had achieved compliance. After a thorough review of files consistent with OSEP Memo 09-02, the WDE and EIEP determined that the findings of noncompliance were corrected.

To further assist with monitoring and verification, in 2010 the Early Intervention and Education Program (EIEP) implemented a new web-based data system to monitor and track areas of compliance. This web-based system provides a unique child identification number that allows the EIEP to monitor individual child files for areas of compliance.

**Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities and the deleted activities; the second table contains the new improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

**Correction of FFY 2008 Findings of Noncompliance (if State reported less than 100% compliance in its FFY 2008 APR):**

Level of compliance (actual target data) State reported for FFY 2008 for this indicator: **91.4%**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009)	<b>5</b>
2. Number of FFY 2008 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	<b>5</b>

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3. Number of FFY 2008 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0
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### Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

1. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	0
2. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
3. Number of FFY 2008 findings <u>not</u> verified as corrected [(4) minus (5)]	0

### Actions Taken if Noncompliance Not Corrected:

All CDCs identified as out of compliance in FFY 2008 were corrected within one year, therefore, no correction was necessary.

### Verification of Correction (either timely or subsequent):

All CDCs identified as out of compliance in FFY 2008 were corrected within one year, therefore, no correction or verification of correction was necessary.

### Describe of the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008:

In all instances of noncompliance in which the timeline was not met, an IEP was developed and implemented, although late. The EIEP verified this through the web-based system and on-site monitoring of individual child files.

### Correction of Remaining FFY 2007 Findings of Noncompliance:

1. Number of remaining FFY 2007 findings noted in OSEP's June 2010 FFY 2008 APR response table for this indicator	0
2. Number of remaining FFY 2007 findings the State has verified as corrected	0
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)]	0

### Verification of Correction of Remaining FFY 2007 findings:

All CDCs identified as out of compliance in FFY 2007 were corrected within one year, therefore, no correction or verification of correction was necessary.



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### Describe of the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007:

All CDCs identified as out of compliance in FFY 2007 were corrected within one year, therefore, no correction or verification of correction was necessary.

### Correction of Any Remaining Findings of Noncompliance from FFY 2006 or Earlier (if applicable):

Wyoming does not have any LEAs that are in or remain in noncompliance from FFY 2006 or earlier.

### Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
The State must demonstrate, in the FFY 2009 APR, that the State is in compliance with the early childhood transition requirements in 34 C.F.R. §300.124(b). Because the State reported less than 100% compliance in FFY 2008, the State must report on the status of correction of noncompliance reflected in the data the State reported for this indicator.	All CDCs identified as out of compliance in FFY 2008 were corrected within one year.
When reporting the correction of noncompliance, the State must report, in its FFY 2009 APR, that it has verified that each LEA, including each Child Development Center, with noncompliance reflected in the data the State reported for this indicator: (1) is correctly implementing 34 C.F.R. §300.124(b), by achieving 100% compliance, based on a review of data such as data subsequently collected through on-site monitoring or a State data system; (2) has developed and implemented the IEP, although late, for any child for whom implementation of the IEP was not timely, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2009 APR, the State must describe the specific actions that were taken to verify the correction.	All instance of noncompliance where the timeline was not met, the IEP was developed and implemented, although late. EIEP staff verified this through the web-based system and on-site monitoring of individual child files consistent with OSEP Memo 09-02.
If the State does not report 100% compliance in the FFY 2009 APR, the State must review its improvement activities and revise them, if necessary.	The WDE did not report 100% compliance for FFY 2009. The State has reviewed its improvement activities and revised them as necessary.

## APR Template – Part B (4)

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

**Indicator 15:** General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

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

#### Measurement:

Percent of noncompliance corrected within one year of identification:

- # of findings of noncompliance.
- # of corrections completed as soon as possible but in no case later than one year from identification.

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

**Data Source:** Data to be taken from State monitoring, complaints, hearings and other general supervision system components.

FFY	Measurable and Rigorous Target
2009 (2009-2010)	100% of monitoring findings related to priority areas closed within one year

#### Actual Target Data for FFY 2009: Display 15-1

Findings made in FFY	Number of Findings of Noncompliance	Number of Findings Corrected and Verified Within One Year	Percent of Findings Corrected Within One Year	Number of Findings Subsequently Corrected	Number of LEAs with Continuing Noncompliance
2008	201	196	97.5%	0	3
2007	46	44	95.7%	2	0*
2006	49	47	95.9%	N/A	1**

### **\*Nature of continuing noncompliance and the enforcement activities taken from FFY 2007:**

As reported in Wyoming's APR for FFY 2008, there were two findings of noncompliance identified during FFY 2007 that were not corrected during FFY 2008. Both of these findings, which were in the areas of FAPE – Educational Benefit and Secondary Transition, were from the same LEA. The district in question was placed in a compliance agreement in the spring of 2009, and district was required to fund an external "coach" to assist its staff in correcting the noncompliance. The coach met monthly with district personnel and provided additional support through e-mail and phone conferences.

During the verification visit of May 2010, WDE staff again reviewed files and interviewed district staff members to determine whether or not these two findings had been corrected. Through this verification process, the WDE found no evidence of continuing noncompliance in either FAPE – Educational Benefit or Secondary Transition. The WDE notified the LEA to that effect, and the findings are now considered corrected.

### **\*\* Nature of continuing noncompliance and the enforcement activities taken from FFY 2006:**

As shown in Display 15-1, the WDE determined that two findings of noncompliance identified through its Continuous Improvement Focused Monitoring system in FFY 2006 were not corrected during FFY 2007, FFY 2008 or FFY 2009. One of the findings was in the area of FAPE – Educational Benefit, and the second was in the area of Least Restrictive Environment. Both of these findings were from the same LEA.

As described in the State's APR for FFY 2007, the LEA in question was required to enter into a Compliance Agreement with the WDE due to the LEA's continued noncompliance. Multiple parties have been and are currently involved in this process, including the LEA Superintendent, School Board Chairperson and the State Director of Special Education. Despite the efforts of the WDE and LEA, the LEA was unable to evidence correction prior to the end of FFY 2009. However, during the WDE's verification visit of April 2010, the state noted measurable improvement in the district's practices concerning the creation of IEPs that provide each student with FAPE in the LRE. Nevertheless, the WDE has intensified its efforts to assist the LEA in correcting these two findings of noncompliance. Targeted technical assistance sessions have been held with related service providers, administrators, and school psychologists in the district, and the WDE has been involved in preparing and delivering much of this assistance.

The WDE and LEA have identified specific schools within the district whose special education data are particularly problematic and is targeting principals and staff in those schools with intensive technical assistance. Due to the depth and complexity of the LEA's noncompliance in these two areas, bringing about timely correction has been challenging. Additionally, the WDE worked with the LEA to apply Federal funds toward activities outlined in their Compliance Agreement. The LEA in question is currently using a portion of its federal funds to pay for the services of a consultant who is recognized as a national expert in the area of inclusion. The WDE anticipates that the LEA will continue to make necessary improvements in order to clear these findings as quickly as possible. A verification visit is scheduled to take place in late February of 2011.

### **Explanation of Progress or Slippage that occurred for FFY 2009:**

As shown in Display 15-1, the state made slight progress on Indicator 15 in FFY 2009 when compared to the previous year. 97.5% of the findings made by the state in FFY 2008 were corrected within one year, in accordance with 34 C.F.R. §300.600(e). Although the state has improved in this area, Wyoming continues to improve its assistance to LEAs found to have noncompliance by strengthening its targeted technical assistance and professional development efforts.

**Nature of continuing noncompliance and enforcement activities taken:**

As shown in Display 15-1, the WDE determined that five findings of noncompliance originally identified in FFY 2008 were not corrected within one year. Three of the findings were in the area of FAPE – Educational Benefit, one was in the area of FAPE – Extended School Year, and the fifth was in the area of Evaluation Procedures/Eligibility Determinations. Two of these substantive findings are from the same LEA, two are from a regional developmental preschool, and one is from another LEA in the state.

Due to their failure to evidence correction of these findings of noncompliance, the LEAs in question were required to enter into Compliance Agreements with the WDE. Multiple parties were involved in this process, including the LEA Superintendents, School Board Chairpersons and the State Director of Special Education. For the continuing findings in the regional developmental preschool, staff from the EIEP were also involved. In the following paragraphs, the WDE will explain the nature of the continuing noncompliance in each LEA and the enforcement actions taken to bring about correction.

**LEA 1:** The WDE has assigned a special education “coach” to assist this LEA in its efforts to correct the single remaining area of FAPE – Educational Benefit noncompliance. The LEA in question is funding the coach with a portion of its federal 611 grant. The coach meets monthly with district staff in order to review files, policies, practices and procedures and makes recommendations for needed adjustments and improvements in order to bring the LEA into compliance. Following each visit, the coach provides a written report to the WDE and receives direction and feedback from WDE Special Programs Division leadership. With the support being provided to the LEA at this time, the WDE is confident that this LEA will be able to correct the outstanding finding in a timely manner. A verification visit is scheduled to take place in early March of 2011.

**LEA 2:** This LEA, which is one of the largest in Wyoming, is also in a compliance agreement with the WDE. Through its verification visit of April 2010, the WDE determined that two substantive findings from the 2008 – 2009 school year remain uncorrected: FAPE – Educational Benefit and FAPE – Extended School Year. The superintendent in this district began his position during the summer of 2010, and Special Programs Division leadership staff members have met with him and the LEA special education director on multiple occasions to explain the continuing noncompliance and possible enforcement actions. In addition, beginning in the fall of 2010, the WDE has provided targeted technical assistance sessions with district staff, including working in small groups with district staff members at the individual student file level. Additional technical assistance sessions are scheduled for the 2010 – 2011 school year, and a verification visit is scheduled to take place in April of 2011. With the assistance of the WDE, the state is confident that this LEA will be able to correct the two remaining findings in a timely manner.

**LEA 3:** The LEA in question here is the Developmental Disabilities Division (DDD). As a result of an EIEP monitoring event in the fall of 2008 (report issued in January 2009), a particular Developmental Preschool Region was found to have four areas of noncompliance with IDEA Part. Under Wyoming state statute, the DDD has been designated as an Intermediate Educational Unit (IEU) [W.S. §21-2-702] and is required to monitor the regional developmental preschools [W.S. §21-2-703(b)(ii)]. However, all Part B general supervision responsibilities remain a duty assigned to the WDE [34 C.F.R. §300.600 and W.S. §21-2-703(a)(ii)].

After receiving the January 2009 monitoring report, the Developmental Preschool Region sent a letter to the DDD, which was copied to the WDE, requesting clarification regarding findings of noncompliance related to FAPE. As a result of this communication, the WDE requested an interagency meeting in the spring of 2009 with both the DDD and region administration in order to better understand these issues. Through this meeting, WDE staff members grew concerned that the current monitoring protocol in use for the developmental preschool regions may be insufficient in identifying all substantive areas of noncompliance.

In late May of 2009, the WDE decided to probe these concerns using a focused monitoring approach designed to identify substantive, systemic areas of Part B noncompliance using a multifaceted process. In essence, the same monitoring procedures used in Wyoming's school districts would be brought to this Developmental Preschool Region. The WDE conducted the monitoring of this region during the fall of 2009 and subsequently made two findings of noncompliance: FAPE – Educational Benefit and Evaluation Procedures/Eligibility Determinations. These findings confirmed elements of the original findings made by the DDD in its January 2009 report, but added additional evidence to show the gravity of the noncompliance. For this reason, the WDE is reporting that this noncompliance is originally from FFY 2008 and was not corrected by the end of FFY 2009.

In working to correct this noncompliance, the WDE and DDD have collaborated on multiple targeted technical assistance efforts through FFY 2009 and FFY 2010, even co-presenting to Developmental Preschool staff to help change practices in the affected region. The region in question received a verification visit in January 2011, and although progress was evident, the noncompliance was not fully corrected. At present, the WDE and DDD are collaborating on strategies and activities designed to bring the LEA into compliance. A compliance agreement will be crafted, and a new Memorandum of Understanding (MOU) between the WDE and DDD will be finalized. The revised MOU will be key to these efforts, and the WDE eagerly awaits its Part B Verification Visit report from OSEP, which is expected to contain critical guidance in this area. A verification visit will take place in June 2011.

**Describe the process for selecting LEAs for Monitoring:**

Wyoming's CIFM system uses a formula in the selection of districts for on-site monitoring. It is made up of key SPP indicators that emphasize student outcomes and educational results. The SPP indicators that comprise the formula are chosen annually by WDE with the input of the state's General Supervision Stakeholder Group. For FFY 2009, the formula included data from indicators 2, 3C, 5B and 5C. Regardless of the specific focus indicators used in a given year, data from every district feeds into the formula annually, and an overall score for these indicators is computed. This yields a single percentage score for each of the 48 Wyoming school districts.

In order to facilitate the selection process and ensure equity among districts, the WDE divides districts into four population groups based on overall student enrollment figures. The districts are then ranked within these four population groups, and the two districts with the lowest overall percentage scores in each population group are chosen for on-site focused monitoring visits. If a district is still working through a Corrective Action Plan (CAP) or Compliance Agreement from the previous school year, the WDE will not monitor the district in the current school year. However, districts with Compliance Agreements that go beyond one year are not exempt from the onsite selection process. If a district in this situation is found to be in one of the two lowest rankings in its population group, the WDE skips over that district, and the district with the next lowest percentage score is selected.

In addition, one district is chosen randomly for an on-site monitoring visit each year. Districts receiving a WDE determination of *Meets Requirements* are automatically removed from the random district pool. Districts selected for random CIFM on-site visits are drawn from the *Needs Assistance* determinations category, and the WDE's CIFM approach to these districts is otherwise conducted in the same manner as it is for districts selected through the application of the formula. The WDE follows the same procedures before the visit, conducts similar activities while on-site, issues similar reports and requires corrective actions (if findings are made) following the on-site visit.

For any noncompliance not corrected within one year of identification, the WDE requires that the district agree to and implement a Compliance Agreement. The Compliance Agreement, like the Corrective Action Plan (CAP), describes the district's plan of action toward correcting the remaining noncompliance. However, unlike a CAP, the Compliance Agreement has a much shorter timeline, increased accountability and contact between the LEA

and the WDE, and intensive, targeted, mandatory technical assistance from the WDE (or contractors selected by the WDE) to the district.

Because of the seriousness of continued noncompliance and its impact on student performance and outcomes, the agreement is preceded by a meeting between the State Director of Special Education and the district's Superintendent, School Board Chairperson, and Special Education Director. At this meeting, the State Director of Special Education clearly explains the agreement's strict timelines and the enforcement consequences of continued noncompliance. At a minimum, any district requiring a Compliance Agreement is automatically placed in the *Needs Intervention* determinations category, regardless of the district's total score on the determinations formula.

The WDE employs a variety of both sanctions and incentives in response to district efforts to correct findings of noncompliance. Any district exhibiting exemplary performance may be rewarded with the following incentives: waivers for national or state conferences, a complimentary letter to the local school board and/or superintendent, removal from the random monitoring pool and/or public recognition of best practices through a special programs newsletter.

Accordingly, any district choosing not to cooperate or failing to resolve noncompliance issues will receive sanctions from the Department. Among these are the following: holding a face to face meeting with district officials, notifying the State Advisory Panel, hiring an outside consultant to assist the district (using the district's federal Part B 611 funds to pay for this service), withholding part or all of the district's federal Part B 611 funds, and affecting schools' accreditation status.

### **Discussion of Improvement Activities Completed**

The status of ongoing improvement activities/strategies below consists of two tables: The first table sets forth the results of all completed activities and the deleted activities; the second table (if applicable) contains the new improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in one or more performance indicators. The improvement strategies are color coded to reflect their status.

### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2009**

Note: For this indicator, report data on the correction of findings of noncompliance the State made during FFY 2008 (July 1, 2008 through June 30, 2009) and verified as corrected as soon as possible and in no case later than one year from identification.

## APR Template – Part B (4)

## Wyoming

### Timely Correction of FFY 2008 Findings of Noncompliance (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008 through June 30, 2009) (Sum of Column a on the Indicator B15 Worksheet)	201
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding) (Sum of Column b on the Indicator B15 Worksheet)	196
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	5

### FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance and/or Not Corrected):

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	5
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0
6. Number of FFY 2008 findings <u>not</u> yet verified as corrected [(4) minus (5)]	5

### Actions Taken if Noncompliance Not Corrected:

See section above entitled, "Nature of continuing noncompliance and enforcement activities taken."

### Verification of Correction for findings of noncompliance reported in the FFY 2009 APR (either timely or subsequent):

Verification visits for the LEAs that continue to have noncompliance beyond the one-year timeframe for correction are as follows:

- LEA 1: March 30 – April 1, 2011 (one finding of noncompliance from FFY 2008)
- LEA 2: April 26 – 28, 2011 (two findings of noncompliance from FFY 2008)
- LEA 3: June 7 – 9, 2011 (two findings of noncompliance from FFY 2008)
- LEA 4: February 28 – March 2, 2011 (two findings of noncompliance from FFY 2006)

### Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):

See section above entitled, "Nature of continuing noncompliance and enforcement activities taken."

## APR Template – Part B (4)

## Wyoming

### Correction of Remaining FFY 2007 Findings of Noncompliance:

If the State reported <100% for this indicator in its FFY 2008 APR and did not report that the remaining FFY 2007 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY 2007 findings noted in OSEP's June 2010 FFY 2008 APR response table for this indicator	2
2. Number of remaining FFY 2007 findings the State has verified as corrected	2
3. Number of remaining FFY 2007 findings the State has NOT verified as corrected [(1) minus (2)]	0

Note: OSEP's June 2010 FFY 2008 response table noted three remaining findings of noncompliance from FFY 2007; the state only reported two in its APR for FFY 2008. Both were from a single LEA

### Correction of Any Remaining Findings of Noncompliance from FFY 2006 or Earlier (if applicable):

Provide information regarding correction using the same table format provided above for findings reported in the FFY 2007 APR.

1. Number of remaining FFY 2006 findings noted in OSEP's June 2010 FFY 2008 APR response table for this indicator	2
2. Number of remaining FFY 2006 findings the State has verified as corrected	0
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	2

See narrative above for additional information.

### Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
In reporting on correction of noncompliance in the FFY 2009 APR, the State must report that it verified that each LEA with noncompliance identified in FFY 2008: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with Memo 09-02. In the FFY 2009, the State must describe the specific actions that were	Unfortunately, the state cannot report that findings of noncompliance identified during FFY 2008 have been corrected within one year. The paragraphs above describe the nature of the continuing noncompliance, the state's efforts to bring about correction, and state's verification procedures.



**APR Template – Part B (4)****Wyoming**

taken to verify the correction.	
If the State does not report 100% compliance in the 2009 FFY APR, the State must review its improvement activities and revise them, if necessary.	The WDE did not report 100% compliance for FFY 2009. The State has reviewed its improvement activities and revised them as necessary.
The State must demonstrate, in the FFY 2009 APR, that the remaining three findings of noncompliance identified in FFY 2007 and the remaining two findings of noncompliance identified in FFY 2006 that were not reported as corrected in the FFY 2008 APR were corrected.	Although the findings of noncompliance from FFY 2007 have been corrected, the two outstanding findings from FFY 2006 have not yet been corrected. The LEA in question has made notable progress, but the WDE is not confident that every student in the district is receiving FAPE in the LRE.
In responding to Indicators 11, 12 and 13 in the FFY 2009 APR, the State must report on the correction of the noncompliance described in this table under those indicators.	The state has reported on these corrections under Indicators 11, 12, and 13.
In reporting on Indicator 15 in the FFY 2009 APR, the State must use the Indicator 15 Worksheet.	In reporting on Indicator 15, Wyoming completed the Indicator 15 Worksheet and included it in the FFY 2009 APR submitted to the Department of Education.

# APR Template – Part B (4)

# Wyoming

## PART B INDICATOR 15 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2008(7/1/08 to 6/30/09)	(a) # of Findings of noncompliance identified in FFY 2008 (7/1/08 to 6/30/09)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of youth with IEPs graduating from high school with a regular diploma.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
2. Percent of youth with IEPs dropping out of high school.	Dispute Resolution: Complaints, Hearings			
14. Percent of youth who had IEPs, are no longer in secondary school and who have been competitively employed, enrolled in some type of postsecondary school or training program, or both, within one year of leaving high school.		0	0	0
3. Participation and performance of children with disabilities on statewide assessments.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	12	12	10
7. Percent of preschool children with IEPs who demonstrated improved outcomes.	Dispute Resolution: Complaints, Hearings	2	2	2
4A. Percent of districts identified as having a significant discrepancy in the rates of suspensions and expulsions of children with disabilities for greater than 10 days in a school year.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0

## APR Template – Part B (4)

## Wyoming

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2008(7/1/08 to 6/30/09)	(a) # of Findings of noncompliance identified in FFY 2008 (7/1/08 to 6/30/09)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
4B. 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.	Dispute Resolution: Complaints, Hearings	0	0	0
5. Percent of children with IEPs aged 6 through 21 -educational placements.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
6. Percent of preschool children aged 3 through 5 – early childhood placement.	Dispute Resolution: Complaints, Hearings	1	1	1
8. 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.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
9. Percent of districts with disproportionate representation of	Monitoring Activities: Self-Assessment/ Local	0	0	0

## APR Template – Part B (4)

## Wyoming

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2008(7/1/08 to 6/30/09)	(a) # of Findings of noncompliance identified in FFY 2008 (7/1/08 to 6/30/09)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
racial and ethnic groups in special education that is the result of inappropriate identification.	APR, Data Review, Desk Audit, On-Site Visits, or Other			
10. Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.	Dispute Resolution: Complaints, Hearings	0	0	0
11. 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.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	30	101	101
	Dispute Resolution: Complaints, Hearings	0	0	0
12. 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.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	5	5	5
	Dispute Resolution: Complaints, Hearings	0	0	0
13. Percent of youth aged 16 and above with IEP that includes appropriate measurable postsecondary goals that are annually	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site	40	40	40

## APR Template – Part B (4)

## Wyoming

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2008(7/1/08 to 6/30/09)	(a) # of Findings of noncompliance identified in FFY 2008 (7/1/08 to 6/30/09)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
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 service needs.	Visits, or Other			
	Dispute Resolution: Complaints, Hearings	0	0	0
Other areas of noncompliance: <b>Extended School Year (ESY)</b> <b>Procedural Compliance</b> <b>Comprehensive Evaluations</b> <b>Eligibility Determinations</b>	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	16	32	29
	Dispute Resolution: Complaints, Hearings	3	3	3
Other areas of noncompliance: <b>Assistive Technology</b>	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2	3	3
	Dispute Resolution: Complaints, Hearings	1	1	1
Other areas of noncompliance:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0

## APR Template – Part B (4)

## Wyoming

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2008(7/1/08 to 6/30/09)	(a) # of Findings of noncompliance identified in FFY 2008 (7/1/08 to 6/30/09)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Dispute Resolution: Complaints, Hearings	0	0	0
Sum the numbers down Column a and Column b			201	196
Percent of noncompliance corrected within one year of identification = (column (b) sum divided by column (a) sum) times 100.			(b) / (a) X 100 =	97.51

<b>Monitoring Priority: Effective General Supervision Part B/General Supervision</b>
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**Indicator –16:** Percent of signed, written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint, or because the parent (or individual or organization) and the public agency agree to extend the time to engage in mediation or other alternative means of dispute resolution, if available in the State.

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

**Measurement:** Percent =  $[(1.1(b) + 1.1(c)) \text{ divided by } 1.1] \text{ times } 100$ .

**Data Source:** Data collected on Table 7 of Information Collection 1820-0677 (Report of Dispute Resolution under Part B of the Individuals with Disabilities Education Act).

FFY	Measurable and Rigorous Target
<b>2009</b> (2009 – 2010)	<b>100%</b> of complaints resolved within appropriate timeline

**Actual Target Data for FFY 2009:**

School Year	Complaints (number)	Complaints Withdrawn (number)	Complaints Extended for Exceptional Circumstances	Complaints Resolved within 60-day timeline (number)	Percent of Complaints with Reports Issued that were Resolved within 60-day Timeline (percent)
2009 - 2010	14	3	2	9	100%

**Explanation of Progress or Slippage that occurred for FFY 2009:**

WDE is reporting 100% of all complaints resolved within appropriate timeline. The target of 100% for Indicator 16 was met.

The WDE experienced an increase in the number of signed, written complaints received from five in FFY 2008 to fourteen in FFY 2009. Of the fourteen state complaint requests received by WDE, three were withdrawn or dismissed and eleven had reports issued. Of the eleven signed, written complaints with reports issued, nine reports were issued within the 60 day timeline and 2 were extended due to exceptional circumstances with reports issued after the 60 day timeline. Of the eleven complaints with reports issued, eight resulted in findings of noncompliance requiring corrective action by the LEAs to address the noncompliance. The remaining three complaints resulted in no findings of noncompliance.

The state believes a variety of factors continue to affect the number of complaints received by the WDE including heightened accountability for the outcomes of students with disabilities and a growing knowledge

base among parents and advocacy groups of how their children are progressing through the system. WDE continues to monitor trends in complaint investigations to inform technical assistance offered to districts and parent advocacy groups. WDE continues to offer training to complaint investigators, additionally complaint investigators are encouraged to participate in the complaint investigator's work group sponsored by Technical Assistance for Excellence in Special Education (TAESE).

WDE has also noticed a trend in the large percentage of complaints that have dealt with students with disabilities in more restrictive classroom settings, as well as with students with more significant needs. In an effort to confront this trend, WDE has added a stable hypothesis concerning students with low-incidence disabilities to the CIFM process to make sure the needs of these students are being met.

**Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.



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

**Indicator –17:** Percent of adjudicated due process hearing requests that were adjudicated within the 45-day timeline or a timeline that is properly extended by the hearing officer at the request of either party or in the case of an expedited hearing, within the required timelines.

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

**Measurement:** Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100.

**Data Source:** Data collected on Table 7 of Information Collection 1820-0677 (*Report of Dispute Resolution under Part B of the Individuals with Disabilities Education Act*).

FFY	Measurable and Rigorous Target
2009 (2009 – 2010)	100% of due process hearings fully adjudicated within 45-day timeline

**Actual Target Data for FFY 2009:**

FFY	# of Due Process Hearing Requests Filed	# of Due Process Hearing Requests Withdrawn	# of Due Process Hearings Requests Adjudicated	# of Due Process Hearings Fully Adjudicated Within 45-Day Timeline	# of Due Process Hearing Requests Pending
2009	1	0	1	1	0

**Explanation of Progress or Slippage that occurred for FFY 2009:**

WDE is reporting 100% of due process hearings fully adjudicated within 45-day timeline. The target of 100% for Indicator 17 was met.

Data indicate an increase in due process hearing requests from zero in FFY 2008 to one in FFY 2009. The one due process complaint filed in FFY 2009 was fully adjudicated and resulted in a decision within the 45 day timeline.

While FFY 2009 saw an increase in due process hearing requests, WDE continues to maintain a very low rate of due process hearing requests. Despite the low numbers of due process complaints filed, WDE continues to offer early dispute resolution guidance and encourages the use of mediation and resolution as a means to resolve disputes in a timely manner and as amicably as possible. The WDE continues to provide training to contracted due process officers and be participants in the due process officer's work group sponsored by Technical Assistance for Excellence in Special Education (TAESE).

**Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

## APR Template – Part B (4)

## Wyoming

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

**Indicator –18:** 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))

**Measurement:** Percent = (3.1(a) divided by 3.1) times 100.

**Data Source:** Data collected on Table 7 of Information Collection 1820-0677 (Report of Dispute Resolution under Part B of the Individuals with Disabilities Education Act).

FFY	Measurable and Rigorous Target
<b>2009</b> (2009 – 2010)	<b>100%</b> of resolution sessions conducted within timeline and resulting in agreement

### Actual Target Data for FFY 2009:

FFY	# of Due Process Hearing Requests Filed	# of Resolution Sessions Held	# of Resolution Sessions Conducted within Timeline and Resulting in Agreements
2009	1	0	0

### Explanation of Progress or Slippage that occurred for FFY 2009:

WDE reports 0% (0/1) of resolution sessions conducted within timeline and resulting in agreement. The target of 100% for Indicator 18 was not met.

Wyoming had only one due process case during FFY 2009. The single case was fully adjudicated and did not have a resolution session. Despite the very low numbers of due process complaints filed in Wyoming, WDE offers early resolution guidance, encourages the use of mediation and resolution sessions as a means of resolving disputes in a timely manner. The WDE requires annual training for contracted due process hearing officers including participation in the hearing officer work group sponsored by Technical Assistance for Excellence in Special Education (TAESE).

Although the State does not meet the *n* size for reporting, improvement activities were developed in FFY 2007.

### Discussion of Improvement Activities Completed:

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific

improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

## APR Template – Part B (4)

## Wyoming

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

**Indicator –19:** Percent of mediations held that resulted in mediation agreements.

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

**Measurement:** Percent =  $[(2.1(a)(i) + 2.1(b)(i)) \text{ divided by } 2.1] \text{ times } 100$ .

**Data Source:** Data collected on Table 7 of Information Collection 1820-0677 (Report of Dispute Resolution under Part B of the Individuals with Disabilities Education Act).

FFY	Measurable and Rigorous Target
<b>2009</b> (2009 – 2010)	<b>100%</b> of mediations result in mediation agreements

#### Actual Target Data for FFY 2009:

FFY	Number of Mediation Requests	Number of Mediation Requests withdrawn	Number of Mediations Resulting in Agreement	Number of Mediations Not Resulting in Agreement
2009	4	1	2	1

#### Explanation of Progress or Slippage that occurred for FFY 2009:

WDE is reporting 66.7% (2/3) of mediations result in mediation agreements. The target of 100% for Indicator 19 was not met.

The number of mediations requests in FFY 2009 increased from one in FFY 2008 to four in FFY 2009. All four mediation requests were not related to due process hearing requests. Of the four mediation requests, one request was withdraw. Of the three remaining mediations held, two resulted in agreements and one did not. For FFY 2009, 66.7% of meetings resulted in agreements.

Guidance from OSEP indicates that states are not required to establish baseline or targets until the reporting period in which the number of mediations reaches ten or greater. The WDE's total number of mediation requests for FFY 2009 was four. Therefore, WDE does not need to establish a baseline or targets for this indicator at this time.

WDE continues to encourage parents, LEAs and advocacy groups to utilize early dispute procedures. The WDE provides training to contracted mediators and invites them to participate in a mediators' work group sponsored by Technical Assistance for Excellence in Education (TAESE).

**Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

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

**Indicator –20:** State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

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

**Measurement:** State reported data, including 618 data, State Performance Plan and Annual Performance Reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity; placement; November 1 for exiting, discipline, personnel and dispute resolution; and February 1 for Annual Performance Reports and assessment); and
- b. Accurate, including covering the correct year and following the correct measurement.

**Data Source:** State selected data sources, including data from State data system, SPP/APR, assessment system, as well as technical assistance and monitoring systems.

FFY	Measurable and Rigorous Target
2009 (2009 – 2010)	100% for timeliness; 100% for accuracy

**Actual Target Data for FFY 2009:**

The WDE reports a combined timeliness and accuracy percentage of 98.88%. The target of 100% for Indicator 20 was not met.

**Valid and Reliable Data:**

The WDE has a strong student-level, longitudinal data system able to track individual student progress over time and through their educational career. WDE has the ability to use valid, reliable and consistent information to make decisions across the educational sector. In order to do this, the State has implemented all Ten Essential Elements of high-quality longitudinal data systems.

The WDE is in its sixth year of implementing the Wyoming Integrated Statewide Education (WISE) Data System. The system was designed to collect, certify and transform school district data into standardized data sets. WISE has decreased the probability of collection errors and reduces the need for edit reviews or data quality checking.

The WISE Data System provides timely and accurate data about each student. It uses the data for government reporting more efficiently through vertical reporting. Vertical reporting coordinates the data flow through electronic transfer and improves the quality and timeliness of the reporting process.

All 48 school districts in Wyoming are members of the Schools Interoperability Framework (SIF) Association. The national data standards provided by the SIF Association have generated compatibility, consistency and comparability of data. Wyoming is considered to have the leading educational information system in the country because of incorporation of SIF data standards.

The WDE is also participating in the *EDFacts* initiative with the U.S. Department of Education, the State Education Agencies and other collaborators to centralize all state-reported data into one federally coordinated K-12 educational data repository. The purpose of *EDFacts* is to:

- Increase the focus on outcomes and accountability rather than process
- Provide robust K-12 business intelligence by integrating student achievement and Federal program performance data
- Reduce data collection burden for ED and the states
- Ensure that cost-effective, timely and high-quality data are available to continuously assess the educational progress and performance of the Department, state and local agencies
- Provide data for program planning, policy development and management

*EDFacts* includes several components including the Educational Data Exchange Network (EDEN) and the EDEN Submission System (ESS). States report data to EDEN using the EDEN Submission System, an electronic system facilitating the efficient and timely transmission of data from SEA's to the Department. Data is transmitted by the states to meet the data requirements of annual and final grant reporting, specific program mandates and data supporting the Government Performance and Results Act.

Additionally, beginning with the 2009 – 2010 school year, the WDE instituted a data accuracy check on a sample of student files reviewed during internal indicator desk audits (such as the Indicator 13 file review). In past years, WDE monitoring activities have uncovered discrepancies between district reported data and information found in actual student files. In order to ascertain a further measure of districts' data accuracy, WDE staff compare the following student-level items from district data reports with details from special education files:

- Primary Disability
- LRE (placement category)
- Specialized Instruction
- Assistive Technology
- Related Services
- Extended School Year

WDE collected this information in each of the state's 48 districts during FFY 2009, and the results are one component of the state's determinations formula for LEAs.



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### Indicator 20 Data Rubrics:

SPP/APR Data - Indicator 20			
APR Indicator	Valid and Reliable	Correct Calculation	Total
1	1		1
2	1		1
3A	1	1	2
3B	1	1	2
3C	0	N/A	0
4A	1	1	2
4B	1	1	2
5	1	1	2
7	1	1	2
8	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	1	1	2
13	1	1	2
14	1	1	2
15	1	1	2
16	1	1	2
17	1	1	2
18	1	1	2
19	1	1	2
		<b>Subtotal</b>	38
<b>APR Score Calculation</b>	<b>Timely Submission Points</b> - If the FFY 2009 APR was submitted on-time, place the number 5 in the cell on the right.		5
	<b>Grand Total</b> - (Sum of subtotal and Timely Submission Points) =		43.00

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618 Data - Indicator 20					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 - Child Count Due Date: 2/1/10	1	1	1	1	4
Table 2 - Personnel Due Date: 11/1/10	1	1	1	N/A	3
Table 3 - Ed. Environments Due Date: 2/1/10	1	1	1	1	4
Table 4 - Exiting Due Date: 11/1/10	1	1	1	N/A	3
Table 5 - Discipline Due Date: 11/1/10	1	1	1	N/A	3
Table 6 - State Assessment Due Date: 2/1/11	1	N/A	N/A	N/A	1
Table 7 - Dispute Resolution Due Date: 11/1/10	1	1	1	N/A	3
				<b>Subtotal</b>	21
<b>618 Score Calculation</b>			<b>Grand Total</b> (Subtotal X 2.143) =		45.00

Indicator #20 Calculation	
A. APR Grand Total	43.00
B. 618 Grand Total	45.00
C. APR Grand Total (A) + 618 Grand Total (B) =	88.00
Total N/A in APR	1
Total N/A in 618	0
<b>Base</b>	<b>89.00</b>
D. Subtotal (C divided by Base*) =	0.989
E. Indicator Score (Subtotal D x 100) =	98.88

**Discussion of Improvement Activities Completed:**

The status of ongoing improvement activities in Appendix A consists of two tables: The first table sets forth the results of all completed activities/strategies and the deleted activities; the second table contains the new or revised improvement strategies going forward. WDE has revised both tables by grouping the improvement strategies into eight improvement areas numbered as follows: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. The improvement strategies are color coded to reflect their status.

**Additional Information Required by the OSEP APR Response Table for this Indicator:**

Statement from the Response Table	State's Response
The State must review its improvement activities and revise them, if necessary, to ensure they will enable the State to provide data in the FFY 2009 that it is in compliance with the timely and accurate data reporting requirements in IDEA sections 616 and 618 and 34 C.F.R. §§76.720 and 300.601(b).	The WDE has reviewed all improvement activities for the FFY 2009 APR. Some activities have been revised in order to better ensure compliance with the timely and accurate data reporting requirements in IDEA sections 616 and 618 and 34 C.F.R. §§76.720 and 300.601(b).
In reporting on Indicator 20 in the FFY 2009 APR, the State must use the Indicator 20 Data Rubric.	For the FFY 09 APR, WDE included the completed Indicator 20 Data Rubric

**Appendix A**

Appendix A contains the Improvement Activity Table for the FFY 2009 APR. The Improvement Activity Table lists each of the improvement activities organized by improvement area. The table also gives a brief description of improvement strategies, resources accessed and the Indicator for which it is designed to improve. There are eight improvement areas: 1) TA/PD, 2) Transition, 3) LRE, 4) Pre-service, 5) Parent, 6) Timely Correction, 7) Dispute Resolution, and 8) Data. Each improvement area has specific improvement strategies which may be reported in more than one performance indicator. Each improvement strategy is color-coded describing the activity as completed/deleted, continuing, revised, or new, as shown below:

Light pink	Completed/Deleted
Light green	Continuing
Light blue	Revised
Light purple	New

**Table 1: Improvement Activities Chart**

Improvement Area 1: TA/PD			
Improvement Strategies	TA Resources Accessed	Results	Indicators
<b>Activity 1.1: Implement Positive Behavioral Interventions and Supports (PBIS) in secondary settings across the state to facilitate an increase in student engagement, the likelihood students will graduate, and successful post-school outcomes; as well as a decrease in students dropping out.</b>  This is a revised activity.	WDE PBIS Coordinator  WDE Special Programs Division and contract consultants  University of Oregon (PBIS.org)  Data Driven Enterprises  School-Wide Information Systems (SWIS)  Partners for Learning	The WDE provides training, on-site technical assistance, and coaching in the implementation of their data-driven, problem-solving model designed to improve academic and behavioral outcomes for all students. During FFY2009 PBIS trainings were provided across the state in four regions for School-wide PBIS and tier two interventions. There were more than 200 district, school, and institutional educators. In addition, the WDE provided two cross agency, tier three trainings for 125 LEA staff members who work directly with students with severe behavioral needs. This training was a collaborated effort between the WDE, UPLIFT, the University of Oregon, and LEA psychologists/social workers.  To increase statewide awareness and knowledge of a system of tiered	1, 2, 5, 14, 15

		<p>supports for behavior and academics, the WDE presented introductory overviews and supporting research at various conferences and meetings. Through these opportunities, the WDE saw a 225% increase in the number of applications from schools seeking the State's support in this area between the fall of 2008 and the fall of 2009.</p> <p>During FFY2009, the WDE contracted with the University of Wyoming for two doctoral students to work with two internal WDE staff members to provide regional coaching support to schools participating in the project. These coaches provided on-site coaching sessions, resources, feedback regarding data, and assistance with problem solving (both at the student and the system level).</p> <p>See Display 1-2 and 2-2, for related individual indicator data.</p>	
<p><b>Activity 1.2:</b> <i>Enhance district staff skills and knowledge in identifying students who are at risk of dropping out and identifying and using evidence-based practices to improve student performance and graduation rates and decrease dropout rates through ongoing sustainable professional development and technical assistance.</i></p> <ul style="list-style-type: none"> <li>WDE annually provides professional development activities involving evidence-based practices through the systems-change initiatives of Response to Intervention and Positive Behavior Interventions and Supports.</li> <li>Technical assistance is</li> </ul>	<p>WDE Special Programs Division</p> <p>MPRRC</p> <p>State Advisory Panel</p> <p>NPSO</p> <p>NSTTAC</p> <p>Cambium Learning Group/Voyager</p>	<p>The WDE has completed the two-year process of merging the PBIS and RtI initiatives into one integrated three-tiered intervention framework. In FFY2009 the <i>Wyoming System of Instructional Supports (WYSIS)</i> had the first cohort of 28 schools trained in a systematically integrated academic and behavioral model of supports. A key component of this model is a robust screening system which identifies students who are at risk for failure and/or dropping out, and having interventions in place when this early detection is present. See data results in Display 1-2 and 2-2.</p> <p>In addition to supporting WySIS schools, the WDE provided state-wide professional development in evidence-based practices for literacy and behavior, student engagement, and</p>	1, 2

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<p>provided to districts through statewide trainings and targeted technical assistance requests.</p> <p>This is a revised activity.</p>		<p>dropout prevention. PD took place through the Annual Teton Institute, Annual Education Leadership Symposium, Bi-annual School Improvement Conferences, as well as various educational association conferences.</p> <p>Through the examination of state-wide data, the WDE was able to identify areas of need for state-wide targeted technical assistance. Monthly technical assistance sessions were then provided to all districts and educational institutions in the following areas:</p> <ul style="list-style-type: none"> <li>• Timely and accurate data collections</li> <li>• Indicator 11</li> <li>• ESY</li> <li>• LRE</li> <li>• Secondary transition</li> <li>• IEPs resulting in educational benefit</li> </ul>	
<p><b>Activity 1.3:</b> <i>Design an integrated professional development and technical assistance system which supports school improvement efforts.</i></p> <ul style="list-style-type: none"> <li>• Representatives from the Special Programs Division are part of the team that oversees the Statewide System of Support providing targeted technical assistance to school districts across Wyoming in accordance with 20 U.S.C.A. §6301-6578 of the ESEA.</li> <li>• The WDE provides direct support and technical assistance to districts and individual schools to help them build capacity for meaningful change that will</li> </ul>	<p>WDE Special Programs Division</p> <p>NWRCC</p> <p>NPDCI</p> <p>University of Oregon PBIS</p> <p>RTI/IRIS Center</p> <p>Center on Instruction</p>	<p>The WDE with the support of the North West Regional Comprehensive Center, developed a scoring rubric that placed each district into one of three levels. This leveling system enabled the department to prioritize the support to the districts. The “determination level” (34 C.F.R. §300.60) of each district is part of the scoring rubric used to assign each district to one of the three levels. Districts in Level One receive limited support from the WDE; mostly in the form of information and guidance. Level Two Districts receive more support from the WDE in the form of on-site technical assistance and guidance provided by a WDE consultant. Level Three districts are those that are in various stages of corrective action (resulting from both state and/or federal requirements) including the requirements of IDEA. These districts are assigned a coach who</p>	<p>1, 2, 3, 4, 5, 13, 14, 15</p>

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<p>improve academic outcomes.</p> <p>This is a revised activity.</p>		<p>then works closely with the district's leadership team.</p> <p>Data are shared with the SSOS Oversight Team , WDE Consultants, and Coaches regarding outcomes for students with disabilities and any issues of noncompliance in order to inform the overall district and school improvement efforts.</p>	
<p><b>Activity 1.4:</b> <i>Annually review AYP data to identify schools/districts meeting AYP for the cohort of students with IEPs. Gather information about evidence-based reading and math programs and progress monitoring tools that are proving successful in those schools. Post information on WDE website to make available statewide.</i></p> <ul style="list-style-type: none"> <li>The WDE completed an Instructional Survey designed by NWRCC and began to analyze this information in conjunction with AYP subgroup data.</li> </ul> <p>This activity is completed.</p>	<p>WDE Data and Special Programs Divisions</p> <p>IRIS Center</p> <p>TAESE</p> <p>MPRRC</p> <p>NWRCC</p> <p>NPDCI</p> <p>NWREL</p> <p>STEEP Learning</p> <p>National RTI Center Center on Instruction</p>	<p>In January 2009, Wyoming public elementary schools and middle schools (those with grade 6) were asked to complete the Wyoming Survey of Elementary Instructional Practices. Eighty-four of the 134 elementary schools (63%) and 12 of the 29 middle schools (41%) completed the survey.</p> <p>The WDE completed a review of data gathered around the following topics and compared these data to AYP results:</p> <ol style="list-style-type: none"> <li>1) Building Intervention Teams,</li> <li>2) Professional Development,</li> <li>3) Improvement of Instruction,</li> <li>4) Core Reading and Behavior programs,</li> <li>5) Screening/Progress Monitoring,</li> <li>6) Level of Support for Students,</li> <li>7) Parent Involvement, and</li> <li>8) Early Childhood Programs.</li> </ol>	<p>1, 2, 3</p>
<p><b>Activity 1.5:</b> <i>Collaborate with Title 1 and School Improvement to develop guidance on the benefits and use of Continuous Early Intervening Services (CEIS) strategies and funds. Provide statewide training at statewide conferences.</i></p> <ul style="list-style-type: none"> <li>WDE Special Programs Division staff presented information on the use</li> </ul>	<p>WDE Special Programs Division</p> <p>WDE Federal Programs Division</p> <p>MPRRC</p>	<p>There were two statewide trainings delivered in FFY 2009:</p> <ol style="list-style-type: none"> <li>1) August 2009 at the Federal Programs Summer Camp. Target audience was district administrators.</li> <li>2) October 2009 Online Video Conferencing Training regarding ARRA funds. Special Education Directors and Federal Grant Managers were in attendance</li> </ol>	<p>3, 9, 10</p>

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<p>of CEIS strategies and funds during FFY 2009.</p> <ul style="list-style-type: none"> <li>WDE Staff participated in several work groups at the regional and national level to develop and expand its understanding of ways to utilize CEIS funds.</li> </ul> <p>This is a continuing activity.</p>		<p>3) June 2009 at the Select Committee on Recalibration, specifically provided this committee information regarding how Federal funds could be used in collaboration with state funds. Target audience was state legislature.</p> <p>May 2009 SEA staff participated in the Regional Resource Center Fiscal Accountability work group 2 day onsite session.</p>	
<p><b>Activity 1.6:</b> <i>Annually conduct a workshop for building administrators on discipline policy implementation at various state level meetings.</i></p> <ul style="list-style-type: none"> <li>The 3rd Annual Special Education Leadership Symposium provided technical assistance to support school improvement efforts on reducing expulsion and suspension.</li> <li>The Wyoming State Legislature passed a bullying statute and required districts to have policies in place by December 2009.</li> </ul> <p>This is a continuing activity.</p>	<p>WDE Special Programs Division</p> <p>WDE Health and Safety Division</p> <p>Contract consultants</p>	<p>The 3rd Annual Special Education Leadership Symposium featured several sessions of “Behavioral Supports.” In addition, there were several legal sessions that specifically targeted discipline and the administration of discipline policies.</p> <p>WDE staff and contract consultants presented at the School Improvement Conference regarding bullying and its connection to the discipline requirements in 34 CFR§§300.530 – 300.536.</p> <p>All school districts in Wyoming had bullying policies in place prior to December 31, 2009.</p>	4, 15
<p><b>Activity 1.7:</b> <i>Develop and provide professional development materials and opportunities for school staff to increase understanding about the parent survey, how to use the data, and strategies for improving parent understanding and involvement. Make material available on the web for just-in-time access.</i></p> <ul style="list-style-type: none"> <li>WDE provided each of</li> </ul>	<p>WDE Special Programs Division and contract consultants</p> <p>WY Deaf/Blind Project</p> <p>Data Driven Enterprises</p> <p>PIC</p>	<p>In January 2011, WDE provided each district a detailed report of the spring 2010 parent survey results. Guidance was provided to the districts on how to interpret the report. Each district was asked to encourage parents to respond to the parent survey in the spring of 2010.</p> <p>WDE Special Programs staff, in collaboration with Data Driven Enterprises, offers an annual data share out meeting for all 48 districts. The data share out meeting is an opportunity for</p>	8, 16, 17, 18, 19



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<p>the 48 districts a detailed report of the parent survey results.</p> <ul style="list-style-type: none"> <li>The WY Deaf/Blind Project provided a workshop to service providers and school staff on improving the understanding of the grief process parents undergo when their child is identified as having a disability.</li> </ul> <p>This is a continuing activity.</p>	<p>UPLIFT Early Hearing and Detection Intervention (EHDI)</p>	<p>districts to review data from the parent survey.</p> <p>The workshop sponsored by the WY Deaf/Blind Project drew 38 participants from approximately 10 school districts and 10 Child Development Centers. The EHDI gathered the outcome data and these data were not made available. Anecdotal data indicated that the service providers and educators stated that the information provided fresh insight into working with families of students with disabilities.</p>	
<p><b>Activity 1.8:</b> <i>Collect, customize, and disseminate guidance related to comprehensive evaluations in all areas of suspected disability.</i></p> <p>This activity was implemented and completed during FFY 2009.</p>	<p>WDE Special Programs Division and contract consultants</p> <p>MPRRC</p> <p>EIEP</p>	<p>Through the examination of data and on-site monitoring visits, WDE recognized the need to provide guidance and ongoing technical assistance in this area.</p> <p>In response to statewide need for guidance and TA, the WDE included the topic of comprehensive evaluations during two of its monthly calls with LEA directors and staff in the fall of 2009. The WDE also collaborated with the Wyoming Association of School Psychologists on a guidance document specifically designed for school psychologists, who are often tasked with spearheading evaluation teams. The WDE and EIEP collaborated on one statewide developmental preschool training in the spring of 2010 (during which evaluation procedures were a major topic) and provided additional technical assistance to specific school districts during targeted sessions.</p> <p>Finally, the WDE drafted and published a guidance document on reevaluation practices, which was posted in late 2009 on the WDE's public website.</p> <p>The WDE will revisit this topic with specific LEAs in the future as needs</p>	<p>9, 10, 11, 12, 15</p>

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		dictate  The EIEP provides ongoing TA to all the Regional CDCs through on-site visits and TA, as well as the examination of comprehensive evaluations through the new web based data system.	
<p><b>Activity 1.9:</b> <i>Identify districts/CDCs that are doing well with meeting the 60-day timeline. Generate with them strategies they have found to be successful. Develop a TA document to post on the web.</i></p> <ul style="list-style-type: none"> <li>The Early Intervention and Education Program (EIEP) of the Department of Developmental Disabilities identified CDCs that were meeting the 60-day timeline, as well as, those not meeting the 60-day timeline through a desk audit.</li> <li>The WDE provided feedback to districts regarding data submitted during the Risk-Based Self-Assessment. Indicator 11 was a required component of the RBSA.</li> <li>The WDE Special Programs Division and Data Driven Enterprises provide districts with data notebooks for review prior to the annual data share out.</li> </ul> <p>This is a continuing activity.</p>	<p>WDE Special Programs Division</p> <p>Early Intervention and Education Program</p> <p>Data Driven Enterprises (DDE)</p> <p>LEAs</p> <p>CDCs</p>	<p>Technical assistance is provided to all Regional CDCs below 100% compliance.</p> <p>Annual data share out meetings and district specific data notebooks for all 48 school districts, provide valuable information, support and instruction in analyzing data and targeting areas of challenge.</p> <p>Districts provide policy level assurances and child level evidence of correction.</p> <p>Through review of district data and analysis of the systems they use to track initial evaluations, the WDE shared specific strategies, which districts are using to be effective, in this area.</p> <p>This presentation was provided to all school districts, as a technical assistance document and as an ongoing staff training tool.</p>	11
<p><b>Activity 1.10:</b> <i>Provide technical assistance to CDCs to ensure</i></p>	<p>WDE Special Programs Division</p>	<p>The EIEP provides information to all Regional CDCs for their continuous</p>	11, 12

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<p><i>knowledge of and compliance with IDEA.</i></p> <p>This is a continuing activity.</p>	<p>EIEP</p> <p>MPRRC</p>	<p>program improvement throughout the year via phone conferences, email and face-to-face meetings. The EIEP's new web based data system was in place the Summer of 2010.</p>	
<p><b>Activity 1.11:</b> Report data back to each individual CDC to provide information for continuous program improvement.</p> <p>This is a continuing activity.</p>	<p>WDE Special Programs Division</p> <p>EIEP</p> <p>Data Driven Enterprises</p>	<p>The EIEP provides information to all Regional CDCs for their continuous program improvement throughout the year via phone conferences, email and face-to-face meetings. The EIEP's new web based data system was in place the Summer of 2010.</p>	<p>11, 12</p>
<p><b>Activity 1.12:</b> Provide Regional TA training to CDCs regarding State and Federal regulations relating to the provision of special education services.</p> <p>This is a continuing activity.</p>	<p>EIEP</p> <p>WDE and contract consultants</p> <p>MPRRC</p>	<p>The EIEP provides information to all Regional CDCs for their continuous program improvement throughout the year via phone conferences, email and face-to-face meetings. The EIEP's new web based data system was in place the Summer of 2010.</p>	<p>7, 11, 12</p>
<p><b>Improvement Area 2: Transition</b></p>			
Improvement Strategies	TA Resources Accessed	Results	Indicators
<p><b>Activity 2.1:</b> Increasing the number of districts and higher education facilities implementing Project Eye to Eye by one college and one district per year.</p> <ul style="list-style-type: none"> <li>WDE continued to provide collaboration of Casper College and Natrona County School District #1 in implementing Project Eye to Eye during the 2009-2010 school year.</li> </ul> <p>This is a continuing activity.</p>	<p>WDE Special Programs Division</p> <p>National Eye to Eye Coordinator</p> <p>Community Colleges</p> <p>University of Wyoming</p> <p>LEAs Middle and High Schools</p>	<p>Wyoming added a Project Eye to Eye Chapter at Western Wyoming Community College (WWCC) and Sweetwater County School District #1 which will begin implementation during the 2010-11 school year.</p> <p>Coordinators and mentors from Casper College and Western Wyoming Community College were trained at the Project Eye to Eye Organizing Institute for the 2010-2011 school year. One school in Natrona School District #1 was able to demonstrate through Measures of Academic Progress (MAP) scores student mentees who participated in Project Eye to Eye made</p>	<p>1, 2, 8, 14</p>

		significant growth between Spring 2009 to 2010.	
<b>Activity 2.2:</b> <i>Improve communication and transition support efforts between Service agencies and districts for students as they exit public education.</i> <ul style="list-style-type: none"> <li>WDE provides communication and representation through continued membership on the State of Wyoming Governor’s State Rehabilitation Council (SRC).</li> </ul> <p>This is a continuing activity.</p>	WDE Special Programs Division  Department of Vocational Rehabilitation and Workforce Services  LEAs Middle and High Schools	Through continuing membership on the SRC, information about service providers available statewide is shared between those agencies and LEAs. The DVR/SRC state plan of 2009 identifies Students in Transition as one of the greatest areas of rehabilitation need in this state.  Since 2006 the number of students served by DVR has almost doubled largely through the efforts of DVR (hiring and designating a transition coordinator) and improved communication with State LEAs.	13

### Improvement Area 3: LRE

Improvement Strategies	TA Resources Accessed	Results	Indicators
<b>Activity 3.1:</b> <i>Based on accurate data collection from institutions, WDE will verify the accuracy of reported data and facilitate effective transition planning for students returning to resident districts from separate facility or court-ordered placements.</i> <p>This is a revised activity.</p>	WDE Federal Programs, Information Management, and Special Programs Divisions	WDE Special Programs and Federal Programs Divisions continue to work together to provide institutions and residential facilities with guidance and information regarding the provision of FAPE and implementation of IEP services to students in court ordered placements. Key Federal Programs staff and administrators from various residential service facilities attended the WDE’s Leadership Symposium (July 2009), which included specific sessions on serving students in separate facilities.  Federal Programs and Special Programs Division staff members also collaborated on the development of	1, 2, 5, 20

		<p>common definitions of related services (to ensure consistency across various institutions in the state) and worked together on cost studies for special education services. The two divisions also produced guidance regarding which parties bear responsibility for different aspects of programming for students in residential placements.</p> <p>Students in residential and court-ordered placements are included in the State's CIFM system. When school districts are selected for monitoring, students placed in these settings are not excluded from review (including on-site, self-assessment and desk audit reviews). Since ensuring the delivery of FAPE is the resident district's responsibility, the WDE seeks to ensure that the rights of each student with a disability are protected, regardless of placement.</p>	
<p><b>Activity 3.2:</b> <i>Provide consultation and supports (e.g., access to technology, access to materials) to schools to ensure students who have visual impairments or are deaf/hard of hearing are able to remain in the home school environment and make educational progress.</i></p> <ul style="list-style-type: none"> <li>On-site consultation for school districts and Child Development Centers statewide are offered throughout the school year by trained professionals of the Outreach Services for the Blind/Visually Impaired or the Deaf/Hard of Hearing. These specialized consultants offer districts and CDCs evidence-based strategies that can be incorporated into a student's daily curriculum.</li> </ul>	<p>WDE Special Programs Division</p> <p>Outreach Services for the Visually Impaired (SVI)</p> <p>Outreach Services for the Deaf/Hard of Hearing (DHH)</p> <p>WY Deaf/Blind Project</p> <p>Department of Health Maternal Child &amp; Health</p> <p>Wyoming Life Resource Center (WLRC)</p> <p>WATR</p>	<p>WDE Staff in both the Outreach Services for the Visually Impaired and the Deaf/Hard of Hearing provided consultation and support to students with disabilities ages 3 – 21 years of age. Over 360 onsite visits to schools and preschools were conducted by Services for the Visually Impaired Staff. In addition, they supported educational teams at 4 institutions in the State, through consultation and on site visits.</p> <p>Consultants supporting the Deaf/Hard of Hearing provided onsite support to 397 schools/preschools and 20 institutions.</p> <p>In an effort to increase internal capacity of district and regional preschool staff to address the needs of deaf/hard of hearing and blind/low vision students, the WDE supported 17 statewide trainings, and over 114 regional, web, or video based trainings.</p>	1, 2, 3, 5, 15

## APR Template – Part B (4)

## Wyoming

This is a continuing activity.	WIND NIMAC Northern Rockies Association for the Education and Rehabilitation of the Blind and Visually Impaired (NRAER) Texas Tech University	Additionally, the WDE continued its partnership with Texas Tech University in an effort to increase the number of teachers with certification in low incidence disability categories.	
Improvement Area 4: Pre-Service			
Improvement Strategies	TA Resources Accessed	Results	Indicators
<p><b>Activity 4.1:</b> <i>Develop a recruitment/retention system to assist LEAs in the recruiting and retaining of special education administrators, teachers, and related service providers.</i></p> <ul style="list-style-type: none"> <li>WDE, in collaboration with Texas Tech University, provided a distance learning opportunity for local educators to build state capacity of highly qualified instructors: Teachers for the Visually Impaired, Teachers of the Deaf / Hard of Hearing, Certified Orientation and Mobility Instructors and Teachers of the Deaf-Blind.</li> <li>One purpose of the State Personnel Development Grant (SPDG) is to assist schools in the implementation of a three-</li> </ul>	WDE Special Programs Division National Personnel Center Projects Wyoming Diversity Task Force NASDSE NCCREST University of Wyoming Texas Tech University Wyoming Deaf-Blind Project	<p>The WDE continued its partnership with Texas Tech University in an effort to increase the number of teachers with certification in low incidence disability categories. Twelve of thirteen participants in the first cohort of distant education representing nine LEAs and two Developmental Preschool Regions, entered the practicum/internship phase of the program. Eight educators, representing four districts and three preschool regions will make up the second cohort.</p> <p>The WDE has also completed the two-year process of merging the PBIS and RtI initiatives into one integrated three-tiered intervention framework. In FFY2009 the <i>Wyoming System of Instructional Supports (WYSIS)</i> had the first cohort of 28 schools trained in a systematically integrated academic and behavioral model of supports. For added support the WDE contracted with the University of Wyoming for two</p>	3, 5, 13, 15

## APR Template – Part B (4)

## Wyoming

<p>tiered model of support (academic and behavior) for all struggling learners. A primary focus of the SPDG is to ensure implementation with fidelity through the provision of coaching and mentoring to LEAs involved in the RtI and PBIS projects.</p> <p>This is a revised activity.</p>		<p>doctorial students to work with two internal WDE staff members to provide regional coaching to schools participating in the project. In addition to doing fidelity checks on the systems of these schools, the coaches also provided on-site coaching sessions, resources, feedback regarding data, and assistance with problem solving (both at the student and the system level).</p>	
Improvement Area 5: Parents			
Improvement Strategies	TA Resources Accessed	Results	Indicators
<p><b>Activity 5.1:</b> <i>Annually review survey data results with PIC and UPLIFT to identify collaborative strategies for increasing meaningful parent involvement.</i></p> <ul style="list-style-type: none"> <li>The WDE recognizes that this improvement strategy has been fully implemented. However the resources listed have been a part of several stakeholder groups where Indicator 8 information has been discussed and input gathered.</li> </ul> <p>This is a continuing activity.</p>	<p>WDE Special Programs Division and contract consultants</p> <p>Data Driven Enterprises</p> <p>PIC</p> <p>UPLIFT</p> <p>EIEP</p>	<p>WDE staff presented the Spring 2010 parent survey results to the Wyoming State Advisory Panel in fall of 2010. Communication was a particularly low sub area on the parent survey and there was a robust discussion about activities the parent organizations could conduct in order to increase parent participation and understanding of the Special Education process.</p>	<p>8, 16, 17, 18, 19</p>
Improvement Area 6: Timely Correction			
Improvement Strategies	TA Resources Accessed	Results	Indicators
<p><b>Activity 6.1:</b> <i>Use database to aggressively track LEA</i></p>	<p>WDE Special Programs Division</p>	<p>WDE and Data Driven Enterprises have worked extensively to build an user-</p>	<p>15, 16, 17</p>



<p><i>implementation of corrective actions, including those developed as a result of dispute resolution or monitoring.</i></p> <ul style="list-style-type: none"> <li>WDE and Data Driven Enterprises continued mutual efforts to develop a Corrective Action Plan (CAP) database.</li> <li>WDE and Customer Expressions Corporation have collaborated to develop a database specific to dispute resolution issues (WYTracker).</li> </ul> <p>This is a revised activity.</p>	<p>Data Driven Enterprises (DDE)</p> <p>Customer Expression Corporation</p>	<p>friendly database that captures key components of the CIFM system, aggressively track LEA implementation of corrective actions, and track the State's technical assistance efforts related to CAPs.</p> <p>CAP database content is managed by WDE staff, and technical aspects are maintained by DDE staff. The database provides an accurate history of LEA Corrective Action Plans, status of current improvement activities, timeline notifications, verification efforts, documentation, and more. When fully operational, the database will allow WDE staff to run reports, assign tasks, and track longitudinal data related to districts' efforts to correct findings.</p> <p>For tracking related to dispute resolution, the WDE's contract with Customer Expressions Corp. enables the WDE to effectively keep track of documentation, contacts with parties involved, timelines, and Corrective Action Plan activities specifically related to dispute resolution.</p>	
<p><b>Activity 6.2:</b> <i>Review compliance findings with LEA Special Education Directors through conference presentations, regional trainings, and conference calls. Disseminate effective improvement and correction strategies through similar means.</i></p> <ul style="list-style-type: none"> <li>WDE staff presented CIFM summary information to the General Supervision Stakeholder Group in September of 2009.</li> <li>Based in part on frequent monitoring findings, WDE Special</li> </ul>	<p>WDE Special Programs Division and contract consultants</p>	<p>In September of 2009, the WDE presented its annual summary of the previous school year's monitoring results. The presentation is designed to keep local administrators informed about common issues identified through the WDE's monitoring system and to help them proactively address areas that may need attention in their own districts.</p> <p>After a successful first year in FFY 2008, the WDE continued its series of monthly TA conference calls. Each call targeted a specific area of special education, and areas were selected in large part due to their frequency as findings of noncompliance.</p> <p>At the spring 2010 WASEA meeting,</p>	<p>15, 16, 17</p>



<p>Programs staff developed a series of monthly technical assistance conference calls for Special Education directors.</p> <ul style="list-style-type: none"> <li>The CIFM summary information was also presented to the LEA Special Education Directors at the Fall WASEA (Wyoming Association of Special Education Administrators) meeting in September 2009.</li> </ul> <p>This is a revised activity.</p>		<p>WDE staff conducted a “real-time” data analysis exercise with full input from LEA special education directors. WDE staff demonstrated how directors might disaggregate their own district data to identify and address potential compliance problems before WDE intervention.</p> <p>Finally, the WDE again held “Data Share-Out” meetings with LEA special education directors in the fall of 2009. At these meetings, directors are provided with user-friendly summaries of special education data on each applicable SPP indicator, and data are disaggregated and arranged in order to highlight areas of potential interest. The WDE has found that LEA directors are becoming much more savvy about their own data as they begin to understand more about how the WDE uses the data it collects.</p>	
<p><b>Activity 6.3:</b> <i>Distribute resources about WDE general supervision of IDEA to LEA administrators and School Boards.</i></p> <ul style="list-style-type: none"> <li>WDE Special Programs staff provides resources and information regarding IDEA’s general supervision requirements to LEA administrators and School Boards through a variety of formats (email, webpage, face-to-face meetings, etc.)</li> </ul> <p>This is a revised activity.</p>	<p>WDE Special Programs Division MPRRC</p>	<p>Staff members from the Special Programs Division presented information regarding the General Supervision System to school district superintendents during meetings in Sept. In addition, the General Supervision System is a recurring theme at the local special education directors fall and spring meetings each year. During on-site monitoring visits, the team lead meets with district leadership including the superintendent to share information about the Continuous Improvement – Focused Monitoring System with the connection between compliance and outcomes for students with disabilities.</p> <p>An important breakthrough in providing technical assistance to one of our largest districts occurred in December when staff from this division worked through an activity with district staff similar to the data drill down conducted</p>	<p>15, 16, 17</p>

		<p>prior to an on-site visit. This activity was very beneficial in modeling the use of data to inform policy, procedure and practice.</p> <p>Special Programs staff members are now presenting on a regular basis during annual meetings to superintendents, elementary and secondary principals regarding the use of data in our system of general supervision.</p>	
<p><b>Activity 6.4:</b> <i>Based on the directives and recommendations of OSEP's verification visit report, WDE and EIEP will make appropriate changes to refine the Part B monitoring system for Developmental Preschool Regions.</i></p> <p>This activity was revised. The system through which Wyoming's Developmental Preschool Regions are monitored for Part B will change, pending direction from OSEP.</p>	<p>WDE Special Programs Division and contract consultants</p> <p>EIEP</p>	<p>While the WDE and EIEP still plan to modify existing Part B monitoring procedures for the regional Developmental Preschools, both agencies determined that an external evaluation was no longer needed. Rather than reviewing aspects of the preschool monitoring process that are known to be in need of revision, both agencies plan to collaborate on improving preschool Part B monitoring procedures based on feedback to be contained in OSEP's verification visit report (which is expected in early 2011).</p> <p>The creation of a new Memorandum of Understanding (MOU) that meets Part B requirements will be a first step in the revision process. Once the new MOU and monitoring structure are in place, the revised monitoring system will be piloted in FFY 2011.</p>	15
<b>Improvement Area 7: Dispute Resolution</b>			
<b>Improvement Strategies</b>	<b>TA Resources Accessed</b>	<b>Results</b>	<b>Indicators</b>
<p><b>Activity 7.1:</b> <i>Collect, customize, and disseminate resources relating to effective communication skills, content knowledge, and early dispute</i></p>	<p>WDE Special Programs Division and contract consultants</p>	<p>The WDE conducted professional development trainings across the state cross-walking federal regulations with the WDE Model forms. The parent/LEA relationship was a central theme</p>	8, 16, 17, 18, 19

## APR Template – Part B (4)

## Wyoming

<p><i>resolution in order to improve the working relationship between parents and school staff.</i></p> <ul style="list-style-type: none"> <li>During FFY 2009 the WDE conducted professional development activities statewide for parent and family advocates, parent liaisons, family coordinators, and family support specialists.</li> </ul> <p>This activity is revised.</p>	<p>MPRRC P&amp;A EIEP PIC UPLIFT</p>	<p>regarding the ongoing process and responsibility for Individualized Education Programs. Members of parent support organization were encouraged to attend the annual Leadership Symposium to receive further training in IDEA requirements and the dispute resolution process.</p> <p>Another of the underlying themes in each of the trainings was early dispute resolution through compliance with federal regulations.</p> <p>The Special Programs Division continues to hold the annual Leadership Symposium and supports the attendance of parents and parent support groups by waiving the registration fee. The Wyoming Advisory Panel for Students with Disabilities also meets during that time to accomplish strategic planning and setting their priorities for the year.</p>	
<p><b>Activity 7.2:</b> <i>Modify the WDE dispute resolution database to capture due process data as required by IDEA 2004.</i></p> <ul style="list-style-type: none"> <li>Throughout FFY 2009, WDE launched its newly dispute resolution database.</li> </ul> <p>This activity is completed.</p>	<p>WDE Special Programs Division  Customer Expression Corporation</p>	<p>WDE staff track all dispute resolution components including state complaints, due process hearings and early dispute resolution components.</p> <p>The development of reports and other customization continues to increase the use of the database.</p>	<p>16, 17, 18, 19</p>
<p><b>Improvement Area 8: Data</b></p>			
<p><b>Improvement Strategies</b></p>	<p><b>TA Resources Accessed</b></p>	<p><b>Results</b></p>	<p><b>Indicators</b></p>
<p><b>Activity 8.1:</b> <i>Conduct annual data share out with Special Education staff in order to clarify data collection sources. Monitor</i></p>	<p>WDE Special Programs Division  Data Driven</p>	<p>WDE Special Programs staff, in collaboration with Data Driven Enterprises, offers an annual data share out meeting for all 48 districts. The data</p>	<p>13, 20</p>

## APR Template – Part B (4)

## Wyoming

<p><i>data submissions and provide ongoing technical assistance in the provision of valid and reliable data through annual data share out, state and regular conferences, and one-on-one discussions.</i></p> <ul style="list-style-type: none"> <li>The WDE Special Programs Division and Data Driven Enterprises provide districts with data notebooks for review prior to the annual data share out.</li> </ul> <p>This is a continuing activity.</p>	Enterprises (DDE)	share out meetings have been a valuable tool for explaining to districts the importance of valid and accurate reporting, relaying the message of timeliness, and teaching districts how to interpret their data to use with LEA staff. WDE continues to monitor the data submissions and provide ongoing technical assistance for improvement in data collections.	
<p><b>Activity 8.2:</b> <i>Update the internal data collection and submission procedural manual.</i></p> <ul style="list-style-type: none"> <li>The WDE Special Programs Division participates in cross-unit monthly calls to develop and align data elements, business rules, and requirements for all state data requirements.</li> </ul> <p>This is a continuing activity.</p>	WDE Data and Special Programs Divisions	Each statewide data collection has a collection guidebook and the WDE staff members conduct annual training sessions available to all districts.	20
<p><b>Activity 8.3:</b> <i>Participate in the EdFacts initiative to convert all 618 reporting to the EDEN system.</i></p> <ul style="list-style-type: none"> <li>Special Programs Division staff attend the biannual CCSSO sponsored EIMAC meetings.</li> </ul> <p>This is a continuing activity.</p>	WDE Data and Special Programs Divisions	WDE Special Programs Division staff collaborates with EDEN Coordinator to align and prepare EDEN submissions. Wyoming continues to work on the Assessment table but all other Part B 618 tables have been approved for EDEN only submission.	20
<p><b>Activity 8.4:</b> <i>Update EIEP forms and database to maintain and improve efficient data</i></p>	EIEP Staff WDE Special	The Regional CDCs use the “model” IEP forms developed by the WDE. The new web- based data system, implemented	20

## APR Template – Part B (4)

## Wyoming

<i>submission.</i> This is a revised activity.	Programs Division	in the Summer of 2010, used by the EIEP and all the Regional CDCs also uses the “model” forms developed by the WDE.  The EIEP provides TA on an ongoing basis to all Regional CDCs.	
<b>Activity 8.5:</b> <i>Implement a new web-based data system for better collection of data, which will allow the EIEP to provide better TA to the CDCs.</i>  This activity is completed.	EIEP and contract consultants		11

**Table 2: New and Revised Improvement Activities Chart**

Improvement Strategy	Timelines				Resources
	FFY years when activities will occur				
	2009	2010	2011	2012	
<b>Activity 1.1:</b> <i>Implement Positive Behavioral Interventions and Supports (PBIS) in secondary settings across the state to facilitate an increase in student engagement, the likelihood students will graduate, and successful post-school outcomes; as well as a decrease in students dropping out.</i>	X	X	X	X	WDE PBIS Coordinator WDE Special Programs Division and contract consultants University of Oregon (PBIS.org) Data Driven Enterprises School-Wide Information Systems (SWIS) Partners for Learning
<b>Activity 1.2:</b> <i>Enhance district staff skills and knowledge in identifying students who are at risk of dropping out and identifying and using evidence-based practices to improve student performance and graduation rates and decrease dropout rates through ongoing sustainable professional development and technical assistance.</i>	X	X	X	X	WDE Special Programs Division MPRRRC State Advisory Panel NPSO NSTTAC Cambium Learning Group/Voyager

## APR Template – Part B (4)

## Wyoming

<ul style="list-style-type: none"> <li>WDE annually provides professional development activities involving evidence-based practices through the systems-change initiatives of Response to Intervention and Positive Behavior Interventions and Supports.</li> <li>Technical assistance is provided to districts through statewide trainings and targeted technical assistance requests.</li> </ul>					
<p><b>Activity 1.3:</b> <i>Design an integrated professional development and technical assistance system which supports school improvement efforts.</i></p> <ul style="list-style-type: none"> <li>Representatives from the Special Programs Division are part of the team that oversees the Statewide System of Support providing targeted technical assistance to school districts across Wyoming in accordance with 20 U.S.C.A. §6301-6578 of the ESEA.</li> </ul> <p>The WDE provides direct support and technical assistance to districts and individual schools to help them build capacity for meaningful change that will improve academic outcomes.</p>	X	X	X	X	WDE Special Programs Division NWRCC NPDCI University of Oregon PBIS RTI/IRIS Center Center on Instruction
<p><b>Activity 1.4:</b> <i>Annually review AYP data to identify schools/districts meeting AYP for the cohort of students with IEPs. Gather information about evidence-based reading and math programs and progress monitoring tools that are proving successful in those schools. Post information on WDE website to make available statewide.</i></p> <ul style="list-style-type: none"> <li>The WDE completed an Instructional Survey designed by NWRCC and began to analyze this information in conjunction with AYP subgroup data.</li> </ul>	X	X	X	X	WDE Data and Special Programs Divisions IRIS Center TAESE MPRRRC NWRCC NPDCI NWREL STEEP Learning National RTI Center Center on Instruction

## APR Template – Part B (4)

## Wyoming

<p><b>Activity 1.7:</b> <i>Develop and provide professional development materials and opportunities for school staff to increase understanding about the parent survey, how to use the data, and strategies for improving parent understanding and involvement. Make material available on the web for just-in-time access.</i></p> <ul style="list-style-type: none"> <li>WDE provided each of the 48 districts a detailed report of the parent survey results.</li> <li>The WY Deaf/Blind Project provided a workshop to service providers and school staff on improving the understanding of the grief process parents undergo when their child is identified as having a disability.</li> </ul>	X	X	X	X	WDE Special Programs Division and contract consultants WY Deaf/Blind Project Data Driven Enterprises PIC UPLIFT Early Hearing and Detection Intervention (EHD)
<p><b>Activity 1.8:</b> <i>Collect, customize, and disseminate guidance related to comprehensive evaluations in all areas of suspected disability.</i></p>	X	X	X	X	WDE Special Programs Division and contract consultants MPRRC EIEP
<p><b>Activity 1.9:</b> <i>Identify districts/CDCs that are doing well with meeting the 60-day timeline. Generate with them strategies they have found to be successful. Develop a TA document to post on the web.</i></p> <ul style="list-style-type: none"> <li>The Early Intervention and Education Program (EIEP) of the Department of Developmental Disabilities identified CDCs that were meeting the 60-day timeline, as well as, those not meeting the 60-day timeline through a desk audit.</li> <li>The WDE provided feedback to districts regarding data submitted during the Risk-Based Self-Assessment. Indicator 11 was a required component of the RBSA.</li> <li>The WDE Special Programs Division and Data Driven Enterprises provide districts with</li> </ul>	X	X	X	X	WDE Special Programs Division Early Intervention and Education Program Data Driven Enterprises (DDE) LEAs CDCs

## APR Template – Part B (4)

## Wyoming

data notebooks for review prior to the annual data share out.					
<b>Activity 1.10:</b> <i>Provide technical assistance to CDCs to ensure knowledge of and compliance with IDEA.</i>	X	X	X	X	WDE Special Programs Division EIEP MPRRC
<b>Activity 1.11:</b> <i>Report data back to each individual CDC to provide information for continuous program improvement.</i>	X	X	X	X	WDE Special Programs Division EIEP Data Driven Enterprises
<b>Activity 3.1:</b> <i>Based on accurate data collection from institutions, WDE will verify the accuracy of reported data and facilitate effective transition planning for students returning to resident districts from separate facility or court-ordered placements.</i>	X	X	X	X	WDE Federal Programs, Information Management, and Special Programs Divisions
<b>Activity 3.2:</b> <i>Provide consultation and supports (e.g., access to technology, access to materials) to schools to ensure students who have visual impairments or are deaf/hard of hearing are able to remain in the home school environment and make educational progress.</i> <ul style="list-style-type: none"> <li>On-site consultation for school districts and Child Development Centers statewide are offered throughout the school year by trained professionals of the Outreach Services for the Blind/Visually Impaired or the Deaf/Hard of Hearing. These specialized consultants offer districts and CDCs evidence-based strategies that can be incorporated into a student's daily curriculum.</li> </ul>	X	X	X	X	WDE Special Programs Division Outreach Services for the Visually Impaired (SVI) Outreach Services for the Deaf/Hard of Hearing (DHH) WY Deaf/Blind Project Department of Health Maternal Child & Health Wyoming Life Resource Center (WLRC) WATR WIND NIMAC Northern Rockies Association for the Education and Rehabilitation of the Blind and Visually Impaired (NRAER) Texas Tech University
<b>Activity 4.1:</b> <i>Develop a recruitment/retention system to assist LEAs in the recruiting and retaining of special education administrators, teachers, and related service providers.</i> <ul style="list-style-type: none"> <li>WDE, in collaboration with Texas Tech University, provided a distance</li> </ul>	X	X	X	X	WDE Special Programs Division National Personnel Center Projects Wyoming Diversity Task Force NASDSE NCCRESt University of Wyoming Texas Tech University



## APR Template – Part B (4)

## Wyoming

<p>learning opportunity for local educators to build state capacity of highly qualified instructors: Teachers for the Visually Impaired, Teachers of the Deaf / Hard of Hearing, Certified Orientation and Mobility Instructors and Teachers of the Deaf-Blind.</p> <ul style="list-style-type: none"> <li>One purpose of the State Personnel Development Grant (SPDG) is to assist schools in the implementation of a three-tiered model of support (academic and behavior) for all struggling learners. A primary focus of the SPDG is to ensure implementation with fidelity through the provision of coaching and mentoring to LEAs involved in the Rtl and PBIS projects.</li> </ul>					Wyoming Deaf-Blind Project
<p><b>Activity 6.1:</b> <i>Use database to aggressively track LEA implementation of corrective actions, including those developed as a result of dispute resolution or monitoring.</i></p> <ul style="list-style-type: none"> <li>WDE and Data Driven Enterprises continued mutual efforts to develop a Corrective Action Plan (CAP) database.</li> <li>WDE and Customer Expressions Corporation have collaborated to develop a database specific to dispute resolution issues (WYTracker).</li> </ul>	X	X	X	X	WDE Special Programs Division Data Driven Enterprises (DDE) Customer Expression Corporation
<p><b>Activity 6.2:</b> <i>Review compliance findings with LEA Special Education Directors through conference presentations, regional trainings, and conference calls. Disseminate effective improvement and correction strategies through similar means.</i></p> <ul style="list-style-type: none"> <li>WDE staff presented CIFM summary information to the General Supervision Stakeholder Group in September of 2009.</li> </ul>	X	X	X	X	WDE Special Programs Division and contract consultants

## APR Template – Part B (4)

## Wyoming

<ul style="list-style-type: none"> <li>Based in part on frequent monitoring findings, WDE Special Programs staff developed a series of monthly technical assistance conference calls for Special Education directors.</li> <li>The CIFM summary information was also presented to the LEA Special Education Directors at the Fall WASEA (Wyoming Association of Special Education Administrators) meeting in September 2009.</li> </ul>					
<b>Activity 6.3:</b> <i>Distribute resources about WDE general supervision of IDEA to LEA administrators and School Boards.</i> <ul style="list-style-type: none"> <li>WDE Special Programs staff provides resources and information regarding IDEA's general supervision requirements to LEA administrators and School Boards through a variety of formats (email, webpage, face-to-face meetings, etc.)</li> </ul>	X	X	X	X	WDE Special Programs Division MPRRC
<b>Activity 6.4:</b> <i>Based on the directives and recommendations of OSEP's verification visit report, WDE and EIEP will make appropriate changes to refine the Part B monitoring system for Developmental Preschool Regions.</i>	X	X	X	X	WDE Special Programs Division and contract consultants EIEP
<b>Activity 7.1:</b> <i>Collect, customize, and disseminate resources relating to effective communication skills, content knowledge, and early dispute resolution in order to improve the working relationship between parents and school staff.</i> <ul style="list-style-type: none"> <li>During FFY 2009 the WDE conducted professional development activities statewide for parent and family advocates, parent</li> </ul>	X	X	X	X	WDE Special Programs Division and contract consultants MPRRC P&A EIEP PIC UPLIFT

**APR Template – Part B (4)****Wyoming**

liaisons, family coordinators, and family support specialists.					
<b>Activity 8.4:</b> <i>Update EIEP forms and database to maintain and improve efficient data submission.</i>	X	X	X	X	EIEP Staff WDE Special Programs Division

**Appendix B**



## UNITED STATES DEPARTMENT OF EDUCATION

OFFICE OF ELEMENTARY AND SECONDARY EDUCATION

NOV 16 2010

ASSISTANT SECRETARY

The Honorable Jim McBride  
 State Superintendent of Public Instruction  
 Wyoming Department of Education  
 Hathaway Building, 2<sup>nd</sup> Floor  
 2300 Capitol Avenue  
 Cheyenne, Wyoming 82002-0050

Dear Superintendent McBride:

I am writing in response to Wyoming's request to waive certain statutory and regulatory requirements of Title I, Part A of the Elementary and Secondary Education Act of 1965 (ESEA), as amended. Specifically, Wyoming requested one-year waivers of the requirements to assess all students annually in grades 3 through 8 and once in high school in reading/language arts and mathematics and in three grade spans in science, and to use the results of the reading/language arts and mathematics assessments to make adequate yearly progress (AYP) determinations for schools and districts. Wyoming requested these waivers because of a systemic malfunction of its new online assessment system that prevented the state from collecting valid statewide assessment data for the 2009–2010 school year.

After reviewing Wyoming's request, and in consideration of the exceptional circumstances forming the basis of the request, I am granting Wyoming waivers of the following statutory and regulatory requirements:

- Section 1111(b)(3)(A) and 34 C.F.R. § 200.2(a)(1), which require a state to assess students annually in reading/language arts, mathematics, and science.
- Section 1111(b)(3)(C)(vii) of the ESEA and 34 C.F.R. § 200.5(a)(2), which require a state to assess annually students in reading/language arts and mathematics in each of grades 3 through 8 and at least once in grades 10 through 12.
- Section 1111(b)(3)(C)(v)(II) and 34 C.F.R. § 200.5(b), which require a state to assess students in science at least once during each of three specified grade spans.
- Section 1116(a)(1)(A) and 34 C.F.R. § 200.30, which require an LEA to use the state's academic assessments and other academic indicators described in the state plan to review the progress of each school to determine whether the school is making AYP.
- Section 1116(c)(1)(A) and 34 C.F.R. § 200.50(a), which require a state to use the state's academic assessments and other academic indicators to review the progress of each LEA to determine whether the LEA is making AYP.

I would like to reiterate, as I stated in my May 26, 2010 letter to you, that assurances from a contractor that a test will be administered properly are not sufficient to relieve your agency of its statutory and regulatory obligations. However, due to the statewide failure of Wyoming's online assessment system, I am granting a one-year waiver of the statutory and regulatory requirements listed above. These waivers are granted on the conditions detailed in the enclosure to this letter. Please be sure to review the enclosure carefully, particularly as it indicates that Wyoming must provide documentation that ensures that the state will address any future test administration problems so that the state can make AYP determinations.

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Alexa Posny, Assistant Secretary for Special Education and Rehabilitative Services, has asked me to remind you that these waivers will affect Indicators 3 and 20 of the State's Federal fiscal year (FFY) 2009 Annual Performance Report (APR) under Part B of the Individuals with Disabilities Education Act (IDEA) to be submitted to the Office of Special Education Programs (OSEP) by February 1, 2011. Data collected for the 2009–2010 school year on Table 6 (Report of the Participation and Performance of Students with Disabilities on State Assessments), which is due on February 1, 2011, will also be impacted by the lack of valid assessment data. OSEP encourages Wyoming to provide any available valid and reliable FFY 2009 (2009–2010) assessment data for children with disabilities, including data from its alternate assessment (the PAWS-ALT), an explanation of the circumstances regarding the lack of complete FFY 2009 data, and the steps being taken to ensure the State can collect the required data in school year 2010–2011. Since Wyoming has indicated that the school year 2009–2010 administration of the PAWS-ALT was not affected, those data should be reported in their entirety. OSEP will consider this information when it reviews Wyoming's FFY 2009 APR.

For guidance on submitting assessment and accountability data for the 2009–2010 Consolidated State Performance Report, please contact Ross Santy of the Office of Planning, Evaluation, and Policy Development at [Ross.Santy@ed.gov](mailto:Ross.Santy@ed.gov).

If you have any questions, please contact Victoria Hammer of my staff at [Victoria.Hammer@ed.gov](mailto:Victoria.Hammer@ed.gov) or 202-260-1438.

Sincerely,



Thelma Meléndez de Santa Ana, Ph.D.

Enclosure

cc: Governor Dave Freudenthal  
Alan Moore

## APR Template – Part B (4)

## Wyoming

Thelma Meléndez de Santa Ana  
Assistant Secretary for Elementary and Secondary Education  
U.S. Department of Education  
400 Maryland Av., W.W.  
Washington, D.C. 20202-6100

December 16, 2010

Dear Assistant Secretary Meléndez de Santa Ana:

Thank you for granting Wyoming a one-year waiver of certain statutory and regulatory requirements under Sections 1111(b)(3), 1116(a)(1)(A), and 34 C.F.R 200 specified in your letter of November 16, 2010. This letter is to provide documentation that ensures that Wyoming will address any future test administration problems so that the state can make AYP determinations, as a required condition of the waiver.

Wyoming has met or will meet each condition of the waivers. Please see Attachments A and B which document that the following conditions have been or will be met.

Wyoming assigned all schools and districts the same improvement status as they were assigned based on 2008-2009 assessment results and results and has reported these statuses on state and district report cards providing results of assessments administered in 2009-2010. Furthermore, Wyoming assures that it will certify and submit the 2009-2010 Consolidated State Performance Report on or before December 17, 2011. The Report will use the improvement status results as they were assigned based on 2008-2009 assessment.”

Except with respect to high schools, no school or district had its improvement status changed as a result of repeating last year’s AYP results (i.e., no school or district exited, entered, or move further into improvement status).

Every school and district will continue to carry out all required improvement activities based on its assigned improvement status (e.g., offering public school choice and supplemental educational services.)

Each high school that did not meet the other academic indicator (graduation rate), and so would not make AYP regardless of student results on the statewide assessments or participation rate, has entered or moved further into school improvement status, as appropriate.

Wyoming has taken the following corrective action and has in place the following processes for ensuring AYP determinations can be made in 2011 and successive years:

- The sole reason for the request for this waiver was the significant malfunction of Wyoming’s online assessment system provided by our testing vendor, resulting in invalid achievement data from the Proficiency Assessments for Wyoming Students (PAWS) used in making achievement determinations. In order to ensure this could never happen again, the decision was made to delete the online components of the Proficiency Assessments for Wyoming Students (PAWS). These assessments will be paper-and-pencil formats in 2011 and successive years. This will eliminate the possibility that the assessment system will fail due to failure of an online delivery platform. Please find the Attachment C, which documents this change in the design of PAWS.

## **APR Template – Part B (4)**

## **Wyoming**

Please feel free to contact me by phone or email at [supt@educ.state.wy.us](mailto:supt@educ.state.wy.us) if you have any questions regarding this request. Thank you for your consideration.

Sincerely,

Jim McBride, Ed.D.

Cc: Alexa Posny  
Ruth Ryder