



# Wyoming Annual Performance Report For Special Education FFY 2011

Wyoming Department of Education Special Programs Division 320 West Main Street Riverton, WY 82501 http://edu.wyoming.gov

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## Wyoming Annual Performance Report for Special Education FFY 2011 (2011-2012)

Submitted to the Office of Special Education Programs U.S. Department of Education February 15, 2013

Wyoming Department of Education Special Programs Division 320 West Main Street Riverton, WY 82501 http://edu.wyoming.gov

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|               | <del>-</del>   |                      |
|---------------|--|----------------------|
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|                           | A. Enrolled in higher education within one year of leaving high school.   |                                |
|---------------------------|---|--------------------------------|
|                           | B. Enrolled in higher education or competitively employed within one year of leaving high school.   |                                |
|                           | C. Enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.   |                                |
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### Acronym List for the Annual Performance Report Acronym Definition

| APR Annual Performance Report AT Assistive Technology AYP Adequate Yearly Progress BHD Behavioral Health Division (Wyoming Department of Health) BI Traumatic Brain Injury CAP Corrective Action Plan CD Cognitive Disability CDC Child Development Center CEIS Coordinated Early Intervening Services COPS Court Ordered Placed Students COSF Child Outcomes Summary Form CSPR Consolidated State Performance Report DAC Data Accountability Center DDD Developmental Disability Center DDD Developmental Disabilities Division (former name of the Wyoming Department of Health, Behavioral Health Division) EDEN Education Data Exchange Network EIEP Early Intervention and Education Program (part of the Wyoming Department of Health, Behavioral Health Division) EIMAC Education Information Management Advisory Consortium EMAPS EDFacts Metadata and Process System ESSA Elementary and Secondary Education Act ESS EDEN Submission System ESY Extended School Year FAPE Free Appropriate Public Education FFY Federal Fiscal Year HI Hearing Impairment IDEA Individualized Education Program IEU Intermediate Education Unit ITEPS Individualized Education Program IEU Intermediate Education Unit ITEPS Individualized Education Agency LER Least Restrictive Environment MOE Maintenance of Effort MOU Memorandum of Understanding MSIP Monitoring and State Improvement Planning (Division of OSEP)     |      | <u>,                                      </u>               |
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| AYP Adequate Yearly Progress BHD Behavioral Health Division (Myoming Department of Health) BI Traumatic Brain Injury CAP Corrective Action Plan CD Cognitive Disability CDC Child Development Center CEIS Coordinated Early Intervening Services COPS Court Ordered Placed Students COSF Child Outcomes Summary Form CSPR Consolidated State Performance Report DAC Data Accountability Center DDD Developmental Disabilities Division (former name of the Wyoming Department of Health, Behavioral Health Division) ED Emotional Disability EDEN Education Data Exchange Network EIEP Early Intervention and Education Program (part of the Wyoming Department of Health, Behavioral Health Division) EIMAC Education Information Management Advisory Consortium EMAPS EDFacts Metadata and Process System ESEA Elementary and Secondary Education Act ESS EDEN Submission System ESY Extended School Year FAPE Free Appropriate Public Education FFY Federal Fiscal Year HI Hearing Impairment IDEA Individuals with Disabilities Education Act IEP Individualized Education Program IEU Intermediate Education Organ IEU Intermediate Education Program IEU Intermediate Education Program IEU Intermediate Education Organ IEU Intermediate Education Program IEU Intermediate Education Organ IEU Learning Disability LEA Local Education Agency IRE Least Restrictive Environment MOE Maintenand of Understanding |      | '  |
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| LRE Least Restrictive Environment  MOE Maintenance of Effort  MOU Memorandum of Understanding   |      |  |
| MOE Maintenance of Effort MOU Memorandum of Understanding   |      | · ·  |
| MOU Memorandum of Understanding   |      |  |
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| MSIP Monitoring and State Improvement Planning (Division of OSEP)   |      | · · · · · · · · · · · · · · · · · · ·                        |
|   | MSIP | Monitoring and State Improvement Planning (Division of OSEP) |

#### **WYOMING**

| MU       | Multiple Disabilities   |
|----------|---|
| n        | Group Size (number)   |
| NCES     | National Center for Educational Statistics                        |
| NCLB     | No Child Left Behind Act  |
| NSTTAC   | National Secondary Transition Technical Assistance Center         |
| OESE     | Office of Elementary and Secondary Education                      |
| OSEP     | Office of Special Education Programs                              |
| PAWS     | Proficiency Assessment of Wyoming Students                        |
| PAWS-ALT | Proficiency Assessment of Wyoming Students – Alternate Assessment |
| PBIS     | Positive Behavior Interventions and Supports                      |
| PD       | Professional Development  |
| PIC      | Parent Information Center   |
| PLAAFP   | Present Levels of Academic Achievement and Functional Performance |
| PSC      | Partners Support Contractors                                      |
| PTI      | Parent Training and Information Centers                           |
| RtI      | Response to Intervention  |
| SEA      | State Education Agency  |
| SIF      | Schools Interoperability Framework                                |
| SIS      | Student Information System  |
| SPDG     | State Personnel Development Grant                                 |
| SPP      | State Performance Plan  |
| SWD      | Students With Disabilities  |
| TA       | Technical Assistance  |
| TAESE    | Technical Assistance for Excellence in Special Education          |
| UPLIFT   | Wyoming Federation of Families for Children's Mental Health       |
| USDE     | United States Department of Education                             |
| VI       | Visual Impairment   |
| WDE      | Wyoming Department of Education                                   |
| WDH      | Wyoming Department of Health                                      |
| WISE     | Wyoming Integrated Statewide Education Data System                |
| WRIR     | Wind River Indian Reservation                                     |

#### Part B State Annual Performance Report (APR) for FFY 2011

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

#### Introduction

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 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 SPP improvement strategies and APR improvement activities impact the SEA's work by providing opportunities to evaluate the effectiveness of state initiatives and programs as well as determine their relevance for students with disabilities. These evaluations can unveil new areas upon which to focus the State's efforts.

The APR for FFY 2011 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.

Last year, with the submission of the revised State Performance Plan and FFY 2010 APR, the Wyoming Department of Education (WDE) set forth its redesigned approach for improving results on the twenty compliance and outcomes indicators. To summarize the approach laid out in the SPP, the WDE uses data, both in the aggregate and analyzed through a variety of drill downs, to develop improvement activities for a specific federal fiscal year. This process is repeated annually to determine the efficacy of the improvement activities and if necessary, to redesign and modify the activities based on the results. The primary vehicle for doing this is the statewide data drilldown. This strategy is laid out in far greater detail in the introduction to the SPP.

The WDE has crafted a consistent structure of the discussion within each indicator. First the aggregate data are laid out, followed by the explanation of progress or slippage. Next is a discussion of the results of the statewide data drilldown as it relates to this indicator. The data could have confirmed the effectiveness of the State's improvement strategies, which would lead to continuing or expanding on those activities. The data could show that in the context of overall improvement, there could be a regression in data for certain subgroups (disabilities groups, age groups, race/ethnicity groups, etc). This could prompt the WDE to redesign its improvement strategies or create new improvement activities based on specific data-based concerns. When data show a negative trend, the WDE refocuses its improvement efforts altogether to create a new approach focused on statewide improvement, as the past activities did not produce the desired effect.

The WDE pursues all promising avenues during the statewide data drilldown in order to achieve two objectives: 1) the Department determines whether or not activities undertaken during the prior year have been effective in improving key data, and 2) the State notes areas of poor performance upon which to focus during the upcoming school year(s). As described in the SPP, the WDE uses this annual data review to identify topics and audiences for professional development and technical assistance and to set priorities for monitoring. However, information from the statewide data drilldown affects all aspects of the general supervision system. It is also used to identify specific areas in which guidance documents are needed, plan focused fiscal oversight, determine staffing needs and more. Ultimately, evaluation of the effectiveness of each activity takes place through measuring the data changes that have or have not taken place. Thus, all of the WDE's general supervision activities begin and end with data—data regarding student results and outcomes.

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In keeping with this framework, the modified structure adopted by WDE for FFY 2010 reporting on its improvement activities is again employed for the FFY 2011 APR. Wyoming's revised SPP describes the broad strategies the State is employing in its general supervision system. The State considers each of these strategies completed within its general supervision system to be improvement activities, since all of them must contribute to improving educational results and functional outcomes for students with disabilities. Appendix B of the APR describes specific steps taken within the Department's system of general supervision during FFY 2011 to address specific needs and areas of weakness within particular indicator areas as noted during the FFY 2011 statewide data drilldown.

#### Wyoming's Broad Stakeholder Input

The WDE Special Programs Division staff collected and analyzed a variety of data to develop the Annual Performance Report for FFY 2011. However, to meet the requirements of IDEA 2004, the WDE Special Programs Division annually solicits broad stakeholder input into the State Performance Plan and Annual Performance Report. As in prior years, Wyoming Advisory Panel for Students with Disabilities (WAPSD) serves to provide this broad stakeholder input as the required membership includes parents, educators, and a variety of state agency representatives (in accordance with 34 C.F.R. §§300.167 - 300.169). 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 conducted by the WDE.

The WAPSD reviewed the SPP/APR indicators and data throughout FFY 2011 as part of their process of developing project priorities for the year. The WDE distributed data and draft narratives for individual sections of the FFY 2011 APR to the panel and incorporated many of the members' suggestions into the final draft prior to submission to the Office of Special Education Programs (OSEP). Additionally, the WDE facilitated data review activities with the WAPSD and LEA directors of special education in order to increase their familiarity with statewide data and obtain data-based feedback on effective improvement activities from these critical stakeholders.

#### **Ensuring Data Accuracy**

The Special Programs Division works in collaboration with the Information Management, Standards, Learning and Accountability, and Assessment Divisions of the WDE in the collection of data regarding students with disabilities ages three through 21 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 reports submitted by local school districts. In addition, the WDE Special Programs Division completes a review of actual student files from each school district in the State to ensure the submitted data are accurate. As a result, the state has confidence that data submitted by school districts continue to be highly accurate.

#### 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 WDE's Special Programs Division. After any revision to the SPP, the document is placed on the WDE website for public review. Each Annual Performance Report (APR) accompanies the SPP documents on the WDE's external website, which can be reviewed at the following URL: <a href="http://edu.wyoming.gov/Programs/special\_education/spp\_apr.aspx">http://edu.wyoming.gov/Programs/special\_education/spp\_apr.aspx</a>. FFY 2011 versions of both documents will be sent to each school district and the BHD through the online process used to provide superintendents and special education directors with memoranda and information from the WDE (Superintendents' Memos).

In addition, each member of the Wyoming Advisory Panel for Students with Disabilities will receive a copy of the SPP and APR documents at the March 2013 meeting. The State's parent advocacy groups will receive information about where the documents can be accessed, and the WDE will encourage these organizations to share this information with parents throughout Wyoming. In addition, presentations at various venues (such as the annual WDE Summer Camp and regional data share-out meetings) will include data from the APR and explanations of progress or slippage

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related to the SPP indicators. The WDE will continue to review and revise its improvement activities and their effect on improving outcomes for students with disabilities through data-based decision making processes.

#### 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 (including the BHD) on the targets in the State Performance Plan. This is accomplished through the issuance of individual school district "Report Cards," which are issued each spring. LEA Report Cards can be reviewed at: <a href="http://edu.wyoming.gov/Programs/special\_education/spp\_apr.aspx">http://edu.wyoming.gov/Programs/special\_education/spp\_apr.aspx</a>. Each District Report Card lists whether a district met the applicable indicator targets. It also compares the district rates to the State rates and to other districts in the population cohort. The District Report Cards, data from the desk audit component of the monitoring system, and results of onsite monitoring visits are used to make *determinations* for each of the local school districts as outlined in Wyoming's Chapter 7 Rules. Determinations and District Report Cards 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 State's general supervision system to determine the need for technical assistance and professional development in the process of preventing possible noncompliance and correcting confirmed noncompliance. These efforts are conducted for the purpose of ensuring positive functional and academic outcomes for children with disabilities ages three through 21 in the State of Wyoming.

#### **Improvement Activity Tables**

The State has included all improvement strategies in Appendix A and improvement activities for FFY 2011 in Appendix B for ease of reference. The Improvement Activity Table lists each of the activities organized by general supervision improvement area. The table outlines the indicator(s) on which each activity is designed to improve performance. The improvement areas are directly aligned to the eight areas of general supervision outlined in the introduction to the State's revised SPP. Each area has been organized to maximize the WDE's resources in order to assist all Wyoming's LEAs in providing and improving their IDEA Part B services to each of the State's students with disabilities.

#### Part B State Annual Performance Report (APR) for FFY 2011

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 Federal Four-Year Adjusted Cohort Graduation Rate or "on-time" graduation rate.

On-Time Graduation Rate =

On-Time Graduates

**Expected On-Time Graduates** 

A graduation cohort is a group of students who begin as first-time 9<sup>th</sup> graders in a particular school year, which is then adjusted over time by adding any students transferring into a cohort in a school and by subtracting any students who transfer out or are otherwise allowed to be removed from the cohort.

| FFY                 | Measurable and Rigorous Target  |
|---------------------|---|
| 2011<br>(2011-2012) | 50.5% of youth with IEPs graduating from high school with a regular diploma |

#### **Actual Target Data for FFY 2011:**

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

|   | Students w/ Disabilities |
|---|--------------------------|
| Number of students who graduated                          | 536                      |
| Number of Students with Disabilities Eligible to Graduate | 937                      |
| Percent of students with disabilities who graduated       | 57.2%                    |

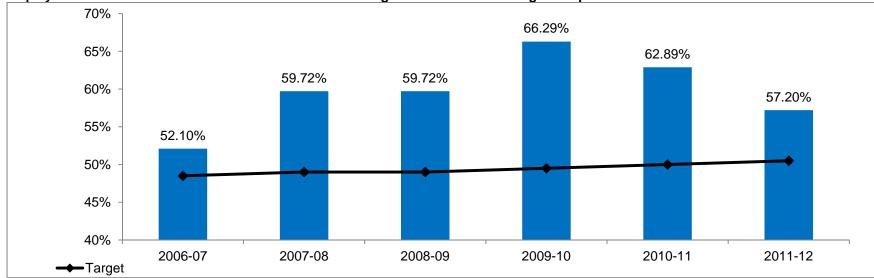
WDE met the target for FFY 2011.

Display 1-2: Graduation Rates for Students with Disabilities and All Students – Results Over Time

| School Year | Overall Graduation Rates* | Number of Overall<br>Graduates | Graduation Rates for<br>Students with Disabilities | Number of Graduating<br>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  |
| 2010-2011   | 80.42%                    | 5,416                          | 62.89%   | 527  |
| 2011-2012   | 79.74%                    | 5,468                          | 57.20%   | 536  |

<sup>\*</sup>Beginning with the 2008-2009 school year, WDE has used the OSEP "data lag" option.

Display 1-3: Percent of Students with Disabilities Graduating in Four Years with Regular Diploma – Results Over Time



#### Valid and Reliable Data

The WDE obtains data for Indicator 1 calculations through the Wyoming Department of Education (WDE) Information Management Division after a rigorous process of validation and adjudication. The data is the same as those reported in the *NCLB* CSPR. Wyoming has aligned the data source and measurement with ESEA; therefore the figures used in this indicator are from 2010-2011 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 four years of English; three years of mathematics; three years of science; three years of social studies. [W.S. §21-2-304(a)(iii)]
- Satisfactorily passing an examination of the principles of the Constitution of the United States and the State of Wyoming. (W.S. §21-9-102)
- Evidence of proficient performance, at a minimum, on the uniform student conduct and performance standards for the common core of knowledge and skills. [W.S. 21-2-304(a)(iii) and (iv)]

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

Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011: For FFY 2011, WDE is reporting 57.2% of youth with IEPs graduated from high school with a regular diploma. The State exceeded its target of 50.5%. Although the WDE is not required to discuss improvement activities and explain slippage, the State felt it was important to share the results of data analysis and improvement strategies with its stakeholders.

As indicated in Display 1-2 and Display 1-3, the graduation rate for students with disabilities increased from FFY 2005 to FFY 2009; however, in FFY 2010 and FFY 2011, the State has seen a decrease in the rate. The 2009-2010 graduation rate marks the first time WDE has used a cohort four-year graduation rate. This means the graduation rate includes only "on-time" graduates who earn a regular diploma within four years of entering high school. Although this rate establishes a uniform and accurate way to calculate and compare graduation rates among states, it means students who take longer than four years to graduate are not counted as graduates.

Also, as Display 1-2 illustrates, graduation rates have decreased for all students in Wyoming over the past two years, and these data are of great concern to the WDE, the Governor's office, the Legislature and the State Board of Education. As a result, the WDE delivers statewide technical assistance and professional development opportunities for all educators on an annual basis to reverse this apparent trend.

Display 1-4: Comparison of 4-Year and 5-Year Graduation Rates for Students with Disabilities – Results Over Time

|  | 4-Year      |              | 5-Year Extended |              |
|--|-------------|--------------|-----------------|--------------|
| Group  | Cohort Size | Grad<br>Rate | Cohort Size     | Grad<br>Rate |
| 2009-10 Cohort<br>(High School Start Year 2006-07) | 838         | 62.9%        | 851             | 67.8%        |

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| 2010-11 Cohort<br>(High School Start Year 2007-08) | 937 | 57.2% | TBD | TBD |
|--|-----|-------|-----|-----|
|--|-----|-------|-----|-----|

As shown in Display 1-4, when students who take longer than five years to earn a regular diploma are included in this calculation, graduation rates for students with disabilities increase. This table shows that the five-year graduation rate for the 2009-10 cohort is 67.8% which represents an increase of about five percentage points over the four-year graduation rate. For the 2010-11 cohort, five-year "extended" graduation rates could not be calculated prior to a timely submission of this APR, but the State looks forward to reporting this data in its Annual Performance Report for FFY 2012.

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

When the statewide drill-down is conducted, the WDE calculates a "proxy" graduation rate. This graduation rate is based on students with disabilities in grades 9-12 in a given school year who had terminal exit codes (graduated with a diploma, graduated with a certificate, dropped-out, or aged out after completing the school year in which they turned 21 years of age). From this group of exiters, the WDE calculates the percentage of students who graduated with a diploma. This serves as the proxy graduation rate. When using this graduation rate calculation, the statewide data drill down revealed:

- The graduation rate for students who are Native American decreased from 39% to 30.6%.
- Graduation rate for students with an Emotional Disability (ED) was 40.9%.

The activities listed below are among those completed during FFY 2011 in order to target these data-based concerns:

- Participated in the Wind River Children's Triad, a partnership between the WDE, WRIR school districts, and many tribal agencies
  representing the Eastern Shoshone and Northern Arapaho tribes to develop educational policies and seek to improve outcomes for
  children on the reservation. During FFY 2011, the Triad developed a TRIAD Truancy Prevention Flowchart, a document which illustrates
  the process districts with Native American students should follow to prevent truancy and make graduation more likely.
- The WDE Special Programs Division and other WDE Divisions collaborated to plan and host Wyoming's second annual Native American Education Conference on the Wind River Indian Reservation.
- The WDE targeted the needs of students with ED during its 2012 Special Education Leadership Symposium, a statewide conference. This included sessions on Strategies for Severe Behavior and Mental Health Needs, Reducing Behavior Problems in the Classroom, Implementation of Wyoming's Rules on Seclusion and Restraint, Weaving Discipline and FAPE, Functional Behavior Assessments and Behavior Intervention Plans, Legal Issues Related to Students with Mental Health Issues, and What All Educators Need to Know About Discipline and Students with Disabilities.
- Trained four Wyoming regional resource coaches to provide technical assistance to schools implementing PBIS.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the State has modified the structure of its improvement activity reporting. This framework of improvement strategies is outlined in the SPP and is aligned with the eight general supervision components articulated by the National Center for Special Education Accountability and Monitoring (NCSEAM). The WDE will continue to implement all the strategies listed during each federal fiscal year.

#### Part B State Annual Performance Report (APR) for FFY 2011

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). 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 (FFY 2009).

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

| FFY                 | Measurable and Rigorous Target                       |
|---------------------|--|
| 2011<br>(2011-2012) | 13.0% of youth with IEPs dropping out of high school |

#### **Actual Target Data for FFY 2011:**

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

|  | Students with Disabilities |
|--|----------------------------|
| Number of students who dropped out                             | 199                        |
| Number of Students with Disabilities in the Cohort Denominator | 3,420                      |
| Percent of students with disabilities who dropped out          | 5.82%                      |

Note: There is a data lag for Indicator 2: the data reported for FFY 2011 reflects 2010-2011 data and aligns with data reported in the CSPR.

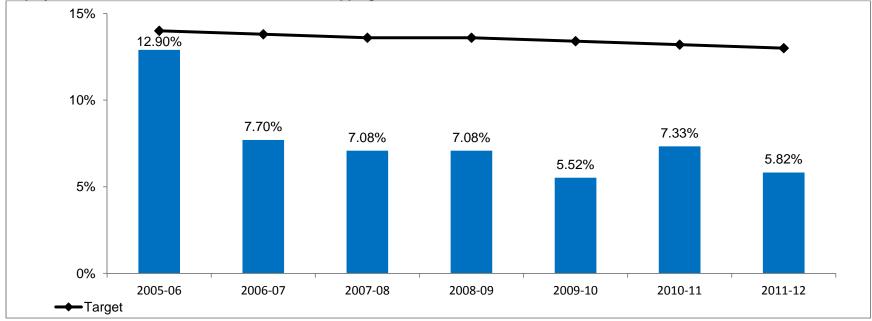
WDE met the target for FFY 2011.

Display 2-2: Drop-out Rates for Students with Disabilities and All Students – Results Over Time

| School Year | Overall<br>Dropout Rate | Overall Number of Students who Dropped Out | Dropout Rate for<br>Students with Disabilities | Number of Students with<br>Disabilities<br>who Dropped Out |
|-------------|-------------------------|--|--|--|
| 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  |
| 2010-2011   | 5.06%                   | 1,416                                      | 7.33%  | 254  |
| 2011-2012   | 3.81%                   | 1,051                                      | 5.82%  | 199  |

<sup>\*</sup>Beginning with the 2008-2009 school year, the WDE has used the OSEP "data lag" option.

Display 2-3: Percent of Students with Disabilities Dropping Out – Results Over Time



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Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011:

For FFY 2011, the WDE reports 5.82% of students with IEPs dropped out of school, far exceeding its target of 13%. In addition, the WDE improved its dropout rate by 1.51 percentage points from FFY 2010. However, despite meeting its target and showing improvement over the past year, the WDE recognizes how critical continued improvement is in this area. The framework of improvement strategies is outlined in the SPP and is aligned with the eight general supervision components. The improvement activities aligned with this indicator can be found in Appendix B.

When the statewide drill-down is conducted, the WDE calculates a "proxy" dropout rate. This dropout rate is based on students with disabilities in grades 9-12 in a given school year who had terminal exit codes (graduated with a diploma, graduated with a certificate, dropped-out, or aged out after completing the school year in which they turned 21 years of age). From this group of exiters, the WDE calculates the percentage of students who dropped out of school. This serves as the proxy graduation rate. When using this calculation, the statewide data drill down revealed:

- From FFY 2010 to FFY 2011, the dropout rate for students with disabilities who are Native American increased from approximately 58% to 62%.
- The dropout rate for students with an Emotional Disability (ED) was roughly 34%.
- Students with disabilities placed in separate facilities had a dropout rate of 18%, and those in court-ordered placements (COPS) had a dropout rate of approximately 45%.

The activities listed below are among those completed during FFY 2011 in order to target these data-based concerns:

- Participated in the Wind River Children's Triad, a partnership between the WDE, WRIR school districts, and many tribal agencies
  representing the Eastern Shoshone and Northern Arapaho tribes to develop educational policies and seek to improve outcomes for
  children on the reservation. During FFY 2011, the Triad developed a TRIAD Truancy Prevention Flowchart, a document which illustrates
  the process districts with Native American students should follow to prevent truancy and make dropping out less likely.
- The WDE Special Programs Division and other WDE Divisions collaborated to plan and host Wyoming's second annual Native American Education Conference on the Wind River Indian Reservation.
- The WDE targeted the needs of students with ED during its 2012 Special Education Leadership Symposium, a statewide conference. This included sessions on Strategies for Severe Behavior and Mental Health Needs, Reducing Behavior Problems in the Classroom, Implementation of Wyoming's Rules on Seclusion and Restraint, Weaving Discipline and FAPE, Functional Behavior Assessments and Behavior Intervention Plans, Legal Issues Related to Students with Mental Health Issues, and What All Educators Need to Know About Discipline and Students with Disabilities.
- The WDE began work on an "Answer Book" guidance document for LEAs concerning their responsibilities for COPS. A variety of stakeholders are providing input and feedback on the document. The WDE will complete the guide during FFY 2012.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the State has modified the structure of its improvement activity reporting. This framework of improvement strategies is outlined in the SPP and is aligned with the eight general supervision components articulated by the National Center for Special Education Accountability and Monitoring (NCSEAM). The WDE will continue to implement all the strategies listed during each federal fiscal year.

#### Part B State Annual Performance Report (APR) for FFY 2011

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

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

| FFY         | Measurable and Rigorous Targets  |
|-------------|--|
| 2011        | <b>3A:</b> Language Arts: Elementary – <b>90</b> %, Middle – <b>78</b> %, High – <b>78</b> % |
| (2011-2012) | Math: Elementary – 90%, Middle – 81%, High – 70%   |

| <b>2011</b> (2011-2012) | <b>3B:</b> Reading Participation – <b>100</b> %  Math Participation – <b>100</b> %  |
|-------------------------|---|
| <b>2011</b> (2011-2012) | 3C: Reading Proficiency: Elementary – 65.20%, Middle – 67.25%, High – 74.20%  Math Proficiency: Elementary – 61.90%, Middle – 62.65%, High – 67.90% |

#### **Actual Target Data for FFY 2011:**

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

| FFY        | % Districts Meeting AYP * and # of Districts Meeting AYP/Districts with a subgroup n>30 by grade level** |                      |                    |                    |  |  |  |
|------------|--|----------------------|--------------------|--------------------|--|--|--|
| 2011       | Language Arts<br>(%)   | Language Arts<br>(n) | <b>Math</b><br>(%) | <b>Math</b><br>(n) |  |  |  |
| Elementary | 0%   | 0/36                 | 36.1%              | 13/36              |  |  |  |
| Middle     | 5.6%   | 1/18                 | 0%                 | 0/18               |  |  |  |
| High       | 0%   | 0/3                  | 0%                 | 0/3                |  |  |  |

Display 3-2: Indicator 3A – WDE did not meet any of the six targets

|            | Language Arts       | Math                |
|------------|---------------------|---------------------|
| Elementary | Did not meet target | Did not meet target |
| Middle     | Did not meet target | Did not meet target |
| High       | Did not meet target | Did not meet target |

<sup>\*</sup>There are 48 school districts in the State of Wyoming.

\*\*The denominator in this category represents the number of districts who meet the subgroup "n" requirement of 30 students. Not all of Wyoming's 48 school districts meet this requirement.

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

|                             | 201  | 2011-2012 Statewide Assessment Participation for Students with Disabilities |         |       |            |        |       |  |  |  |  |
|-----------------------------|--|---|---------|-------|------------|--------|-------|--|--|--|--|
| Indicator 3B<br>Measurement | Subject  |   | Reading |       |            | Math   |       |  |  |  |  |
| Weasurement                 | Grade  | Elementary  | Middle  | High  | Elementary | Middle | High  |  |  |  |  |
|                             | Exempt   | 5   | 1       | 3     | 4          | 1      | 3     |  |  |  |  |
|                             | Not Tested   | 26  | 12      | 20    | 25         | 14     | 17    |  |  |  |  |
| b#                          | Tested Regular Assessment Without Accommodations     | 1159  | 227     | 124   | 1161       | 226    | 125   |  |  |  |  |
| c #                         | Tested Regular Assessment With Accommodations        | 2796  | 1544    | 405   | 2797       | 1543   | 407   |  |  |  |  |
| d #                         | Tested Alternate Assessment at Grade Level Standards | 0   | 0       | 0     | 0          | 0      | 0     |  |  |  |  |
| e #                         | Tested Alternate Assessment at Alternate Standards   | 224   | 127     | 70    | 223        | 127    | 70    |  |  |  |  |
| (b+c+d+e) #                 | TOTAL Tested   | 4179  | 1898    | 599   | 4181       | 1896   | 602   |  |  |  |  |
| a#                          | TOTAL Tested + Not<br>Tested + Exempt                | 4210  | 1911    | 622   | 4210       | 1911   | 622   |  |  |  |  |
| b/a%                        | Tested Regular Assessment Without Accommodations     | 27.5%   | 11.9%   | 19.9% | 27.6%      | 11.8%  | 20.1% |  |  |  |  |
| c/a%                        | Tested Regular Assessment With Accommodations        | 66.4%   | 80.8%   | 65.1% | 66.4%      | 80.7%  | 65.4% |  |  |  |  |
| 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   | 5.3%  | 6.6%    | 11.3% | 5.3%       | 6.6%   | 11.3% |  |  |  |  |

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| (b+c+d+e) / a % Participation Rate Overall IEP % | 99.26% | 99.32% | 96.30% | 99.31% | 99.22% | 96.78% |
|--|--------|--------|--------|--------|--------|--------|
|--|--------|--------|--------|--------|--------|--------|

Display 3-4: Indicator 3B – WDE did not meet any the six targets

|            | Reading             | Math                |
|------------|---------------------|---------------------|
| Elementary | Did not meet target | Did not meet target |
| Middle     | Did not meet target | Did not meet target |
| High       | Did not meet target | Did not meet target |

The WDE met none of the mandated targets for participation in statewide reading and math assessments. However, in both content areas, participation rates were above 96% in high school and above 99% in elementary and middle school.

Display 3-5: Indicator 3C - Proficiency Rates

|             | 2011-2012 Proficiency Rates for Students with Disabilities      |            |        |      |            |        |      |  |
|-------------|---|------------|--------|------|------------|--------|------|--|
| Measurement | Subject   | Reading    |        |      | Math       |        |      |  |
|             | Grade   | Elementary | Middle | High | Elementary | Middle | High |  |
| b#          | Tested PROFICIENT Regular Assessment Without Accommodations     | 730        | 122    | 47   | 876        | 104    | 30   |  |
| c#          | Tested PROFICIENT<br>Regular Assessment<br>With Accommodations  | 1015       | 485    | 117  | 1450       | 461    | 61   |  |
| d#          | Tested PROFICIENT Alternate Assessment at Grade Level Standards | 0          | 0      | 0    | 0          | 0      | 0    |  |
| e #         | Tested PROFICIENT Alternate Assessment at Alternate Standards   | 175        | 99     | 55   | 180        | 93     | 48   |  |
| (b+c+d+e) # | TOTAL Tested<br>PROFICIENT or<br>ABOVE                          | 1920       | 706    | 219  | 2506       | 658    | 139  |  |

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| a#              | TOTAL Tested<br>Proficient or Non-<br>Proficient | 4179   | 1898   | 599    | 4181   | 1896   | 602    |
|-----------------|--|--------|--------|--------|--------|--------|--------|
| (b+c+d+e) / a % | TOTAL % Tested<br>Proficient or Above            | 45.94% | 37.20% | 36.56% | 59.94% | 34.70% | 23.09% |

Wyoming did not meet any of its six FFY 2011 proficiency targets for Indicator 3C. The targets for this indicator match 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, although it is important to note that proficiency rates increased in five of the six areas. Improvement Activities will also continue and/or be adjusted in order to continuously improve proficiency rates for Wyoming's students with disabilities.

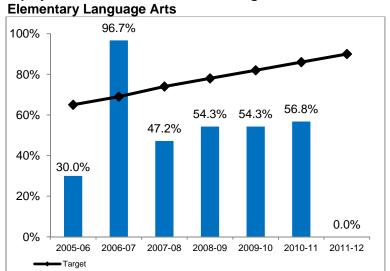
Display 3-6: Indicator 3C – WDE did not meet any of the six targets

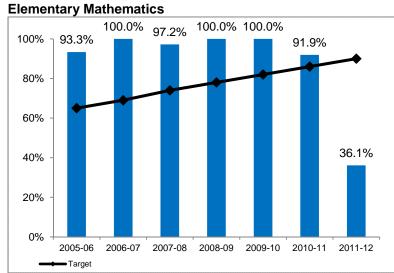
|            | Reading             | Math                |
|------------|---------------------|---------------------|
| Elementary | Did not meet target | Did not meet target |
| Middle     | Did not meet target | Did not meet target |
| High       | Did not meet target | Did not meet target |

Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011: From FFY 2010 to FFY 2011, Wyoming's rate on Indicator 3A decreased in all target areas (see Display 3-7). Although proficiency rates for students with disabilities continue to improve, fewer districts were able to meet the increasingly rigorous targets for AYP. The State anticipates this trend will continue pending changes to the AYP formula or the ESEA accountability structure.

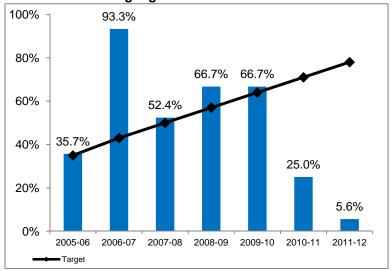
Please note that FFY 2009 data for Indicator 3A reflect data from the spring 2009 (FFY 2008) PAWS administration. As noted in the State's APR for FFY 2009, the State experienced significant technical difficulties with the PAWS online testing platform for the regular assessment and as such, Wyoming received a waiver from the U.S. Department of Education permitting the State to report the FFY 2008 AYP results for a second year.

Display 3-7: Percent of Districts Meeting AYP – Results Over Time

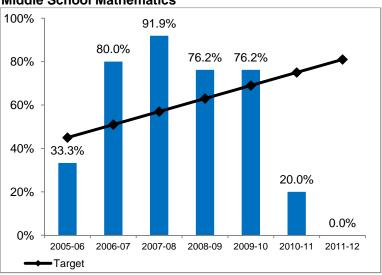




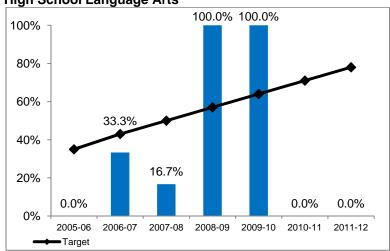




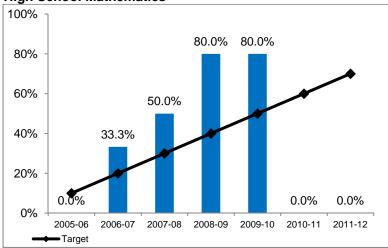
#### **Middle School Mathematics**



**High School Language Arts** 

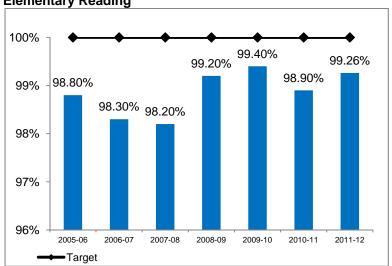




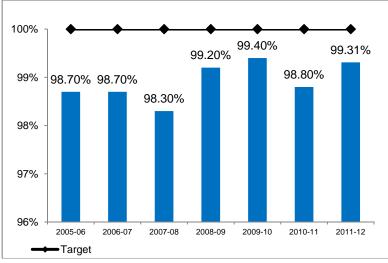


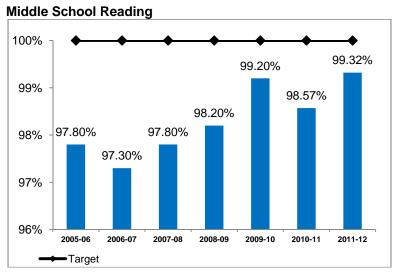
Regarding Indicator 3B, although the targets of 100% were not met, FFY 2011 participation rates increased in four of the six target areas (see Display 3-8 below).

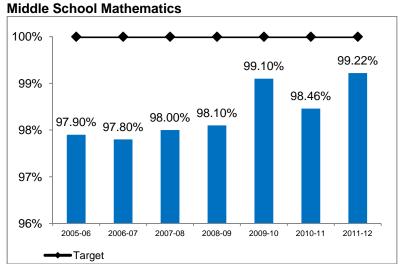
**Display 3-8: Participation Rates -- Results Over Time Elementary Reading** 

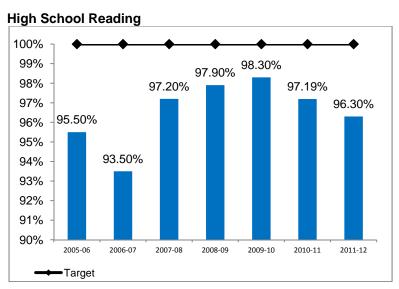


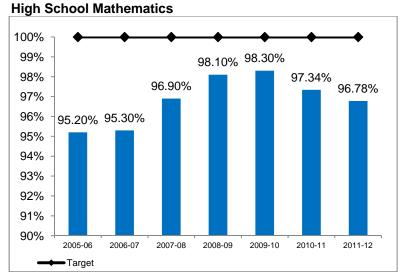
#### **Elementary Mathematics**









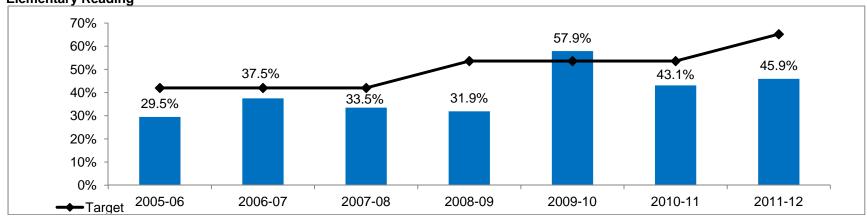


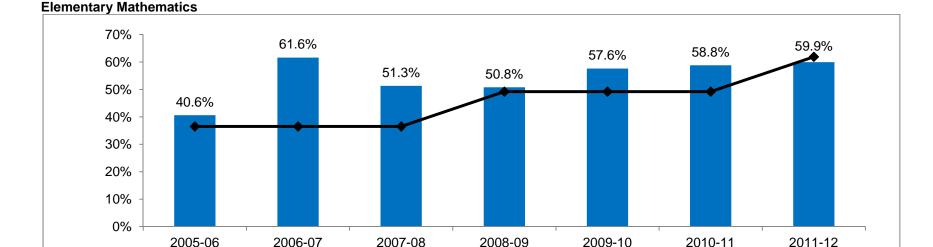
For Indicator 3C, the State's FFY 2011 proficiency rates increased in five of the six target areas (see Display 3-9 below). Although the State did not meet its targets, the WDE is encouraged by this apparent trend.

#### **WYOMING**

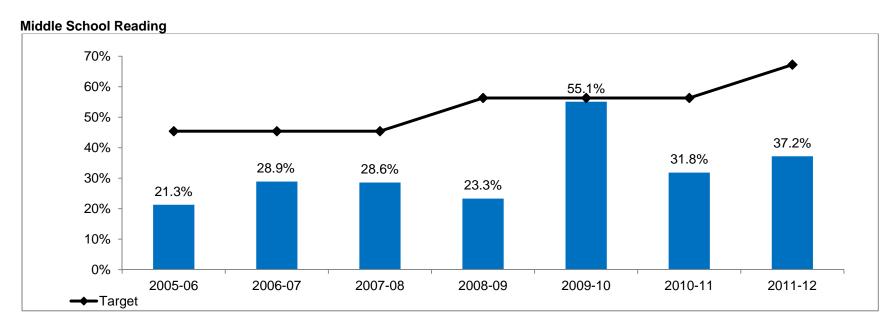
In reviewing the proficiency rates in the graphs below, please note two important aspects of these data: first, FFY 2006 represents an anomaly due to the fact that the assessment was administered in both winter and spring that year. Districts then "counted" the higher of each student's two scores. Since FFY 2006, the PAWS statewide assessment has been administered in the spring only, giving students one opportunity to demonstrate their mastery of the state standards in these content areas. Second, due to the waiver granted by OESE, rates shown for FFY 2009 are solely the results for students taking the State's alternate assessment. Please refer to Wyoming's FFY 2009 APR for details concerning the waiver.

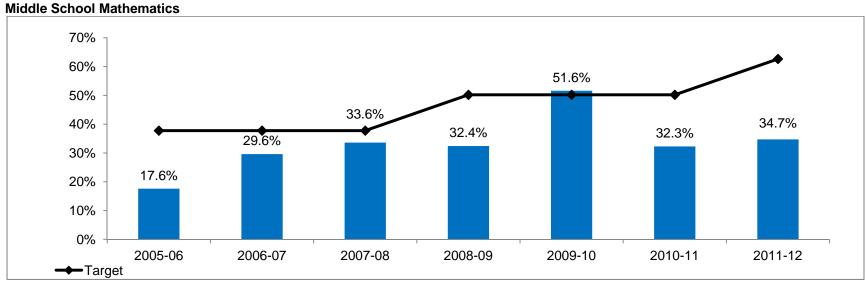
Display 3-9: Proficiency Rates on Statewide Assessment – Results Over Time Elementary Reading

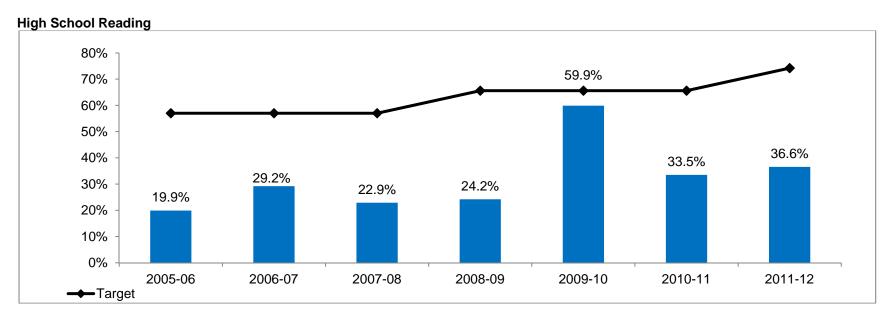


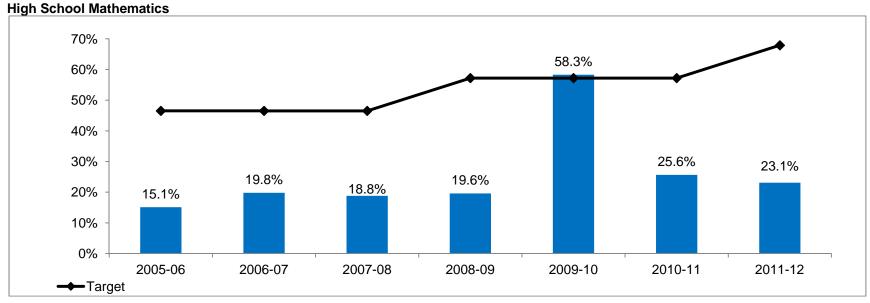


**→**Target









#### **WYOMING**

Although the WDE did not meet any of its statewide assessment proficiency rate targets for students with disabilities during FFY 2011, the WDE would like to point out the following positive aspects of these data:

- With the exception of FFY 2009 (the year in which only alternate assessment results were used for accountability purposes), reading
  proficiency rates among elementary school students with disabilities are at their highest level since the start of the SPP.
- With the exception of FFY 2006 (the year in which all students participated in the statewide assessment twice), mathematics proficiency
  rates among elementary school students with disabilities are at their highest level since the start of the SPP.
- With the exception of FFY 2009, reading and mathematics proficiency rates among middle school students with disabilities are at their highest levels since the start of the SPP.
- With the exception of FFY 2009, reading proficiency rates among high school students with disabilities are at their highest level since the start of the SPP.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision. In addition to the data highlighted above, examination of data during the statewide data drill down generated concerns in all areas (race, disability category, etc.) therefore activities were designed to broadly address these issues.

In addition to the data provided above, the FFY 2011 statewide data drill down revealed:

- Proficiency rates for students spending >20% of their school week in environments that do not include nondisabled peers ranged from 11% to 33%. The State's proficiency rate for students spending at least 80% of their school week in the general education environment was 52%.
- The WDE reviewed data by disability category and lower-than-expected performance on the statewide assessment by students with a Specific Learning Disability (SLD). On the regular PAWS, just 32% of students eligible under the SLD criteria demonstrated proficiency in FFY 2011. Further exploration revealed that of the students with SLD who were below proficient on at least one PAWS subtest (reading and/or mathematics), only 16% were reported to be using assistive technology. Of the students below proficient on at least 2 subtests, only 11% were using assistive technology.

In response to these data-based concerns, the following activities are among those completed during FFY 2011 to address academic performance of students with disabilities in Wyoming:

- In FFY 2011, the WDE used a formula for selecting districts for on-site monitoring that consisted entirely of middle school performance. This resulted in the WDE visiting the districts that struggled most in meeting proficiency targets for students with disabilities at this grade level. On-site visits revealed some problems in delivery of FAPE to middle school students. Corrective Action Plans were drafted to address the specific issues. When statewide assessment results became available in the summer of 2012, the WDE was pleased to see an increase in both middle school math and reading performance.
- The WDE established a Professional Learning Community focused on assistive technology. This group was selected through a rigorous application process, includes education professionals from across the State and is tasked with exploring the current provision of assistive technology and developing promising practices and processes for increasing the effective implementation of assistive technology.

#### **WYOMING**

• The WDE expanded its Project Eye to Eye program for students with learning disabilities. Eye to Eye pairs upper elementary school students with learning disabilities and college mentors who also have learning disabilities. Structured art projects allow these mentors and mentees to explore self advocacy, better understand their unique challenges, identify beneficial accommodations, and help students and school staff to better understand their potential.

#### **Public Reporting Information**

In its response to Wyoming's APR for FFY 2010, OSEP asked that the State ensure complete public reporting regarding the ways in which students with disabilities participate in the statewide assessment system (i.e. regular assessment with or without accommodations, alternate assessment based on alternate achievement standards) at the district and school levels. These public reports of Wyoming statewide assessment participation and proficiency conforming with 34 C.F.R. §300.160(f) can be reviewed at the following URL: <a href="http://fusion.edu.wyoming.gov/MySites/Data">http://fusion.edu.wyoming.gov/MySites/Data</a> Reporting/data reporting assessment reports.aspx.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the State has modified the structure of its improvement activity reporting. This framework of improvement strategies is outlined in the SPP and is aligned with the eight general supervision components articulated by the National Center for Special Education Accountability and Monitoring (NCSEAM). The WDE will continue to implement all the strategies listed during each federal fiscal year.

#### **WYOMING**

#### Part B State Annual Performance Report (APR) for FFY 2011

Monitoring Priority: FAPE in the LRE

Indicator 4A: Rates of suspension and expulsion

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

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

#### 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.

Include State's definition of "significant discrepancy."

| FFY                   | Measurable and Rigorous Target  |
|-----------------------|---|
| 2011<br>(2011 - 2012) | 0% of districts with significant discrepancies in rates of suspension and expulsions. |

#### **Actual Target Data for FFY 2011:**

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

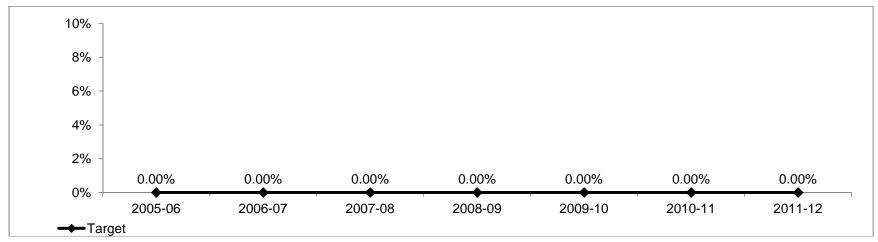
| Year                               | Total Number of LEAs | Number of LEAs that have<br>Significant Discrepancies | Percent |
|------------------------------------|----------------------|---|---------|
| FFY 2011<br>(using 2010-2011 data) | 46                   | 0   | 0.0%    |

Note: Three of 49 LEAs were excluded. These three districts did not have at least 25 students with disabilities enrolled in the district. However, these districts did not have any students with disabilities who were suspended or expelled for more than ten days.

#### WDE met the target for FFY 2011.

Part B State Annual Performance Report for FFY 2011 (OMB NO: 1820-0624 / Expiration Date: 7/31/2015)

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



#### 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 Information Management Division. All data is verified through a rigorous process of validation and adjudication.

The WDE uses the "state bar" method for defining significant discrepancy. The FFY 2011 state rate for suspending/expelling students with disabilities for more than ten days is 0.65%. The WDE is setting the state bar as five percentage points higher than the state rate. Thus, any district that suspends or expels 5.65% or more of its students with disabilities for more than ten days is flagged for significant discrepancy. There must be at least 25 students in the denominator of a suspension rate for it to be flagged.

Review of Policies, Procedures, and Practices (completed in FFY 2011 using 2010-2011 data) If any LEAs are identified with significant discrepancies:

Because Wyoming is reporting that none of its 49 LEAs including the BHD have a significant discrepancy in suspensions or expulsions of more than ten days in a school year by race or ethnicity, the WDE did not review LEA policies, procedures and practices relating to discipline of children with disabilities for this purpose during FFY 2011. If the State has an increase in the number of districts with significant discrepancies in this area or identifies an LEA with a significant discrepancy, it will then complete a review of policies, procedures and practices and report results in the subsequent year's APR.

Discussion of Improvement Activities <u>and</u> Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011: Of the 49 LEAs in Wyoming, none were identified as having significant discrepancy in FFY 2011 for Indicator 4A. In the entire state of Wyoming, only 100 students with disabilities were suspended or expelled for greater than ten days in FFY 2010. Only twenty LEAs had a suspension rate greater than 0%, and none had a suspension rate greater than 5.65%. Three LEAs were excluded from the Indicator 4A analyses due to not having at least 25 students with disabilities enrolled at the district.

#### **WYOMING**

As Display 4A-2 indicates, Wyoming has maintained a 0% suspension/expulsion rate since FFY 2007 for Indicator 4A. Given Wyoming's low suspension and expulsion rates, the WDE concludes that the LEAs in Wyoming are utilizing more proactive ways of addressing behavioral issues than suspensions and expulsions.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision.

Through a review of dispute resolution data, WDE staff members noted a preponderance of complaints related to behavior, programming, services, and supports. In response the WDE implemented the following activities specifically designed to target these data-based concerns:

- The WDE targeted the behavioral needs of students with disabilities during its 2012 Special Education Leadership Symposium, a
  statewide conference. This included sessions on Strategies for Severe Behavior and Mental Health Needs, Reducing Behavior Problems
  in the Classroom, Implementation of Wyoming's Rules on Seclusion and Restraint, Weaving Discipline and FAPE, Functional Behavior
  Assessments and Behavior Intervention Plans, Legal Issues Related to Students with Mental Health Issues, and What All Educators Need
  to Know About Discipline and Students with Disabilities.
- Additionally, the WDE conducted monthly TA calls for LEAs on the following subjects: Special Considerations in IEP Development:
   Special Factors; Behavior: FBAs and BIPs; Disciplinary Removals, Change of Placement, & Manifestation Determination; Secondary Students and Special Education; Parentally Placed Private School Students; and Highly Qualified Requirements.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2011 and denotes which indicators were most impacted by the implementation of each activity.

#### Part B State Annual Performance Report (APR) for FFY 2011

Monitoring Priority: FAPE in the LRE

#### Indicator 4B: Rates of suspension and expulsion

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

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

#### Measurement:

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

Include State's definition of "significant discrepancy."

| FFY                   | Measurable and Rigorous Target   |  |  |
|-----------------------|--|--|--|
| 2011<br>(2011 - 2012) | 0% of districts that have: (a) a significant discrepancy, by race or ethnicity, in the rate of suspensions & expulsions of greater than ten 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. |  |  |

#### **Actual Target Data for FFY 2011:**

#### Display 4B-1: LEAs with Significant Discrepancy in Rates for Suspension and Expulsion by Race/Ethnicity (using 2010-2011 data)

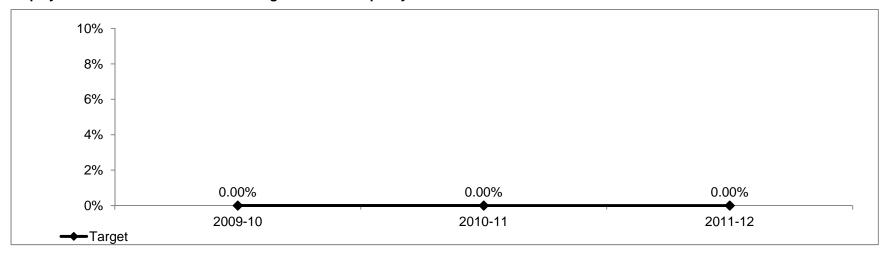
| Total # of LEAs  | 46   |
|--|------|
| # of LEAs determined to have numerical significant discrepancy | 0    |
| % of LEAs determined to have numerical significant discrepancy | 0.0% |

| # of LEAs found to have significant discrepancy due to inappropriate policies, practices, and procedures  | 0    |
|---|------|
| Percent of LEAs that had significant discrepancy due to inappropriate policies, practices, and procedures | 0.0% |

Note: Three LEAs were excluded as they did not meet the minimum n size requirement of 25 students in the denominator. The other 46 districts had at least one ratio by race/ethnicity calculated.

#### WDE met the target for FFY 2011.

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



#### 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 Information Management Division. All data is verified through a rigorous process of validation and adjudication.

The WDE uses the "state bar" method for defining significant discrepancy. The FFY 2011 state rate for suspending/expelling students with disabilities for more than ten days is 0.65%. The WDE is setting the state bar as five percentage points higher than the state rate. Thus, any district that suspends or expels 5.65% or more of its students with disabilities for more than ten days is flagged for significant discrepancy. There must be at least 25 students in the denominator of a suspension rate for it to be flagged, and all seven race and ethnicity reporting categories are included in this analysis.

For each of Wyoming's 49 LEAs, the WDE calculates a suspension and expulsion rate for each of the seven race and ethnicity reporting categories (note: many LEAs do not have members of every race and ethnicity reporting category enrolled in the district). None were identified as having significant discrepancy in FFY 2010 for Indicator 4B. Only twenty LEAs had a suspension rate greater than 0%. Of these twenty LEAs, four were excluded for a given race/ethnicity rate because there were not at least 25 students in the denominator (for one LEA, the suspension rate was 1 out of 2; for another 1 out of 11; for another 1 out of 16, and for another 1 out of 19). This illustrates the very small numbers of students

#### **WYOMING**

with disabilities for a particular racial/ethnic group in some Wyoming LEAs). Of the 49 LEAs, 46 had at least one ratio calculated for Indicator 4B that was based on at least 25 students.

**Review of Policies, Procedures, and Practices** (completed in FFY 2011 using 2010-2011 data) If any LEAs are identified with significant discrepancies:

Because Wyoming is reporting that none of its 49 LEAs (including the BHD) have a significant discrepancy in suspensions or expulsions of more than ten days in a school year by race or ethnicity, the WDE did not review LEA policies, procedures and practices relating to discipline of children with disabilities for this purpose during FFY 2011. If the State has an increase in the number of districts with significant discrepancies in this area or identifies an LEA with a significant discrepancy, it will then complete a review of policies, procedures and practices and report results in the subsequent year's APR.

Discussion of Improvement Activities and Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011: As Display 4B-2 indicates, Wyoming has maintained a 0% suspension/expulsion rate since FFY 2009 for Indicator 4B. Given Wyoming's low suspension and expulsion rates, the WDE concludes that the LEAs in Wyoming are utilizing more proactive ways of addressing behavioral issues than suspensions and expulsions.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision.

Through a review of dispute resolution data, WDE staff members noted a preponderance of complaints related to behavior, programming, services, and supports. In response the WDE implemented the following activities specifically designed to target these data-based concerns:

- The WDE targeted the behavioral needs of students with disabilities during its 2012 Special Education Leadership Symposium, a statewide conference. This included sessions on Strategies for Severe Behavior and Mental Health Needs, Reducing Behavior Problems in the Classroom, Implementation of Wyoming's Rules on Seclusion and Restraint, Weaving Discipline and FAPE, Functional Behavior Assessments and Behavior Intervention Plans, Legal Issues Related to Students with Mental Health Issues, and What All Educators Need to Know About Discipline and Students with Disabilities.
- Additionally, the WDE conducted monthly TA calls for LEAs on the following subjects: Special Considerations in IEP Development:
   Special Factors; Behavior: FBAs and BIPs; Disciplinary Removals, Change of Placement, & Manifestation Determination; Secondary Students and Special Education; Parentally Placed Private School Students; and Highly Qualified Requirements.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2011 and denotes which indicators were most impacted by the implementation of each activity.

## Monitoring Priority: FAPE in the LRE

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

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

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

#### **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 by districts to WDE Information Management Division.

| FFY         | Measurable and Rigorous Targets |       |       |  |
|-------------|---------------------------------|-------|-------|--|
| 2011        | 5A                              | 5B    | 5C    |  |
| (2011-2012) | 58.50%                          | 9.28% | 2.40% |  |

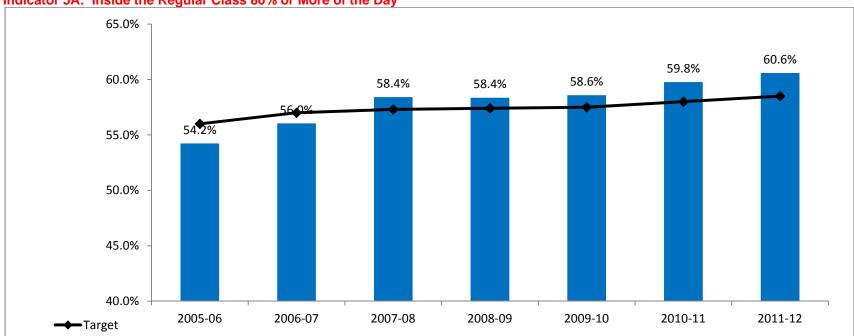
## **Actual Target Data for FFY 2011:**

|  | 5A     | 5B     | 5C     |
|--|--------|--------|--------|
| Total number of students               | 11,990 | 11,990 | 11,990 |
| Number of students in this setting     | 7,265  | 851    | 263    |
| Percentage of students in this setting | 60.59% | 7.10%  | 2.19%  |

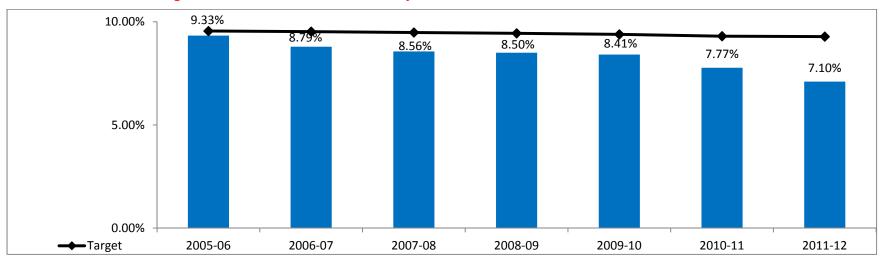
WDE met all three targets for FFY 2011.

Display 5-1: Percent of Students with Disabilities in Various Settings – Results Over Time

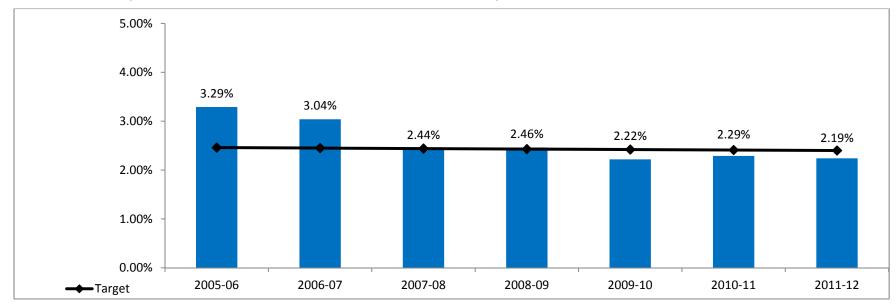




Indicator 5B: Inside the Regular Class Less Than 40% of the Day



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



# **WYOMING**

Note: Prior to FFY 2007, court-placed students were included in the Indicator 5C calculation. Therefore, trend data from FFY 2005 and FFY 2006 are not comparable to subsequent years. In addition, starting in FFY 2009, students that were parentally placed in private schools or home-schooled were excluded from the analyses.

#### Valid and Reliable Data:

For FFY 2011, Wyoming's is reporting a rate of 2.19% for Indicator 5C. This does not match the 618 environment table submitted to OSEP in February 2012. Upon review of the data, WDE found that the data submitted did not include 35 students in homebound/hospital placements and 5 students placed in correctional facilities. The WDE will add a data note to the 618 submission (Table 3). All together, students in separate schools, residential facilities, and homebound/hospital placements equals 263 students with disabilities out of 11,990 total students on an IEP, ages 6 to 21. The WDE utilized these figures as they are the most current and thoroughly validated data.

Discussion of Improvement Activities <u>and</u> Explanation of Slippage, if the State did not meet its target that occurred for FFY 2011: For FFY 2011, the WDE is reporting 60.59% of students with disabilities are in regular classrooms greater than 80% of their school day; 7.10% of students with disabilities are in regular classrooms less than 40% of their school day; and 2.19% of students with disabilities are served in residential facilities, separate schools, and/or homebound/hospital placements. The WDE met its targets for Indicators 5A, 5B and 5C.

The data in Display 5-1 shows the percentage of students who spend a majority of their school day in the regular classroom environment has decreased slightly for FFY 2011. This is due to the WDE's exclusion of 5 year-old kindergarten students with disabilities, who are now included in the calculation for Indicator 6 (see SPP). However, the percentage of students in separate classrooms continues to decrease, and the percentage of students in separate facilities is slightly lower than the State's FFY 2010 rate.

Despite these positive data, WDE staff members noted a preponderance of formal complaints related to behavior, programming, services, and supports. Since internal data and record keeping demonstrate that negative student behavior and/or low social-emotional skills are often linked to placement in restrictive settings, the WDE sought to improve educators' understanding of appropriate social, emotional and behavioral supports and services as a means of improving LRE data. During FFY 2011, the WDE implemented the following activities specifically designed to target these data-based concerns:

- The WDE targeted the behavioral needs of students with disabilities during its 2012 Special Education Leadership Symposium, a statewide conference. This included sessions on Strategies for Severe Behavior and Mental Health Needs, Reducing Behavior Problems in the Classroom, Implementation of Wyoming's Rules on Seclusion and Restraint, Weaving Discipline and FAPE, Functional Behavior Assessments and Behavior Intervention Plans, Legal Issues Related to Students with Mental Health Issues, and What All Educators Need to Know about Discipline and Students with Disabilities.
- Additionally, the WDE conducted monthly TA calls for LEAs on the following subjects: Special Considerations in IEP Development:
   Special Factors; Behavior: FBAs and BIPs; Disciplinary Removals, Change of Placement, & Manifestation Determination; Secondary Students and Special Education; Parentally Placed Private School Students; and Highly Qualified Requirements.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision.

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## Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2011 and denotes which indicators were most impacted by the implementation of each activity.

#### 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:

#### Outcomes:

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

Progress categories for A, B and C:

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

### Summary Statements for Each of the Three Outcomes (use for FFY 2008-2009 reporting):

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

#### **Measurement for Summary Statement 1:**

Percent = # of preschool children reported in progress category (c) plus # of preschool children reported in category (d) divided by [# of preschool children reported in progress category (b) plus # of preschool children reported in progress category (c) plus # of preschool children reported in progress category (d) times 100.

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

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

| Measurable and Rigorous Targets   |                                      |  |   |  |  |  |
|---|--------------------------------------|--|---|--|--|--|
| FFY 2011<br>(2011-2012)   | Positive Social-<br>Emotional Skills | Acquiring and Using<br>Knowledge and<br>Skills | Taking Appropriate<br>Action to Meet<br>Needs |  |  |  |
| Of those children who entered or exited the program below age expectations, the percent who substantially increased their rate of growth by the time they exited. | 62.18%                               | 62.62%   | 65.31%  |  |  |  |
| Percent of children who were functioning at a level comparable to same-aged peers by the time they exited.  | 58.37%                               | 56.27%   | 68.55%  |  |  |  |

# **Actual Target Data for FFY 2011:**

|   | Positive Social-Emotional Skills |        | Acquiring and Using Knowledge and Skills |        | Taking Appropriate Action to Meet Needs |        |
|---|----------------------------------|--------|--|--------|---|--------|
|   | Target                           | Actual | Target                                   | Actual | Target                                  | Actual |
| Of those children who entered or exited the preschool program below age expectations, the percent who substantially increased their rate of growth by the time they exited. | 62.18%                           | 76.48% | 62.62%                                   | 81.41% | 65.31%                                  | 79.07% |
| Percent of children who were functioning at a level comparable to same-aged peers by the time they exited.  | 58.37%                           | 59.56% | 56.27%                                   | 58.67% | 68.55%                                  | 73.32% |

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Display 7-1: Number and Percentage of Children in Each Progress Category and Summary Statement Calculations

| Display 7-1. Number and Percentage of  | Officer in Ea                        | on r rogress  | Ualoge                                      | ry and Janini | ary Otatomoni                           | Guiot |               |               |
|--|--------------------------------------|---------------|---|---------------|---|-------|---------------|---------------|
|  | Positive Social-<br>Emotional Skills |               | Acquiring and Using<br>Knowledge and Skills |               | Taking Appropriate Action to Meet Needs |       |               |               |
|  | # of children                        | % of children |   | # of children | % of children                           |       | # of children | % of children |
| a - Children who did not improve functioning   | 12                                   | 0.77%         |   | 9             | 0.58%                                   |       | 12            | 0.77%         |
| <b>b</b> - Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers   | 287                                  | 18.36%        |   | 220           | 14.08%                                  |       | 203           | 12.99%        |
| c - Children who improved functioning<br>to a level nearer to same-aged peers<br>but did not reach it  | 333                                  | 21.31%        |   | 417           | 26.68%                                  |       | 202           | 12.92%        |
| <b>d</b> - Children who improved functioning to reach a level comparable to sameaged peers   | 639                                  | 40.88%        |   | 586           | 37.49%                                  |       | 610           | 39.03%        |
| e - Children who maintained functioning at a level comparable to same-aged peers   | 292                                  | 18.68%        |   | 331           | 21.18%                                  |       | 536           | 34.29%        |
| Total  | 1563                                 | 100%          |   | 1563          | 100%                                    |       | 1563          | 100%          |
| Summary Statements:  |                                      |               |   |               |   |       |               |               |
| 1. Of those children who entered or exited the preschool program or exited the program below age expectations, the percent who substantially increased their rate of growth by the time they exited. |                                      | 76.48%        |   |               | 81.41%                                  |       |               | 79.07%        |
|  |                                      |               |   |               |   |       |               |               |
| 2. Percent of children who were functioning at a level comparable to same-aged peers by the time they exited.  |                                      | 59.56%        |   |               | 58.67%                                  |       |               | 73.32%        |

The WDE met all six targets for FFY 2011.

Discussion of Improvement Activities <u>and</u> Explanation of Slippage, if the State did not meet its target, that occurred for FFY 2011: As noted in Display 7-3 below, from FFY 2008 to FFY 2011, Wyoming's scores increased in all areas. In fact, FFY 2011 scores are at their highest level ever for five of the six summary statements (for all but Summary Statement 2 for Social-Emotional Skills). For each of the three

outcomes areas, over 75% of exiting children increased their rate of growth by the time they exited. Additionally, for each of the three outcomes areas, between 59% - 73% 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 2011 could be attributed to a number of factors including improved targeted technical assistance to the State's developmental preschools, an increase in professional development opportunities for preschool staff, feedback from monitoring activities, and improvements in the data collection and reporting process. The EIEP uses a web-based program to collect data on all COSFs, and EIEP staff and regional developmental preschool staff members collaborate to examine the results, to determine areas of strength or concern.

Display 7-3: Summary Statements – Results Over Time

|   | 2008-09 | 2009-10 | 2010-11 | 2011-12 |
|---|---------|---------|---------|---------|
| Number of Children:   | 953     | 1,235   | 1,347   | 1,563   |
| Positive Social-Emotional Skills  |         |         |         |         |
| Of those children who entered or exited the preschool program the program below age expectations, the percent who substantially increased their rate of growth by the time they exited. | 60.68%  | 69.72%  | 69.90%  | 76.48%  |
| 2. Percent of children who were functioning at a level comparable to same-aged peers by the time they exited.   | 56.87%  | 63.00%  | 58.28%  | 59.56%  |
| Acquiring and Using Knowledge and Skills  |         |         |         |         |
| Of those children who entered or exited the preschool program the program below age expectations, the percent who substantially increased their rate of growth by the time they exited. | 61.12%  | 67.13%  | 74.02%  | 81.41%  |
| Percent of children who were functioning at a level comparable to same-aged peers by the time they exited.  | 54.77%  | 56.60%  | 55.98%  | 58.67%  |
| Taking Appropriate Action to Meet Needs   |         |         |         |         |
| Of those children who entered or exited the preschool program the program below age expectations, the percent who substantially increased their rate of growth by the time they exited. | 63.81%  | 73.07%  | 75.31%  | 79.07%  |

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| Percent of children who were functioning at a level comparable to same-aged peers by the time they exited. | 67.05% | 71.26% | 71.05% | 73.32% |
|--|--------|--------|--------|--------|
|--|--------|--------|--------|--------|

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision. The FFY 2011 statewide data drill down revealed no additional concerns in this area. However, during FFY 2011, the WDE conducted a variety of improvement activities aimed at improving outcomes for preschool students with disabilities including the following:

- The WDE and BHD finalized and implemented a robust MOU, allowing the BHD to benefit from the WDE's full support and general supervision.
- The WDE staff provided specialized training to the BHD and regional developmental preschool staff on the State's model forms for special education. This training not only assisted preschool staff in utilizing the forms accurately, but also focused on meeting IDEA requirements when developing and implementing IEPs for young children with disabilities.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2011 and denotes which indicators were most impacted by the implementation of each activity.

**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.

Include State's definition of "disproportionate representation."

| FFY                   | Measurable and Rigorous Target  |
|-----------------------|---|
| 2011<br>(2011 – 2012) | <b>0</b> % of districts with disproportionate representation of racial and ethnic groups in special education or related services categories that is the result of inappropriate identification |

## **Actual Target Data for FFY 2011:**

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

| Year     | Total<br>Number of<br>Districts | Number of Districts with<br>Disproportionate Representation | Number of Districts with Disproportionate Representation of Racial and Ethnic Groups that was the Result of Inappropriate Identification | Percent of Districts |
|----------|---------------------------------|---|--|----------------------|
| FFY 2011 | 48                              | 0   | 0  | 0.00%                |

WDE met the target for FFY 2011.

#### Definition of "Disproportionate Representation" and Methodology

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

# Alternate Risk Ratio = District-level risk for racial/ethnic group for disability 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. The WDE calculates an Alternate Risk Ratio for each school district in the state, based on the identification rate of each racial/ethnic group in each district. The WDE uses the Alternate Risk Ratio (as defined by OSEP and WESTAT) for determining disproportionate representation because it is most relevant and meaningful for Wyoming's small, rural population.

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

As stated above, the WDE defines disproportionate representation 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, WDE staff members review the LEA's evaluation policies and procedures in addition to applicable student evaluation records to determine if the disproportionate representation is due to inappropriate identification.

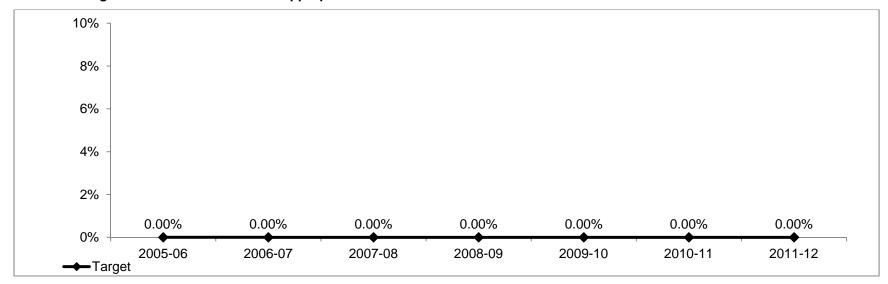
For Indicator 9, the WDE conducts its review of district data through the desk audit portion of Wyoming's Continuous Improvement Focused Monitoring System. All districts that have been flagged (using the cut scores listed in the preceding paragraph) for over- and/or under-representation are required to provide the WDE with district policies and procedures concerning their identification practices. The WDE then conducts a file review to gather additional data on how the district's practices regarding the appropriate evaluation and identification of students with disabilities has affected actual students in the over- and/or under-represented group. As shown below in Display 9-3, for FFY 2011, no districts were flagged for disproportionate representation; thus, the file review component was not necessary in any LEA.

Display 9-2: Percent of LEAs with Disproportionate Representation that is a Result of Inappropriate Identification for FFY 2011

|   | Over-representation | Under-representation |
|---|---------------------|----------------------|
| Total # of LEAs                                       | 48                  | 48                   |
| # of LEAs flagged for disproportionate representation | 0                   | 0                    |
| % of LEAs flagged for disproportionate representation | 0.0%                | 0.0%                 |

| # of LEAs found to have disproportionate representation due to inappropriate identification  | 0    | 0    |
|--|------|------|
| Percent of LEAs that had disproportionate representation due to inappropriate identification | 0.0% | 0.0% |

Display 9-3: Percent of Districts with Disproportionate Representation of Racial and Ethnic Groups in Special Education or Related Services Categories that is the Result of Inappropriate Identification – Results Over Time



Discussion of Improvement Activities and Explanation Slippage, if the State did not meet its target, that occurred for FFY 2011: For FFY 2011, WDE is again 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 State met its target of 0% for Indicator 9.

For Indicator 9, all 48 public school districts are included in the analyses. Of these 48 LEAs, 48 met the minimum *n* requirements at least one time for a Final Risk Ratio to be calculated (for each LEA, in theory, seven risk ratios could be calculated—one for each racial/ethnic group). Please note that many LEAs in Wyoming have fewer than five students with a disability of a particular race/ethnicity. Thus, very small numbers prevent the State from calculating reliable and meaningful risk ratios for every racial/ethnic group in every LEA.

In each of the last seven years, Wyoming has met the mandated target of 0%. Even though no district was identified as having disproportionate representation in FFY 2011, the WDE would like to emphasize that it does calculate a ratio for every district in each of the seven racial/ethnic categories. The ratios based on ten 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, the WDE reviews a very high proportion of ratios for disproportionate representation.

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As indicated in Display 9-3, there were no districts flagged at the disproportionate level during FFY 2011. One reason for the State's consistently high performance on this indicator could be the WDE's focus on providing high quality targeted technical assistance specifically relating to correctly implementing 34 C.F.R. §§300.301 – 300.311.

Although Wyoming continues to meet this target, the WDE conducted the following activities during FFY 2011 as a means of maintaining a high level of performance on Indicator 9:

- The WDE provides each district with a detailed report of all risk ratios so LEAs can continue to be proactive in their improvement efforts.
- The WDE's 2012 Leadership Symposium included a breakout session on the legal requirements of comprehensive evaluation under Part B and appropriate eligibility determinations.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision. The FFY 2011 statewide data drill down revealed no additional concerns in this area.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A of this APR. Appendix B describes all the specific improvement activities completed in FFY 2011 and denotes which indicators were most impacted by the implementation of each activity.

## **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.

Include State's definition of "disproportionate representation."

| FFY                   | Measurable and Rigorous Target  |
|-----------------------|---|
| 2011<br>(2011 – 2012) | <b>0%</b> 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 2011:**

# Display 10-1: Percent of LEAs with Disproportionate Representation that is the result of Inappropriate Identification

| Year     | Total<br>Number of<br>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 2011 | 48                              | 3  | 0  | 0.00%                |

WDE met the target for FFY 2011.

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### Definition of "Disproportionate Representation" and Methodology

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

# Alternate Risk Ratio = <u>District-level risk for racial/ethnic group for disability</u> State-level risk for comparison group for disability

The Wyoming Department of Education collects the data used for Indicator 10 through the November 1 snapshot data collection. The WDE calculates an Alternate Risk Ratio for each school district in the state, based on the identification rate of each racial/ethnic group in each district. The WDE uses the Alternate Risk Ratio (as defined by OSEP/WESTAT) for determining disproportionate representation because it is most relevant and meaningful for Wyoming's small, rural population.

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

As stated above, the WDE defines disproportionate representation 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, WDE staff members review the LEA's evaluation policies and procedures in addition to applicable student evaluation records to determine if the disproportionate representation is due to inappropriate identification.

For Indicator 10, the review of district data is conducted through the desk audit 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 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 three LEAs flagged, WDE determined that none of the districts had disproportionate representation (for any student in the target racial/ethnic group) as a result of inappropriate identification.

Display 10-2: Alternate Risk Ratios of the LEAs flagged for Disproportionate Representation

| LEA | Target Ethnic<br>Group | Primary<br>Disability | Number in<br>target ethnic<br>group | Target Risk | Number in other ethnic groups (state) | Other group risk<br>(state) | Alternate RR |
|-----|------------------------|-----------------------|-------------------------------------|-------------|---------------------------------------|-----------------------------|--------------|
| 1   | African-American       | ED                    | 13                                  | 3.70%       | 702                                   | .79%                        | 4.67         |
| 2   | Hispanic               | LD                    | 53                                  | 14.64%      | 3735                                  | 4.78%                       | 3.07         |
| 3   | African-American       | HL                    | 18                                  | 8.29%       | 1844                                  | 2.08%                       | 3.98         |

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Display 10-3: Percent of LEAs with Disproportionate Representation of Racial and Ethnic Groups in Specific Disability Categories that is the Result of Inappropriate Identification – Detailed Results Over Time

|  | FFY 2006 | FFY 2007 | FFY 2008 | FFY 2009 | FFY 2010 | FFY 2011 |
|--|----------|----------|----------|----------|----------|----------|
| Total # of LEAs  | 48       | 48       | 48       | 48       | 48       | 48       |
| # of LEAs flagged for potential disproportionate representation – Over-representation                              | 12       | 6        | 5        | 2        | 2        | 3        |
| # of LEAs found to have disproportionate representation due to inappropriate identification – Over-representation  | 0        | 0        | 0        | 0        | 0        | 0        |
| Percent who had disproportionate representation due to inappropriate identification – Over-representation          | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     |
| # of LEAs flagged for potential disproportionate representation – Under-representation                             | 2        | 1        | 0        | 0        | 1        | 0        |
| # of LEAs found to have disproportionate representation due to inappropriate identification – Under-representation | 0        | 0        | 0        | 0        | 0        | 0        |
| Percent who had disproportionate representation due to inappropriate identification – Under-representation         | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     | 0.0%     |

Discussion of Improvement Activities and Explanation Slippage, if the State did not meet its target, that occurred for (Insert FFY): For FFY 2011, the WDE is reporting 0% of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. WDE met the mandated target of 0% for Indicator 10.

For Indicator 10, all of Wyoming's 48 public school districts are included in the analyses. Of these 48 LEAs, 44 met the minimum n requirements at least one time for a Final Risk Ratio to be calculated (for each LEA, in theory, 42 risk ratios could be calculated—one for each racial/ethnic group times the six primary disability categories). Please note that many LEAs in Wyoming have fewer than five students with a disability of a particular race/ethnicity; when this is disaggregated further by type of primary disability, the numbers get extremely small. Thus, very small numbers prevent the State from calculating reliable and meaningful risk ratios for every racial/ethnic group in every LEA.

The State calculated 42 ratios, one for each racial/ethnic group for each of the six primary disability categories in all 48 school 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 comparison 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. In addition, each district receives a detailed report of all risk

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ratios so district staff 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 10-2, there were three districts flagged at the disproportionate level during FFY 2011. As described above, the WDE reviewed special education files for each of the identified students in these race/ethnicity and disability categories from the flagged districts in order to determine whether the disproportionate representation was due to inappropriate identification practices. After WDE staff performed a thorough file review of students in this group, examining the comprehensiveness of the evaluation procedures and eligibility determination in compliance with 34 C.F.R. §§300.301 – 300.311 and relevant state rules, it was determined the three districts flagged for disproportionate representation were identifying students with disabilities in certain race/ethnicity categories and disability categories appropriately.

Although Wyoming continues to meet this target, the WDE conducted the following activities during FFY 2011 as a means of maintaining a high level of performance on Indicator 10:

- The WDE provides each district with a detailed report of all risk ratios so LEAs can continue to be proactive in their improvement efforts and continue to prevent inappropriate identification.
- The WDE's 2012 Leadership Symposium included a breakout session on the legal requirements of comprehensive evaluation under Part B and appropriate eligibility determinations.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision. The FFY 2011 statewide data drill down revealed no additional concerns in this area.

### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2010 and denotes which indicators were most impacted by the implementation of each activity.

## 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.

| FFY                   | Measurable and Rigorous Target  |
|-----------------------|---|
| 2011<br>(2011 – 2012) | 100% of children with parental consent to evaluate, who were evaluated within 60 days |

# **Actual Target Data for FFY 2011:**

| a. Number of children for whom parental consent to evaluate was received  | 4,735  |
|---|--------|
| b. Number of children whose evaluations were completed within 60 days (or State-established timeline)   | 4,629  |
| 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) | 97.76% |

# WDE did not meet the target for FFY 2011.

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 406 days                            | Delays in evaluations; parental cancellation of meetings; breaks in school schedule; difficulty contacting parents; weather, student illness, incorrect calculation of 60-day timeline. |

Of the 4,735 initial evaluations under Part B conducted during FFY 2011, there were 106 that did not meet the 60-day timeline requirement. Of these 106, 22 were from the State's 48 public school districts, and 84 were from the State's developmental preschools.

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

|   | FFY 2007 |                | FFY    | FFY 2008 FFY 2009 |        | 2009           | FFY 2010         | FFY 2011         |
|---|----------|----------------|--------|-------------------|--------|----------------|------------------|------------------|
|   | K-12     | Pre-<br>school | K-12   | Pre-<br>school    | K-12   | Pre-<br>school | Part B Ages 3-21 | Part B Ages 3-21 |
| a. # of children for whom parental consent to evaluate was received | 2,011    | 1197           | 2,108  | 1876              | 2,133  | 1703           | 4073             | 4,735            |
| b. #of children whose evaluations were completed within 60 days     | 1,754    | 1046           | 2,062  | 1711              | 2,062  | 1673           | 4020             | 4,629            |
| Percent who met the indicator                                       | 87.22%   | 87.4%          | 97.82% | 91.2%             | 96.67% | 98.2%          | 98.71%           | 97.76%           |

Discussion of Improvement Activities and Explanation Slippage, if the State did not meet its target, that occurred for FFY 2011: For FFY 2011, the WDE is reporting that 97.76% of children ages three through 21 with parental consent to evaluate were evaluated within sixty days. The State did not meet the mandated target of 100%.

As shown in Displays 11-3 and 11-4, Wyoming regressed slightly on this indicator. From FFY 2007 to FFY 2010, Wyoming had steadily increased its percentage of children evaluated within the 60-day timeline from 87.28% to 98.71%. However, the results for FFY 2011 show a decrease of almost one percentage point. When comparing the FFY 2010 and FFY 2011 results for this indicator, the overall increase in the number of initial evaluations conducted in FFY 2011 is also worth noting: the State experienced an increase of over 16% in the number of initial evaluations conducted in FFY 2011 when compared to the prior year.

# **WYOMING**

In its analysis of the initial evaluations conducted during FFY 2011, the WDE noted differences between the school district results and those from the State's developmental preschools. Among the State's 48 school districts, LEAs conducted a total of 2,513 initial evaluations, and only 22 of them were not completed within 60 days (99.12% timely). However, for the State's developmental preschools, 84 of the 2,222 initial evaluations were not completed within the required timeframe (96.22% timely). Based on these results, the WDE's technical assistance efforts related to evaluation requirements will focus primarily on the BHD and staff members from the regional developmental preschools. Additionally, the WDE has set up monthly meetings between the WDE and BHD staff so that requirements—especially those related to comprehensive, timely evaluations—will be discussed during these regular technical assistance sessions.

Regarding the 106 initial evaluations that were not completed within 60 days, the WDE takes specific corrective action within any LEA exhibiting a rate below 100% compliance with the 60-day requirement. First, the Department contacts each LEA with the student identification numbers of students whose initial evaluations were reportedly completed after sixty days from the LEA's receipt of consent. In each instance the LEA is required to provide an explanation for the delay. The only acceptable reasons are those found in 34 C.F.R. §300.301(c)(1). After removing those with acceptable reasons, the WDE issues a letter containing findings for each of the students in whose case initial evaluations took longer than sixty days. LEAs are required to provide evidence that the student's evaluation was completed, although late, unless the student is no longer within the jurisdiction of the LEA. Then in order to ensure systemic correction for all students, the WDE reviews a sample of initial evaluations conducted during the current fiscal year to evidence 100% compliance for students other than those whose initial evaluations were completed late during the previous fiscal year. In this way the Department ensures that its identification and correction processes meet the requirements of the OSEP 09-02 Memo.

In the Department's analysis of LEA reasons for delays in completing initial evaluations within sixty days, the WDE determined that a small number of LEAs require additional support and oversight in this area. Some of the ways the WDE addressed this during FFY 2011 include the following:

- Depending upon the content of their CAP/compliance agreement, districts were provided with specially designed, on-site TA from WDE staff.
- Staffing levels are reviewed through various fiscal reports to identify potential personnel shortages that may be affecting an LEA's ability to complete initial evaluations in a timely manner.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance):

| Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010 through June 30, 2011)                                | 53 |
|--|----|
| Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding) | 53 |

# **WYOMING**

| 3. Number of FFY 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)] | 0 |
|---|---|
|---|---|

# Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

| 4. | Number of FFY 2010 findings not timely corrected (same as the number from (3) above)                                       | 0 |
|----|--|---|
| 5. | Number of FFY 2010 findings the State has verified as corrected beyond the one-<br>year timeline ("subsequent correction") | 0 |
| 6. | Number of FFY 2010 findings not verified as corrected [(4) minus (5)]  | 0 |

#### **Actions Taken if Noncompliance Not Corrected:**

As shown in the table above, all 53 findings of noncompliance made in FFY 2010 related to timely initial evaluations were corrected within one year.

Verification of Correction of FFY 2010 Noncompliance (Either Timely or Subsequent) and Description of the Specific Actions the State Took to Verify the Correction of Findings of Noncompliance Identified in FFY 2010:

As reported in Wyoming's FFY 2010 APR under Indicator 11, the WDE made 53 findings of noncompliance related to timely initial evaluations during FFY 2010. In conducting its verification process, the WDE determined that:

- 1. Each LEA is correctly implementing the specific regulatory requirement—in this case 34 C.F.R §§300.301(c)(1). This was achieved by reviewing new documentation not previously reviewed from the noncompliant LEAs showing that initial evaluations conducted within FFY 2011 were completed within sixty days, and
- 2. Each LEA has corrected the child-specific noncompliance by completing each child's evaluation, although late. This was achieved by requesting additional documentation and explanation from each LEA regarding each instance in which an initial evaluation exceeded the 60-day timeframe.

# Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the State has modified the structure of its improvement activity reporting. This framework of improvement strategies is outlined in the SPP and is aligned with the eight general supervision components. Therefore the WDE will continue to implement all the strategies outlined during each federal fiscal year.

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

**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:**

- a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
- b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
- c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
- d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or whom exceptions under 34 CFR §300.301(d) applied.
- e. # 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.

| FFY                   | Measurable and Rigorous Target  |
|-----------------------|---|
| 2011<br>(2011 – 2012) | 100% of eligible children who transition from Part C to Part B having an IEP in place by their third birthday |

## **Actual Target Data for FFY 2011:**

Display 12-1: Percentage of 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.  | 457   |
|---|-------|
| b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday   | 47    |
| c. # of those found eligible who have an IEP developed and implemented by their third birthdays   | 374   |
| d. # for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.        | 14    |
| e. # of children who were referred to Part C less than 90 days before their third birthdays.  | 0     |
| # in a but not in b, c, d, or e.  | 22    |
| 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 | 94.4% |
| Percent = [(c) / (a-b-d-e)] * 100   |       |

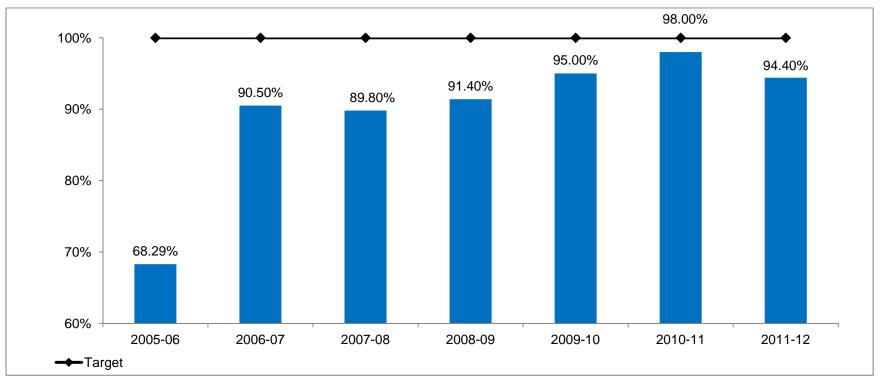
<sup>\*</sup> During FFY 2011, there were 22 children in Part C who were referred and found eligible for Part B but did not have an IEP in place by their third birthday (without a valid reason for the delay).

WDE did not meet the target for FFY 2011.

Display 12-2: Range of Delay (Days) and Reasons for Delay

| Range of Days Beyond the Third Birthday | Reasons for Delay   |
|---|---|
| 1-53 days                               | Difficulty contacting parents; parents not attending scheduled meetings; staff error. |

Display 12-3: Percentage of Children Referred by Part C Who are Found Eligible for Part B and Have IEPs Developed by Their Third Birthdays – Results Over Time



# Discussion of Improvement Activities and Explanation Slippage, if the State did not meet its target, that for FFY 2011:

For FFY 2011, the WDE is reporting 94.4% of children eligible transition from Part C to Part B by their third birthday. As Display 12-3 indicates, Wyoming had an decrease in the percentage of children referred by IDEA Part C who were found eligible for Part B and had IEPs developed by their third birthdays: from 98% in FFY 2010 to 94.4% in FFY 2011. The State has not yet attained the target of 100% in any year, Wyoming has further need for improvement in this area.

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In its review of the explanations provided by the BHD to explain why these 36 children referred from Part C and found eligible for Part B did not have IEPs in place by their third birthday, the WDE noted that over one-third of explanations (14 of 36) contained descriptions of delays caused by legitimate reasons (such as the parent repeatedly failing to produce the child for an evaluation). However, among the 22 unacceptable reasons for the delay, the WDE found several instances in which regional developmental preschool staff members demonstrated confusion regarding whether IEPs have to be in place by the third birthday or simply whether the Part B evaluations have to be complete by the third birthday. In multiple instances, preschool staff also mentioned having trouble contacting parents as a reason for the delay in getting an IEP in place by the child's third birthday. The WDE is clarifying the requirements and addressing these unacceptable reasons to delay putting in place an IEP by the third birthday as it conducts improvement activities during FFY 2012.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision. The FFY 2011 statewide data drill down revealed no additional concerns in this area.

Activities specifically designed to target these data-based concerns:

- Began implementing the revised MOU with the BHD to ensure effective implementation of Part B regulations in preschools.
- The WDE and BHD met in April of 2012 to discuss a variety of issues including timely transition from an IFSP to an IEP when an eligible student transitions from Part C to Part B.

Correction of FFY 2010 Findings of Noncompliance (if State reported less than 100% compliance in its FFY 2010 APR):

| Number of findings of noncompliance the State made during FFY 2010 (the period from July 1, 2010 through June 30, 2011)                                | 9 |
|--|---|
| Number of FFY 2010 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding) | 9 |
| 3. Number of FFY 2009 findings not verified as corrected within one year [(1) minus (2)]   | 0 |

# Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

| 4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)                                   | 0 |
|---|---|
| 5. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction") | 0 |
| 6. Number of FFY 2010 findings not verified as corrected [(4) minus (5)]  | 0 |

# **WYOMING**

#### **Actions Taken if Noncompliance Not Corrected:**

As shown in the table above, all nine findings of noncompliance related to timely development and implementation of IEPs for children transitioning from Part C to Part B were corrected within one year.

# Verification of Correction (either timely or subsequent) and Description of the Specific Actions that the State Took to Verify the Correction of Findings of Noncompliance identified in FFY 2010:

As reported in the FFY 2010 APR under Indicator 12, the WDE made nine findings of noncompliance in this area during FFY 2010. In conducting its verification process, the WDE determined that:

- 1. the LEA (BHD) is correctly implementing the specific regulatory requirement—in this case 34 C.F.R. §300.124(b). This was achieved by reviewing new documentation on a sample of student records not previously reviewed from the LEA's online special education database showing that IEPs were developed and implemented by the child's third birthday (for those referred by Part C and found eligible for Part B).
- 2. the LEA (BHD) had corrected the child-specific noncompliance by developing and implementing an IEP for each child referred by Part C and found eligible for Part B, although late. This was achieved by reviewing additional documentation and explanation from the LEA regarding each instance in which the development and implementation of the IEP was not completed by the child's third birthday.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2010 and denotes which indicators were most impacted by the implementation of each activity.

Monitoring Priority: Effective General Supervision Part B / Effective Transition

**Indicator 13:** Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

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

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

| FFY                   | Measurable and Rigorous Target   |  |
|-----------------------|--|--|
| 2011<br>(2011 – 2012) | 100% of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency was invited to the IEP team meeting with the prior consent of the parent or student who has reached the age of majority. |  |

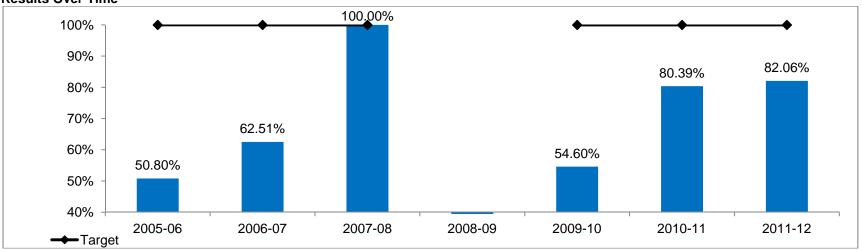
# **Actual Target Data for FFY 2011:**

Display 13-1: Percent of Youth aged 16 and above with an IEP that meets IDEA Postsecondary Transition Requirements

|   | FFY 2011 |
|---|----------|
| # of youth whose IEPs were reviewed   | 418      |
| # of youth whose IEPs were compliant upon initial review                                | 343      |
| Percent of youth whose IEPs met the indicator after initial review                      | 82.06%   |
| # of youth whose IEPs were compliant after district corrective action (within FFY 2011) | 75       |
| # of youth whose IEPs met the indicator for FFY 2011                                    | 418      |
| Percent of youth whose IEPs ultimately met the indicator for FFY 2011                   | 100.0%   |

WDE did not meet the target for FFY 2011.

Display 13-2: Percent of Youth aged 16 and above with an IEP that meets IDEA Postsecondary Transition Requirements – Results Over Time



Note: FFY 2010 and FFY 2011 data shown on Display 13-2 are prior to district corrections made during the same school year; all districts achieved 100% compliance during both of these federal fiscal years.

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### Discussion of Improvement Activities and Explanation Slippage, if the State did not meet its target, that occurred for FFY 2011:

For the FFY 2011 APR, WDE is reporting that 82.06% of youth age 16 and above had an IEP that met the IDEA requirements reflected in the NSTTAC Indicator 13 Checklist. Although the State did not meet the mandated 100% target, as indicated in Displays 13-2, Wyoming has made consistent progress on this Indicator since FFY 2008. This increase may be attributed to the State's technical assistance efforts, which included telephone conferences, on-site technical assistance, and state-wide professional development, in addition to substantial efforts made by individual school districts. The WDE will continue to build district level capacity to ensure appropriate transition planning for students with disabilities.

To collect data for this indicator, the WDE selects a stratified, representative sample of ten student files from each district in the state. Districts with fewer than ten students of transition age are required to submit all IEPs of transition-aged students. Trained WDE staff members then review each of the files using the NSTTAC Indicator 13 Checklist Form A. Any file that meets all of the applicable checklist criteria is judged to meet the indicator.

Through its initial review, the WDE identified 26 LEAs that had at least one transition IEP that demonstrated evidence of noncompliance with one or more of the IDEA postsecondary transition requirements. In aggregate, the State's overall compliance percentage for FFY 2011 (82.06%) represents improvement from its FFY 2010 rate of 80.39% and its FFY 2009 rate of 54.6%. The WDE elected to make individual student findings in each LEA rather than making a single finding for similar infractions in each of these 26 LEAs.

In order to make the review more informative, the WDE disaggregates the results of the review. The breakdown of transition issues identified during FFY 2011 was as follows:

- 36 (8.61%) IEPs lacked one or more measurable postsecondary goals
- All IEPs contained postsecondary goal(s) that were updated annually
- 14 (3.35%) IEPs did not contain evidence that the student's postsecondary goals were based on age-appropriate transition assessments
- 6 (1.44%) IEPs lacked evidence of appropriate transition services
- 10 (2.39%) IEPs did not include courses of study designed to improve the student's academic and functional achievement and facilitate their movement to post-school opportunities
- 30 (7.18%) IEPs lacked annual goals reasonably designed to enable the student to meet the postsecondary goal(s)
- All IEPs contained evidence that the student was invited to the IEP meeting where transition services were discussed
- 8 (1.91%) IEPs lacked evidence that representatives from outside agencies were invited to the meeting (when the file documented that their participation would be desirable)

The WDE follows a two-pronged process to ensure appropriate identification and correction of all Indicator 13 noncompliance. Each LEA demonstrating one or more instance of noncompliance receives a finding notice via certified mail from the WDE Special Programs Division. The WDE's correspondence identifies each student (by WISER ID number) found to have any transition deficiency in his/her current IEP and informs the LEA as to which specific areas were out of compliance (items marked 'no' on the NSTTAC checklist). LEAs are required to take the necessary steps to correct these IEPs within 45 days. After correcting the identified issue(s), the LEAs are required to provide timely, written assurance to the WDE Special Programs Division that each instance of noncompliance was corrected. During FFY 2011, through receipt of timely assurance letters and documentation submitted by districts showing corrections made to individual students' programs, the WDE verified that all of the 26 LEAs with findings had corrected each individual instance of noncompliance within the 45-day timeframe.

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In order to ensure that districts not only correct the individual files but also make systemic corrections, the WDE conducted a separate verification file review in April 2012. The WDE requested a stratified, representative sample of ten new files from these 26 districts. None of these files were reviewed during the initial Indicator 13 review of December 2011, and WDE staff members checked each of them to ensure that noncompliance had been corrected for all students (not just those for whom findings were made initially). In this way, both prongs of OSEP Memo 09-02 were addressed adequately when identifying and correcting noncompliance related to transition.

The WDE is confident that each LEA is now correctly implementing the specific regulatory requirements in 34 C.F.R. §300.320(b) and has developed and implemented an IEP that includes the required transition content for each youth, unless the youth is no longer within the jurisdiction of the LEA (consistent with OSEP Memo 09-02).

In reviewing data concerning graduation rates and dropout rates during FFY 2011, the WDE noted that both rates were among the lowest on record. Additionally, the State's employment rate was among the best in the nation, giving the impression that postsecondary transition compliance should not be a first-tier concern for FFY 2011. However, results from the December 2011 Indicator 13 file review proved this impression incorrect. Not satisfied by the slight increase in its compliance percentage, the WDE restructured its statewide technical assistance efforts to include a major focus on transition compliance in late FFY 2011 and throughout FFY 2012. The following improvement activities are among those implemented by the WDE in FFY 2011 to improve performance on Indicator 13:

- As a component of its monthly TA events, the WDE's created, delivered and publically posted a technical assistance PowerPoint targeting IDEA requirements pertaining to secondary school students with disabilities.
- The WDE and the State's Division of Vocational Rehabilitation (part of the Wyoming Department of Workforce Services) revised the MOU
  between the two agencies in the spring of 2012. As this MOU is being implemented, the two agencies have begun to share data and
  resources formally and are working to increase DVR and district collaboration concerning postsecondary transition planning.
- WDE began planning and organizing a statewide Community of Practice (CoP) devoted to improving district practices related to postsecondary transition. Participants were recruited from a variety of sources (employers, parent centers, DVR, school districts, etc.) in the fall of 2012, and this group's work began in early 2013.

# **Correction of FFY 2010 Findings of Noncompliance:**

Level of compliance (actual target data) State reported for FFY 2010 for this indicator: 80.39%

|                | dings of noncompliance the State made during FFY 2010 (the period from July gh June 30, 2011)                                | 90 |
|----------------|--|----|
|                | Y 2010 findings the State verified as timely corrected (corrected within one date of notification to the LEA of the finding) | 90 |
| 3. Number of F | Y 2010 findings <u>not</u> verified as corrected within one year [(1) minus (2)]   | 0  |

# Correction of FFY 2010 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

| 4. Number of FFY 2010 findings not timely corrected (same as the number from (3) above)                                | 0 |
|--|---|
| Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction") | 0 |
| 6. Number of FFY 2010 findings not yet verified as corrected [(4) minus (5)]   | 0 |

#### **Actions Taken if Noncompliance Not Corrected:**

All compliance identified during FFY 2010 was corrected in a timely manner.

# Verification of Correction (either timely or subsequent) and Description of the Specific Actions that the State Took to Verify the Correction of Findings of Noncompliance identified in FFY 2010:

As reported in the State's FFY 2010 APR under Indicator 13, the WDE made 90 findings of noncompliance in this area during that fiscal year. In conducting its verification process, the WDE determined that:

- 1. Each LEA is correctly implementing the specific regulatory requirements—in this case 34 C.F.R §§300.320(b) and 300.321(b). This was achieved by requesting IEP files and meeting notices for a sample of students whose records were not reviewed during the initial transition review of December 2010. The WDE's review of these students' documentation during the spring of 2011 demonstrated that the LEAs in question were following compliant IEP transition practices, and
- 2. Each LEA had corrected the child-specific noncompliance by reconvening the IEP team(s) or amending the program(s) to correct the deficiencies identified in the WDE's response letters of early 2011. The LEAs in question were required to submit Prior Written Notice forms and revised IEPs detailing the corrections made on each student's behalf.

## Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2011 and denotes which indicators were most impacted by the implementation of each activity.

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

Indicator 14: Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were:

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

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

#### Measurement:

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

| FFY                 | Measurable and Rigorous Targets |           |           |
|---------------------|---------------------------------|-----------|-----------|
| 2011<br>(2010-2011) | Measure A                       | Measure B | Measure C |
|                     | 40.3%                           | 61.8%     | 72.6%     |

## **Actual Target Data for FFY 2011:**

Display 14-1: Number and Percent of Exiters Engaged in Employment and/or Education

| Category   | Number | Percent |
|--|--------|---------|
| Interviewed Exiters  | 171    | 100.0%  |
| Measurement A: Percent of youth enrolled in higher education within one year of leaving high school;   | 60     | 35.1%   |
| Measurement B: Measurement A plus percent of youth competitively employed within one year of leaving high school   | 97     | 56.7%   |
| Measurement C: Measurement B plus percent of youth enrolled in any other type of post-<br>secondary education/training or employed in any other type of employment | 120    | 70.2%   |

# WDE met none of the three targets for FFY 2011.

Display 14-2: Number and Percent of Exiters in each of Four Categories

| Category   | Number | Percent |
|--|--------|---------|
| Enrolled in higher education as defined in measure A   | 60     | 35.1%   |
| 2. Engaged in Competitive employment as defined in measure B (but not in 1.)                           | 37     | 21.6%   |
| 3. Enrolled in other postsecondary education or training as defined in measure C (but not in 1. or 2.) | 4      | 2.3%    |
| 4. Engaged in some other employment as defined in measure C (but not in 1. or 2. or 3.)                | 19     | 11.1%   |
| Not in any of the above four categories  | 51     | 29.8%   |
| Total  | 171    | 100.0%  |

In April 2012, the WDE obtained contact information for the 601 students with disabilities who exited Wyoming schools in FFY 2010. The 601 exiters represent all of the students with disabilities who exited high school that year, whether by graduating with a diploma, receiving a certificate of completion, dropping out, or aging out. The WDE's contracted survey firm attempted to reach all exiters by phone during June of 2012. At the

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conclusion of the survey process, the survey team successfully interviewed 171 exiters for a response rate of 28.5%. 112 of the 601 exiters had incorrect phone numbers. If these "non-reachable" exiters are excluded from the denominator, the adjusted response rate is 35.0% (171/489).

#### Valid and Reliable Data

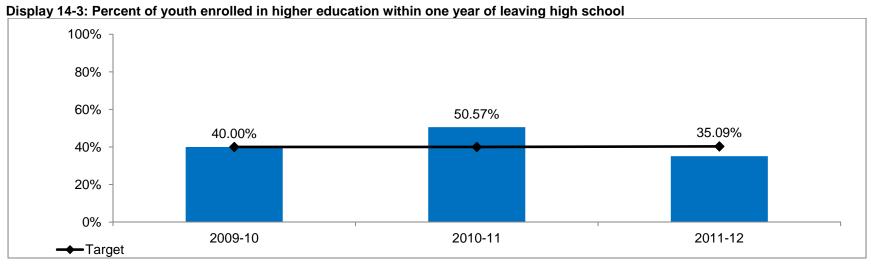
The WDE and contractors analyzed response rates by various demographic characteristics including gender, race/ethnicity, primary disability, and type of exit (i.e. graduated with a regular diploma, dropped out, etc.). No significant differences exited in response rates by gender, race/ethnicity, or primary disability. However, students who graduated with a regular diploma were more likely to respond (31%) than students who dropped out (18%). Of those LEAs that had at least ten exiters, the response rate by LEA varied from 9% to 52%. The differences in response rates by districts and by demographic category were minor enough that the WDE is confident that these results are representative of the state.

The WDE also analyzed the 171 sets of responses themselves using these same demographic characteristics. Interview results show that students who graduated with a regular diploma were more likely to be engaged in employment or education (Measurement C - 78%) than students who dropped out (50%).

### Discussion of Improvement Activities and Explanation Slippage, if the State did not meet its target, that occurred for FFY 2011:

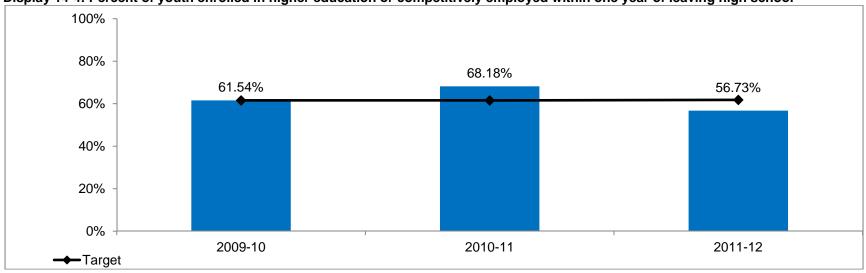
For FFY 2011, the WDE is reporting 35.1% percent of youth enrolled in higher education within one year of leaving high school; the WDE did not meet its target of 40.3% for Indicator 14A. For Indicator 14B, the WDE is reporting 56.7% percent of youth enrolled in higher education or competitively employed within one year of leaving high school. Thus the State did not meet its target of 61.8% for Indicator 14B. Finally, the WDE is reporting 70.2% percent of youth enrolled in higher education, competitively employed, or enrolled in any other type of post-secondary education or employed in any other type of employment within one year of leaving high school. The WDE came close to attaining its goal of 72.6%, but did not meet the target for Indicator 14C.

The percentage of exiting students with disabilities enrolled in higher education, competitively employed, and engaged in other postsecondary education and employment opportunities has varied from FFY 2009 to FFY 2011 as indicated in Displays 14-3 – 14-5.

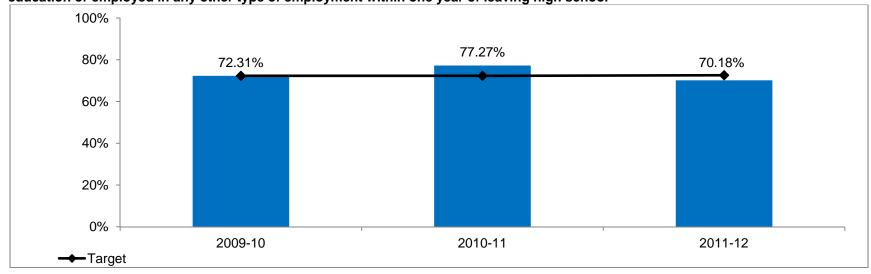


Part B State Annual Performance Report for FFY 2011 (OMB NO: 1820-0624 / Expiration Date: 7/31/2015)

Display 14-4: Percent of youth enrolled in higher education or competitively employed within one year of leaving high school



Display 14-5: Percent of youth enrolled in higher education, competitively employed, or enrolled in any other type of post-secondary education or employed in any other type of employment within one year of leaving high school



#### **WYOMING**

In order to determine whether the decline shown in Displays 14-4 and 14-5 was limited to former students with disabilities, the WDE contacted the Bureau of Labor Statistics to obtain data on the overall employment picture for young adults in Wyoming. Specifically, the WDE requested employment and unemployment statistics for all adults ages 18-22 during the twelve-month period from July 1, 2011 through June 30, 2012. Unfortunately, the BLS office was unable to provide the WDE with the requested data. However, anecdotal evidence suggests that the decline in Wyoming's economic outlook over the course of FFY 2011 is negatively impacting employment opportunities across the state—especially for the state's younger residents.

Throughout FFY 2011, the WDE solicited suggestions from its stakeholders on ways to increase response rates and improve the State's rates on the three measures contained in Indicator 14. One suggestion was for the WDE to provide districts with an additional end-of-school-year reminder about the importance of maintaining accurate contact information with exiting students and in the future WDE plans to develop incentives for districts with the highest response rates. Stakeholders also suggested the WDE add an item to its survey to determine whether a former student might be involved in a religious mission or other volunteer activity one year after leaving high school. Many Wyoming students go on church-related missions after high school or participate in the Peace Corps, Americorps, etc. The WDE understands that some states consider participation in these activities to be "other types of employment" for the purposes of Indicator 14. The WDE is also exploring means of improving its survey protocol, such as leaving call-back numbers when survey staff members reach former students' voicemail systems. Finally, the State's Advisory Panel for Students with Disabilities recommended the WDE seek partnerships with other state agencies (i.e. Community College Commission, Work Force Services, etc.) that collect information regarding postsecondary outcomes of youth with disabilities in order to share data and resources. By implementing these changes, the WDE anticipates improvement in the State's rates for Indicator 14.

Employment rates for former students with disabilities are not only of concern to the WDE; improvements are also being targeted by a variety of agencies within state government. Wyoming recently conducted a study with State Employment Leadership Network in order to evaluate employment options specific to Wyoming's individuals with intellectual and developmental disabilities. Results of the study included a recommendation that Wyoming establish a clear employment policy statement demonstrating an emphasis on integrated community employment for adults with intellectual and developmental disabilities. The Leadership Network's report also advised the State to establish and implement a strategy to improve the effectiveness of employment support staff and service coordinators in providing resources, support, and assistance to individuals with intellectual and developmental disabilities in finding and maintaining employment. Additionally, the report recommended the development of strategies to increase awareness of integrated employment opportunities and to engage stakeholders in increasing the demand for such opportunities.

Furthermore, the Behavioral Health Department (BHD) has created a task force, the Wyoming Integrated Employment Team, to improve the State's employment systems and long term employment outcomes of citizens in Wyoming with intellectual and developmental disabilities. The WDE Special Programs Division maintains a position on this Team and will play a key role as the Team moves forward with various initiatives designed to ensure and increase employment opportunities for people with disabilities.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision. For FFY 2011, the WDE conducted a variety of improvement activities—including the following—to increase performance in this indicator area:

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- The WDE planned and held regional data share-out meetings for all districts to increase understanding of LEA data and how to use these
  data to drive program improvement.
- The WDE created, delivered and publically posted a technical assistance power point targeting IDEA requirements pertaining to secondary school students with disabilities.
- The WDE and the State's Division of Vocational Rehabilitation (part of the Wyoming Department of Workforce Services) revised the MOU
  between the two agencies in the spring of 2012. As this MOU is being implemented, the two agencies have begun to share data and
  resources formally and are working to increase DVR and district collaboration concerning postsecondary transition planning.
- WDE began planning and organizing a statewide Community of Practice (CoP) devoted to improving district practices related to postsecondary transition. Participants were recruited from a variety of sources (employers, parent centers, DVR, school districts, etc.) in the fall of 2012, and this group's work began in early 2013.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2010 and denotes which indicators were most impacted by the implementation of each activity.

## Part B State Annual Performance Report (APR) for FFY 2011

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:

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

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

States are required to use the "Indicator 15 Worksheet" to report data for this indicator (see Attachment A).

| FFY                   | Measurable and Rigorous Target                            |
|-----------------------|---|
| 2011<br>(2011 – 2012) | 100% of findings of noncompliance corrected within 1 year |

#### **Actual Target Data for FFY 2011:**

Display 15-1: Findings of Noncompliance Corrected within One Year

| Findings<br>made in<br>FFY | Number of<br>Findings of<br>Noncompliance | Number of<br>Findings<br>Corrected and<br>Verified Within<br>One Year | Percent of<br>Findings<br>Corrected<br>Within<br>One Year | Number of<br>Findings<br>Subsequently<br>Corrected | Number of LEAs with Continuing Noncompliance |
|----------------------------|---|---|---|--|--|
| 2010                       | 173                                       | 170   | 98.27%  | 3  | 0  |

|  | ۷ | V | Y | O | M | 11 | V | G |
|--|---|---|---|---|---|----|---|---|
|  |   |   |   |   |   |    |   |   |

| 2009 | 370 | 362 | 97.84% | 8 | 0*  |
|------|-----|-----|--------|---|-----|
| 2008 | 453 | 444 | 98.01% | 9 | 0** |

#### WDE did not meet the target for FFY 2011.

\* Status of Noncompliance Identified in FFY 2009 (as required by OSEP in response to Wyoming's APR for FFY 2010)

During the course of its FFY 2010 verification visits, the WDE unfortunately found that three LEAs were unable to demonstrate correction of findings made during FFY 2009. Among these three districts, the state identified four findings of noncompliance that remained uncorrected in FFY 2011. 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. However, the WDE is pleased to announce that all three of these LEAs successfully corrected their remaining findings of noncompliance during FFY 2011. In the paragraphs below, the WDE will explain the status of the noncompliance in each LEA and the enforcement actions taken to bring about correction.

**LEA A:** During FFY 2009, the WDE made two findings of noncompliance in this district. One of the two was corrected within one year in accordance with OSEP Memo 09-02 through verification visit process outlined below. However, the second finding (in the area of FAPE – Educational Benefit) was not corrected at the time of the State's first verification visit. To assist the district in its correction efforts, the WDE required the LEA to secure the services of a special education "coach." At the start of the 2011 – 2012 school year, the coach met with district staff on multiple occasions to provide technical assistance and also met with LEA administrators to emphasize the powerful role they play in achieving correction. Furthermore, the coach worked with district staff to review files, discuss appropriate practices, and make recommendations for needed adjustments and improvements in order to bring the LEA into compliance. The coach also provided additional follow-up via phone and web conferences.

In March of 2012, the WDE conducted its second verification visit in this LEA to ascertain the status of the district's corrective efforts in this finding area. Through a focused file review and interviews with district staff, the WDE determined that:

- 1) the LEA is correctly implementing the specific regulatory requirements—in this case 34 C.F.R. §§300.101 and 300.324(b). This was achieved by including several students in the monthly review samples whose files were not reviewed during the April 2012 verification visit; and
- 2) the LEA had corrected the child-specific noncompliance. This was achieved by including several students in the monthly samples for whom noncompliance was identified during the April 2012 verification visit.

Due to the results of the March 2012 verification visit, the WDE closed the compliance agreement and no further corrective action is required of this LEA.

**LEA B:** During FFY 2009, the WDE made three findings of noncompliance in this district, which is one of the largest districts in the state. One of the findings concerned IDEA's Least Restrictive Environment requirements, another was in the area of FAPE – Educational Benefit, and the third was in the area of FAPE – Social, Emotional, and Behavioral Supports and Services. Following the district's verification visit in the spring of 2011, the WDE determined that the district had successfully corrected its LRE noncompliance (see the State's FFY 2010 APR for details). However, this LEA was not able to evidence correction of the two aforementioned FAPE findings. In the months after the noncompliance was identified during FFY 2009, the district lost its superintendent and director of special education who had been involved in the development and early

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implementation of the district's CAP. The loss of these two key staff members was a setback given the one-year timeframe for correction. Thankfully, the district replaced these two administrators in early FFY 2010, and the current superintendent, assistant superintendent, and director of special education fully embraced the district's corrective efforts. The director of special education meets monthly with special education staff in each of the district's schools, and he holds regular meetings with administrators to ensure that guidance to staff is implemented.

In April of 2012, the WDE conducted its second verification visit in this LEA to ascertain the status of the district's corrective efforts in these two finding areas. Through a focused file review and interviews with district staff, the WDE determined that:

- 1) the LEA is correctly implementing the specific regulatory requirements—in this case 34 C.F.R. §§300.101 and 300.324(b). This was achieved by including several students in the monthly review samples whose files were not reviewed during the April 2011 verification visit; and
- 2) the LEA had corrected the child-specific noncompliance. This was achieved by including several students in the monthly samples for whom noncompliance was identified during the April 2011 verification visit.

Due to the district's successful correction of these two findings (as evidenced through the April 2012 verification visit), the WDE closed the compliance agreement and no further corrective action is required of this LEA.

**LEA C:** During FFY 2009, the WDE made one finding of noncompliance (FAPE – Educational Benefit) in this small district. After the Department's spring 2011 verification visit revealed continuing noncompliance, the district extended its corrective efforts through the implementation of a compliance agreement. Because the district's special education director was previously employed by the WDE Special Programs Division and has extensive experience with the CIFM process, the State determined that an external coach was not required in this case. However, during the compliance agreement period, the WDE maintained regular contact with this special education administrator, and the two parties met quarterly to discuss progress on the compliance agreement. These quarterly meetings also allowed regular opportunities for the district to receive customized technical assistance.

In May of 2012, the WDE conducted its second verification visit in this LEA to ascertain the status of the district's corrective efforts in this single finding area. Through a focused file review and interviews with district staff, the WDE determined that:

- 1) the LEA is correctly implementing the specific regulatory requirements—in this case 34 C.F.R. §§300.101 and 300.324(b). This was achieved by including several students in the monthly review samples whose files were not reviewed during the May 2011 verification visit; and
- 2) the LEA had corrected the child-specific noncompliance. This was achieved by including several students in the monthly samples for whom noncompliance was identified during the May 2011 verification visit.

Due to the district's successful correction of the FAPE – Educational Benefit finding (as evidenced through the May 2012 verification visit), the WDE closed the compliance agreement and no further corrective action is required of this LEA.

#### \*\* Status of Noncompliance Identified in FFY 2008 (as required by OSEP in response to Wyoming's APR for FFY 2010).

As reported in the State's APR for FFY 2010, the WDE determined that four findings of noncompliance originally identified in FFY 2008 were not corrected within one year (two from a school district, and two from the BHD). Two of the findings were in the area of FAPE – Educational Benefit, one was in the area of FAPE – Extended School Year, and the fourth was in the area of Evaluations Procedures/Eligibility Determinations. In the paragraphs below, the WDE will explain the status of these findings, which were all corrected prior to submission of the FFY 2011 APR.

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**LEA 1:** This LEA, which is one of the largest school districts in Wyoming, continued to work in a compliance agreement with the WDE until the April 2012 verification visit. When the WDE visited the LEA at that time, the State was able to verify that the district had fully corrected the FAPE – Extended School Year finding. Consistent with OSEP's 09-02 Memo, the WDE verified that:

- 1) the LEA is correctly implementing the specific regulatory requirements—in this case 34 C.F.R. §§300.101 and 300.106 (this was achieved by including several students in the verification sample whose files were not reviewed during the April 2011 verification visit); and
- 2) the LEA had corrected the child-specific noncompliance. This was achieved by including several students in the April 2012 sample for whom noncompliance was identified during the April 2011 visit.

Additionally, the State determined that the LEA had made substantial progress toward full correction of the FAPE – Educational Benefit finding of noncompliance. WDE Special Programs Division leadership staff members met with the LEA superintendent and LEA special education director following the verification visit to explain how the improvement signified that a compliance agreement was no longer necessary. However, the WDE needed further assurance that the noncompliance would be fully corrected. As such, the WDE required the district to complete additional activities to demonstrate 100% compliance. The State and district agreed that the LEA would provide a set of files (randomly selected by the WDE) on a monthly basis for the State's review. Using these monthly samples, the WDE reviewed the files to ensure that each student had an IEP in place that was reasonably calculated to result in educational benefit. For any student whose IEP was found to be noncompliant, the WDE provided the district with specific feedback and directives to address problematic aspects of particular programs. The district then provided evidence that it had satisfactorily addressed the noted concerns when it sent the following month's IEPs.

In December of 2012, following the final monthly submission of IEPs, the WDE determined that:

- 3) the LEA is correctly implementing the specific regulatory requirements—in this case 34 C.F.R. §§300.101 and 300.324(b). This was achieved by including several students in the monthly review samples whose files were not reviewed during the April 2012 verification visit: and
- 4) the LEA had corrected the child-specific noncompliance. This was achieved by including several students in the monthly samples for whom noncompliance was identified during the April 2012 verification visit.

The WDE considers both of the LEA's findings from FFY 2008 to be corrected, and the State looks forward to the district's continuous improvement in educational results and functional outcomes for its students with disabilities.

**LEA 2:** In this case, the LEA in question is the Behavioral Health Division (BHD). As a result of a BHD 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 B. Under Wyoming state statute, the BHD 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 BHD, 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 BHD 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.

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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 were brought to this Developmental Preschool Region. The WDE conducted its 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 BHD 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 BHD collaborated on multiple targeted technical assistance efforts through FFY 2009, FFY 2010 and FFY 2011, including 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. The region was visited again for verification purposes in January 2012, and at that time, the WDE determined that:

- 1) the LEA is correctly implementing the specific regulatory requirements at the heart of each finding of noncompliance. This was achieved by conducting a focused file review and interviews on a sample of children who were not included in samples from the original on-site visit or the FFY 2010 verification visit; and
- 2) the LEA has corrected the child-specific noncompliance by reconvening the IEP team(s) or amending the program(s) to correct the deficiencies identified in the WDE's CIFM reports. This is accomplished by including several students in the verification samples for whom noncompliance was identified during the original on-site visit.

The WDE considers both of the LEA's findings from FFY to be corrected. The BHD and WDE have used the monitoring experience in this particular developmental preschool region to inform both agencies' monitoring procedures and to ensure that each preschool child with a disability receives a comprehensive evaluation, an appropriate eligibility determination, and has an IEP in place that is reasonably calculated to result in educational benefit.

Discussion of Improvement Activities and Explanation Slippage, if the State did not meet its target, that occurred for FFY 2011:

During FFY 2011, the WDE verified that 170 findings of noncompliance initially identified during FFY 2010 were corrected within one year (98.27% of the 173 total findings made during that year). The types of findings are described in the Indicator 15 worksheet below, and they were identified that the surface is a series of provided the WDE follows:

of the 173 total findings made during that year). The types of findings are described in the Indicator 15 worksheet below, and they were identified through a variety of monitoring and dispute resolution processes. When it comes to verifying the correction of each finding, the WDE follows different verification processes depending on the method in which the finding was identified. For the purposes of explaining how the Department ensures that both prongs of OSEP Memo 09-02 are met through its verification efforts, the following paragraphs describe the WDE's procedures.

For findings identified through the WDE's desk audit procedures (noncompliance related to SPP Indicators 4, 9, 10, 11, 12, and 13), the Department reviews documentation internally and then issues letters to LEAs detailing the specific violations and requiring the LEA to take action and provide evidence of correction by a deadline (within 45 days of receiving the notification). Then, after the LEA has provided evidence of correction, the WDE conducts a second review to fulfill the requirements of OSEP Memo 09-02.

During FFY 2010, 152 of the 173 findings made by WDE were made through this desk audit process. All of these findings pertained to requirements reflected in Indicators 11, 12, and 13.

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- As reported in Wyoming's FFY 2010 APR under Indicator 11, the WDE made 53 findings of noncompliance during FFY 2010. In conducting its verification process, the WDE determined that:
  - 1) each LEA is correctly implementing the specific regulatory requirement—in this case 34 C.F.R §§300.301(c)(1). This was achieved by reviewing new documentation not previously reviewed from the noncompliant LEAs showing that initial evaluations conducted within FFY 2011 were completed within sixty days, and
  - 2) each LEA had corrected the child-specific noncompliance by completing each child's evaluation, although late. This was achieved by requesting additional documentation and explanation from each LEA regarding each instance in which an initial evaluation exceeded the 60-day timeframe.
- As reported in the FFY 2010 APR under Indicator 12, the WDE made nine findings of noncompliance in this area during FFY 2010. In conducting its verification process, the WDE determined that:
  - 1) the LEA (BHD) is correctly implementing the specific regulatory requirement—in this case 34 C.F.R. §300.124(b). This was achieved by reviewing new documentation on a sample of student records not previously reviewed from the LEA's online special education database showing that IEPs were developed and implemented by the child's third birthday (for those referred by Part C and found eligible for Part B).
  - 2) the LEA (BHD) had corrected the child-specific noncompliance by developing and implementing an IEP for each child referred by Part C and found eligible for Part B, although late. This was achieved by reviewing additional documentation and explanation from the LEA regarding each instance in which the development and implementation of the IEP was not completed by the child's third birthday.
- As reported in the State's FFY 2010 APR under Indicator 13, the WDE made 90 findings of noncompliance in this area during FFY 2010.
   In conducting its verification process, the WDE determined that:
  - 1) each LEA is correctly implementing the specific regulatory requirements—in this case 34 C.F.R §§300.320(b) and 300.321(b). This was achieved by requesting IEP files and meeting notices for a sample of students whose records were not reviewed during the initial transition review of December 2010. The WDE's review of these students' documentation during the spring of 2011 demonstrated that the LEAs in question were following compliant IEP transition practices, and
  - 2) each LEA had corrected the child-specific noncompliance by reconvening the IEP team(s) or amending the program(s) to correct the deficiencies identified in the WDE's response letters of early 2011. The LEAs in question were required to submit Prior Written Notice forms and revised IEPs detailing the corrections made on each student's behalf.

For findings identified through the WDE's dispute resolution procedures, the Department made nine findings of noncompliance during FFY 2010. All of these findings were made through the State's complaint investigation procedures. In accordance with the WDE's dispute resolution procedures [Section III(F)(2)], the State verified correction of each finding by reviewing evidence collected from the LEAs in question to demonstrate that each of them had completed the required activities listed in the decision no later than one year from the date of the decision.

For findings identified through the WDE's on-site Continuous Improvement Focused Monitoring procedures, the Department made twelve findings of noncompliance during FFY 2010. Nine of these twelve findings were corrected within one year, and three findings were subsequently corrected during FFY 2011 and early FFY 2012. After the WDE makes a finding of noncompliance from an on-site CIFM visit, the WDE sends a team of monitors back to the district to engage in a fresh on-site monitoring activity to determine the current compliance status of each finding area. In all cases, these on-site verification visits take place within one year of identification. The visits are undertaken in a manner that ensures the State's adherence to both prongs of OSEP Memo 09-02. Specifically, the WDE ensures that:

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- 1) the LEA is correctly implementing the specific regulatory requirements at the heart of each finding of noncompliance. This is achieved by conducting a focused file review and interviews on a sample of students who were not included in samples from the original on-site visit.
- 2) the LEA has corrected the child-specific noncompliance by reconvening the IEP team(s) or amending the program(s) to correct the deficiencies identified in the WDE's CIFM reports. This is accomplished by including several students in the verification samples for whom noncompliance was identified during the original on-site visit.

As described above, however, the WDE determined that, for three findings of noncompliance made in FFY 2010 through on-site CIFM visits, the district in question had not achieved correction. The single LEA in which these three findings were made demonstrated progress when the WDE verification teams visited during FFY 2011, but the district was not able to fully correct the findings according to one or both prongs of OSEP's 09-02 memo. Thus, the WDE conducted a second verification visit during the winter of 2012-2013 and determined that:

- 1) the LEA is correctly implementing the specific regulatory requirements at the heart of each finding of noncompliance. This was achieved by conducting a focused file review and interviews on samples of students who were not included in samples from the original on-site visit or the first verification visit in FFY 2011.
- 2) the LEA has corrected child-specific noncompliance by reconvening the IEP team(s) or amending the program(s) to correct the deficiencies identified in the WDE's CIFM reports. This was accomplished by including several students in the verification samples for whom noncompliance was identified during the original on-site visit and/or the first verification visit in FFY 2011.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision. For FFY 2011, the WDE conducted a variety of activities—including the following—which were designed specifically to target concerns related to the timely correction of noncompliance:

- The WDE targeted IDEA FAPE requirements during its 2012 Special Education Leadership Symposium, a statewide conference. This included sessions on Strategies for Severe Behavior and Mental Health Needs, Reducing Behavior Problems in the Classroom, Implementation of Wyoming's Rules on Seclusion and Restraint, Weaving Discipline and FAPE, Functional Behavior Assessments and Behavior Intervention Plans, Legal Issues Related to Students with Mental Health Issues, and What All Educators Need to Know About Discipline and Students with Disabilities.
- WDE works with districts that have not corrected findings of noncompliance within the one-year timeline to establish and implement compliance agreements for clearing any remaining areas of noncompliance. SEA staff members meet with these districts on a monthly basis to support them and ensure correction in a timely manner.
- Based on the outcomes of the quarterly/monthly meetings, the WDE required one district to secure and external coach, directing the use
  of the district's federal funds for this purpose.
- WDE staff participated in each of the monthly MSIP technical assistance teleconferences.
- The WDE Special Programs Division met monthly as a group to review data, communications, training results, etc. pertaining to districts
  with open findings of noncompliance. Information shared and gathered during these meetings was utilized to support and guide
  interactions with these districts.

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• Depending on the content of their CAP/compliance agreement, the WDE often provided districts with specially designed, on-site TA.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2011 and denotes which indicators were most impacted by the implementation of each activity.

#### PART B INDICATOR 15 WORKSHEET

| Indicator/Indicator Clusters   | General Supervision<br>System Components   | # of LEAs Issued<br>Findings in FFY 2010<br>(7/1/10 to 6/30/11) | (a) # of Findings of<br>noncompliance<br>identified in FFY 2010<br>(7/1/10 to 6/30/11) | (b) # of Findings of<br>noncompliance from<br>(a) for which<br>correction was<br>verified no later than<br>one year from<br>identification |
|--|--|---|--|--|
| <ol> <li>Percent of youth with IEPs graduating from high school with a regular diploma.</li> <li>Percent of youth with IEPs dropping out of high school.</li> </ol>  | Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other             | 0   | 0  | 0  |
| 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. | Dispute Resolution:<br>Complaints, Hearings  | 0   | 0  | 0  |
| <ul><li>3. Participation and performance of children with disabilities on statewide assessments.</li><li>7. Percent of preschool children with</li></ul>   | Monitoring Activities:<br>Self-Assessment/ Local<br>APR, Data Review,<br>Desk Audit, On-Site<br>Visits, or Other | 5   | 5  | 4  |
| IEPs who demonstrated improved outcomes.   | Dispute Resolution:<br>Complaints, Hearings  | 1   | 1  | 1  |
| 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:<br>Self-Assessment/ Local<br>APR, Data Review,<br>Desk Audit, On-Site<br>Visits, or Other | 0   | 0  | 0  |

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| 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:<br>Complaints, Hearings  | 0 | 0 | 0 |
|--|--|---|---|---|
| <ul> <li>5. Percent of children with IEPs aged 6 through 21 -educational placements.</li> <li>6. Percent of preschool children aged 3 through 5 – early childhood placement.</li> </ul>  | Monitoring Activities:<br>Self-Assessment/ Local<br>APR, Data Review,<br>Desk Audit, On-Site<br>Visits, or Other | 1 | 1 | 0 |
|  | Dispute Resolution:<br>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  | Monitoring Activities:<br>Self-Assessment/ Local<br>APR, Data Review,<br>Desk Audit, On-Site<br>Visits, or Other | 0 | 0 | 0 |
| disabilities.  | Dispute Resolution:<br>Complaints, Hearings  | 0 | 0 | 0 |
| 9. Percent of districts with disproportionate representation of racial and ethnic groups in special education that is the result of inappropriate identification.  | Monitoring Activities:<br>Self-Assessment/ Local<br>APR, Data Review,<br>Desk Audit, On-Site<br>Visits, or Other | 0 | 0 | 0 |
| 10. Percent of districts with disproportionate representation of racial  | Dispute Resolution:<br>Complaints, Hearings  | 0 | 0 | 0 |

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| and ethnic groups in specific disability categories that is the result of inappropriate identification.  |  |    |    |    |
|--|--|----|----|----|
| 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,   | Monitoring Activities:<br>Self-Assessment/ Local<br>APR, Data Review,<br>Desk Audit, On-Site<br>Visits, or Other | 14 | 53 | 53 |
| within that timeframe.   | Dispute Resolution:<br>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:<br>Self-Assessment/ Local<br>APR, Data Review,<br>Desk Audit, On-Site<br>Visits, or Other | 1  | 9  | 9  |
|  | Dispute Resolution:<br>Complaints, Hearings  | 0  | 0  | 0  |
| 7. Percent of youth aged 16 and above with IEP that includes appropriate measurable postsecondary goals that are annually updated and based  | Monitoring Activities:<br>Self-Assessment/ Local<br>APR, Data Review,<br>Desk Audit, On-Site<br>Visits, or Other | 25 | 90 | 90 |
| 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. | Dispute Resolution:<br>Complaints, Hearings  | 0  | 0  | 0  |
| Other areas of noncompliance:<br>Comprehensive Evaluation, Prior Written<br>Notice, Other Procedural Noncompliance,  | Monitoring Activities:<br>Self-Assessment/ Local<br>APR, Data Review,  | 3  | 6  | 5  |

| IEP Team Membership, Highly Qualified Service Provider, Confidentiality,                | Desk Audit, On-Site<br>Visits, or Other                |                       |                   |        |
|---|--|-----------------------|-------------------|--------|
| Extended School Year, Child Find Process, Seclusion and Restraint, Assistive Technology | Dispute Resolution:<br>Complaints, Hearings            | 4                     | 7                 | 7      |
| 33  |  |                       |                   |        |
|   | Sum the numbers down (                                 | Column a and Column b | 173               | 170    |
|   | ance corrected within one<br>In (b) sum divided by col |                       | (b) / (a) X 100 = | 98.27% |

## Part B State Annual Performance Report (APR) for FFY 2011

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.

| FFY                   | Measurable and Rigorous Target  |
|-----------------------|---|
| 2011<br>(2011 – 2012) | 100% of resolution sessions resolved within timeline through resolution session settlement agreements |

**Actual Target Data for FFY 2011:** 

| Year                    | Number of Hearing Requests that Went to Resolution Sessions | Number of Resolution<br>Sessions Held | Number of Resolution Sessions<br>Conducted within Timeline and<br>Resulting in Agreements |
|-------------------------|---|---------------------------------------|---|
| FFY 2011<br>(2011-2012) | 2   | 2                                     | 1   |

WDE did not meet the target for FFY 2011.

Discussion of Improvement Activities and Explanation Slippage, if the State did not meet its target, that occurred for FFY 2011: For FFY 2011, the WDE is reporting 50% (1 of 2) of resolution sessions conducted within timeline and resulting in agreement. One of these resolution sessions resulted in a partial agreement and was conducted within the timeline; the other resulted in a full agreement but was not conducted within the timeline.

Despite the comparatively small amount of formal dispute resolution activity in Wyoming, the State remains proactive in its approach toward resolving disputes at the lowest level possible and as quickly as possible. During FFY 2011, the WDE conducted a variety of improvement activities including the following:

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- The WDE regularly offers early dispute resolution guidance and 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, which includes participation in the hearing officer work group sponsored by Technical Assistance for Excellence in Special Education (TAESE).
- In conjunction with the WDE's annual Leadership Symposium, the State attended and sponsored a Special Education Law Seminar for Juvenile and Education Law Practitioners and Advocates, which provided dispute resolution training through multiple breakout sessions to parents, advocates, school counsel and administrators.

Although the State does not meet the *n* size for reporting, the WDE has developed and implemented improvement strategies as part of its system of general supervision. Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are color coded according to their connection to the eight main components of Wyoming's system of general supervision. The FFY 2011 statewide data drill down revealed no additional concerns in this area.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2011 and denotes which indicators were most impacted by the implementation of each activity.

### Part B State Annual Performance Report (APR) for FFY 2011

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)) divided by 2.1] times 100.

| FFY                   | Measurable and Rigorous Target                            |
|-----------------------|---|
| 2011<br>(2011 – 2012) | 100% of mediations held resulting in mediation agreements |

Actual Target Data for FFY 2011:

| Year                 | Number of Mediation<br>Requests | Number of Mediation<br>Requests withdrawn | Number of Mediations<br>Resulting in Agreement | Number of Mediations Not<br>Resulting in Agreement |
|----------------------|---------------------------------|---|--|--|
| <br>2011<br>11-2012) | 7                               | 1   | 1  | 5  |

WDE did not meet the target for FFY 2011.

Discussion of Improvement Activities and Explanation Slippage, if the State did not meet its target, that occurred for FFY 2011:

During FFY 2011, the WDE received seven requests for mediation. One of the requests was subsequently withdrawn, but six mediations were held. Only one of these six mediations settled in agreement; the other five did not result in agreement. Thus, the WDE is reporting an FFY 2011 rate of 16.7% for Indicator 19. This represents neither progress nor slippage for Wyoming, since the State received zero mediation requests in FFY 2010 and had no data with which to calculate a rate for that federal fiscal year.

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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 2011 was seven; therefore, WDE does not need to establish a baseline or targets for this Indicator 19 at this time.

Despite the comparatively small amount of formal dispute resolution activity in Wyoming, the State remains proactive in its approach toward resolving disputes at the lowest level possible and as quickly as possible. During FFY 2011, the WDE conducted a variety of improvement activities including the following:

- The WDE regularly offers early dispute resolution guidance and 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, which includes participation in the hearing officer work group sponsored by Technical Assistance for Excellence in Special Education (TAESE).
- In conjunction with the WDE's annual Leadership Symposium, the WDE attended and sponsored a Special Education Law Seminar for Juvenile and Education Law Practitioners and Advocates, which provided dispute resolution training through multiple breakout sessions to parents, advocates, school counsel and administrators.

Outlined in the SPP is a framework of strategies aligned with the WDE general supervision system. The specific improvement activities implemented in FFY 2011 are listed in Appendix B of this document. This table includes a description of each activity and indicates which indicators were most impacted by the implementation of each activity. The activities are coded according to their connection to the eight main components of Wyoming's system of general supervision. The FFY 2011 data drill down revealed no additional concerns in this area.

#### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2011:

As the WDE indicated in its APR for FFY 2009, the structure of reporting improvement activities has changed to align this process with the WDE's general supervision system. This framework of improvement strategies is outlined in the SPP and is included as Appendix A in this APR. Appendix B describes all the specific improvement activities completed in FFY 2011 and denotes which indicators were most impacted by the implementation of each activity.

# Appendix A SPP Improvement Strategies

|        | Revised SPP  |   |   |   |   |   |   |   |   |   | Indic | ators | 3  |    |    |    |    |    |    |    |    |
|--------|--|---|---|---|---|---|---|---|---|---|-------|-------|----|----|----|----|----|----|----|----|----|
|        | Improvement Strategies   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10    | 11    | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
|        | LEAs and the BHD use the WDE Grant Management System (GMS) to review and analyze performance on relevant SPP indicators.   | X | Х | X | X | Х |   | X | Х | Х | Х     | X     | Х  | Х  | Х  |    |    |    |    |    | Х  |
| al     | LEAs and the BHD will develop an annual plan based on an analysis of local performance. Plans are reviewed and approved on an annual basis. They will implement activities tied to unmet SPP indicator targets as a condition of Federal Part B funding.   | X | Х | Х | X | x |   | X | X | х | х     | х     | Х  | х  | х  |    |    |    |    |    | X  |
| Fiscal | WDE monitors and approves LEA and BHD drawdown reports and requests for funding to ensure funds are spent on data-based priority issues.   | Х | Х | Х | Х | Х |   | Х | Х | Х | Х     | Х     | Х  | Х  | Х  |    |    |    |    |    | Х  |
|        | Based on the analysis of data and SEA capacity, the WDE develops and disseminates RFPs for coaches, contract monitors, and consultants as needed.  | Х | Х | Х | Х | Х |   | Х | Х | Х | Х     | Х     | Х  | Х  | Х  | Х  | Х  | Х  | Х  | Х  | Х  |
|        | WDE seeks supplemental funding from federal and foundation sources to support TA/PD and other improvement activities.  | Х | Х | Х | Х | Х |   | Х | Х |   |       |       | Х  | Х  | Х  |    |    |    |    |    |    |
|        | WDE engages in data validation activities to ensure the validity and reliability of data submitted by districts. Upon submission of district data, business rules are applied to ensure district data is accurate.   |   |   |   |   |   |   |   |   |   |       |       |    |    |    |    |    |    |    |    | Х  |
|        | WDE provides annual technical assistance to districts around the collection and analysis of data   | X | Х | Х | X | Х |   | X | Х | Х | Х     | Х     | Х  | Х  | Х  |    |    |    |    |    | Х  |
| Data   | WDE conducts annual statewide data drilldown with all Division staff and consultants in order to develop priorities for monitoring, TA/PD, and other areas of General Supervision. Drill-down allows for data-based decisions regarding the effectiveness of current monitoring, TA/PD, and APR improvement activities, and improvement activities are developed or enhanced based on the results. | Х | х | х | Х | х |   | X | х | х | х     | Х     | х  | х  | х  | х  | х  | Х  | х  |    |    |
| Policy | As needed, WDE promulgate state regulations, and develop and disseminate state policies, to ensure compliance with the provisions of the IDEA and state law.   | X | X | Х | X | х |   | X | x | X | X     | Х     | Х  | X  | X  | X  | Х  | Х  | Х  | X  | Х  |

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|                          | Revised SPP   |   |   |   |   |   |   |   |   |   | Indic | ators | <b>3</b> |    |    |    |    |    |    |    |    |
|--------------------------|---|---|---|---|---|---|---|---|---|---|-------|-------|----------|----|----|----|----|----|----|----|----|
|                          | Improvement Strategies  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10    | 11    |          | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
|                          | As needed, develop and disseminate model IEP forms and model local policies to ensure compliance with the IDEA and state law.   | X | х | Х | Х | X |   | Х | X | Х | Х     | X     | X        | Х  | х  | х  | Х  | Х  | Х  | Х  | х  |
|                          | Approve local policies to ensure compliance with IDEA and state rules, and ensure the correction and ultimate approval of those submitted local policies that do not initially comply with the requirements of federal and state law. | X | Х | х | Х | х |   | X | х | х | Х     | X     | X        | Х  | х  | х  | х  | Х  | Х  | Х  | х  |
|                          | Interface effectively with the state legislature and the Governor's office to increase the probability that legislation enhances the ability of public agencies to comply with the IDEA.  | X | X | Х | Х | x |   | X | x | X | Х     | X     | Х        | Х  | x  | x  | X  | Х  | Х  | Х  | Х  |
| ion                      | Ensure the competence of hearing officers, mediators, and IEP Facilitators through effective training.  |   |   |   |   |   |   |   |   |   |       |       |          |    |    |    | Х  | Х  | Х  | Х  |    |
| Dispute Resolution       | Annually evaluate the effectiveness of the process and analyze the substance and outcomes of hearings, complaint resolutions, and mediations.   |   |   |   |   |   |   |   |   |   |       |       |          |    |    |    | х  | Х  | Х  | Х  |    |
| Disput                   | Encourage parents and LEAs to engage in early dispute resolution activities such as facilitated IEP meetings and mediations.  |   |   |   |   |   |   |   |   |   |       |       |          |    |    |    |    |    | х  | х  |    |
| ctions                   | Develop determinations formula that includes both compliance and performance indicators, and issue determinations to districts annually based upon the formula.   | Х | Х | Х | Х | х |   | Х | х | Х | Х     | Х     | Х        | Х  | х  | х  | Х  | Х  | Х  | Х  | Х  |
| Incentives and Sanctions | Ensure the availability of high-quality TA/PD opportunities for all "needs assistance" districts. Ensure that all districts that need intervention or need substantial intervention participate in high-quality TA/PD activities.     | Х | х | х |   | х |   | X | х | х | х     | Х     | Х        | Х  | х  |    |    |    |    |    | х  |
| Incent                   | Ensure the correction of noncompliance discovered through data analysis, monitoring, and complaint resolution activities within one year through the development and full implementation of corrective action plans.                  |   |   |   |   |   |   |   |   |   |       |       |          |    |    | x  |    |    |    |    |    |

|  | Revised SPP   |   |   |   |   |   |   |   |   |   | Indic | ators | ;  |    |    |    |    |    |    |    |    |
|--|---|---|---|---|---|---|---|---|---|---|-------|-------|----|----|----|----|----|----|----|----|----|
|  | Improvement Strategies  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10    | 11    | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
|  | If any public agencies do not correct noncompliance within one year, ensure correction as soon as possible thereafter through the development and full implementation of compliance agreements and the assignment of coaches to assist these public agencies. |   |   |   |   |   |   |   |   |   |       |       |    |    |    | Х  |    |    |    |    |    |
|  | Intervene as soon as possible, with sanctions if necessary, when evidence indicates that CAPs or compliance agreements are not being implemented fully and/or effectively   |   |   |   |   |   |   |   |   |   |       |       |    |    |    | Х  |    |    |    |    |    |
| ssional  | Develop and disseminate guidance documents regarding compliance, performance, and the connection between the two.   | X | Х | Х | Х | x |   | X | X | Х | Х     | X     | X  | Х  | Х  |    |    |    |    |    |    |
| Technical Assistance / Professional<br>Development (TA/PD) | Hold at least one annual, multi-day PD event on compliance- and performance-related topics with national experts as presenters.   | Х | Х | Х | Х | х |   | Х | Х | Х | Х     | Х     | Х  | Х  | Х  |    |    |    | Х  | Х  | Х  |
| ssistance  | Implement statewide initiatives or TA/PD projects.  | Х | Х | X | X | Х |   | X | X | Х | Х     | X     | X  | X  | Х  |    |    |    | X  | X  | Х  |
| nical As<br>Devel  | Provide targeted TA to LEAs based on determinations and/or monitoring and/or complaint findings.  | Х | Х | X | X | Х |   | X | X | Х | X     | X     | X  | Х  | Х  | Х  |    |    | X  | Χ  | Х  |
| Tech   | Hold monthly TA/PD conference calls on compliance-<br>and performance-related topics. Disseminate PPT<br>presentations in advance of these conference calls.  | Х | Х | Х | X | Х |   | X | Х | Х | Х     | Х     | X  | Х  | Х  | Х  |    |    | Х  | X  | Х  |
|  | Based on the statewide data drilldown, create monitoring selection formula annually to guide the selection of LEAs within population groups for performance-based monitoring and desk audits.   | X | Х | X | X | X |   | X | Х |   |       |       | X  |    | Х  |    |    |    |    |    |    |
| Monitoring   | During pre-staffing process, drill data down to determine potential compliance issues affecting the performance of students with disabilities. Create compliance hypotheses and purposeful samples of students.   | x | x | X | X | х |   | X | X | х | x     | x     | X  | X  | x  |    |    |    |    |    |    |
| ≥  | As warranted by evidence gathered on site, make individual, systemic, and substantive findings of noncompliance in monitoring reports.  | Х | Х | Х | Х | Х |   | Х | Х | Х | Х     | Х     | Х  | Х  | Х  |    |    |    |    |    |    |
|  | Ensure the competence of staff and contractual monitors through TA/PD activities.   | Χ | Х | Х | Χ | Х |   | X | Х | Х | Χ     | Χ     | X  | Х  | Х  |    |    |    |    |    | Х  |

| Revised SPP  |   |   |   |   |   |   |   |   |   | Indic | ators | 3  |    |    |    |    |    |    |    |    |
|--|---|---|---|---|---|---|---|---|---|-------|-------|----|----|----|----|----|----|----|----|----|
| Improvement Strategies   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10    | 11    | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| After implementation of CAPs or compliance agreements, engage in verification monitoring to determine the current compliance status of all prior findings of noncompliance. For systemic findings, in order to make certain that noncompliance was fully corrected, ensure that purposeful samples of students include both students who were in the original samples and students who were not. | X | X | X | X | X |   | X | X | X | X     | X     | х  | X  | X  | X  |    |    |    |    |    |
| Use desk audit process to monitor compliance with Indicators 3b, 5c, 9, 10, 11, 12, and 13.  |   |   | X |   | X |   |   |   | X | Х     | Х     | Х  | X  |    | X  |    |    |    |    |    |

# Appendix B FFY 2011 APR Improvement Activities

|        | FFY 2011 APR  |   |   |   |   |   |   |   |   |   | ndic | ators | 3  |    |    |    |    |    |    |    |    |
|--------|---|---|---|---|---|---|---|---|---|---|------|-------|----|----|----|----|----|----|----|----|----|
|        | Improvement Activities  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10   | 11    | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
|        | <b>F-1</b> . WDE reviewed monthly district draw downs to verify funds were utilized in a timely manner.   | Χ | Х | Х |   | Х |   |   |   |   |      | Х     |    | Χ  |    | Х  |    |    |    |    |    |
|        | <b>F-2</b> . On a quarterly basis, districts submitted periodic expenditure reports, which were reviewed to ensure alignment with approved district activities.   | Х | Х | Х |   | Х |   |   |   |   |      | Х     |    | Х  |    | Х  |    |    |    |    |    |
|        | <b>F-3</b> . Contracts were awarded to qualified individuals and agencies in the areas of monitoring, data analysis, legal, technical assistance, professional development, dispute resolution, and accessibility.                                    | X | X | Х | X | Х |   | X | X | X | X    | X     | X  | X  | X  | Х  | Х  | Х  | X  | Х  | Х  |
| Fiscal | <b>F-4</b> . Completed required reporting for the Deaf Blind Project and State Personnel Development Grants.  | Χ | Х | Χ | Χ | Х |   |   | Χ |   |      |       |    |    | X  |    |    |    |    |    |    |
| 正<br>  | <b>F-5</b> . Staffing levels were reviewed through various fiscal reports to identify potential shortages of necessary personnel.   | X | Х | Х |   | Х |   |   |   |   |      | X     |    |    | X  |    |    |    |    |    |    |
|        | F-6. Offered testimony regarding State level fiscal support.  | Χ | Х | Х | X | Х |   |   |   | Х | Х    | Х     |    | X  | Х  |    |    |    |    |    |    |
|        | F-7. The WDE began work on an "Answer Book" guidance document for LEAs concerning their responsibilities for COPS. A variety of stakeholders are providing input and feedback on the document. The WDE will complete the guide during FFY 2012.       | X | Х | Х |   | Х |   |   |   |   |      |       |    | X  | Х  |    |    |    |    |    |    |
|        | <b>D-1</b> . WDE requested files from all districts and reviewed 26 elements, in each file, to determine the accuracy of the data submitted to the SEA.   |   |   |   |   |   |   |   |   |   |      |       |    |    |    |    |    |    |    |    | Х  |
| Data   | <b>D-2</b> . Planned and held regional data share-outs for all districts to increase understanding the implications of local data and how to use data to ensure the provision of FAPE in the LRE and improve outcomes for students with disabilities. | Х | Х | Х | Х | х |   |   | Х | Х | Х    | Х     |    | Х  | Х  |    |    |    |    |    | х  |
|        | <b>D-3</b> . Consolidated special education data collection (WDE-684) to streamline and simplify district data reporting.   |   |   |   |   |   |   |   |   |   |      |       |    |    |    |    |    |    |    |    | Х  |
|        | <b>D-4</b> . Provided regional and web based trainings on the new WDE-684 data report in order to ensure accurate implementation.   |   |   |   |   |   |   |   |   |   |      |       |    |    |    |    |    |    |    |    | Х  |

|          | FFY 2011 APR   |   |   |   |   |   |   |   |   |   | Indic | ators |    |    |    |    |    |    |    |    |    |
|----------|--|---|---|---|---|---|---|---|---|---|-------|-------|----|----|----|----|----|----|----|----|----|
|          | Improvement Activities   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10    | 11    | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
|          | D-5. Participated in EIMAC.  |   |   |   |   |   |   |   |   |   |       |       |    |    |    |    |    |    |    |    | Х  |
|          | D-6. The WDE provided each district with a detailed report of all risk ratios so LEAs can continue to be proactive in their improvement efforts.   |   |   |   |   |   |   |   |   | Х | Х     |       |    |    |    |    |    |    |    |    |    |
|          | <b>D-7</b> . Participated in webinars regarding 618 data tables.   |   |   |   |   |   |   |   |   |   |       |       |    |    |    |    |    |    |    |    | Х  |
|          | <b>D-8</b> . Utilized the online training modules that have been released on the ideadata.org website.   |   |   |   |   |   |   |   |   |   |       |       |    |    |    |    |    |    |    |    | Х  |
|          | <b>D-9</b> . Participated in EdFacts/OSEP data collection crosswalks.  |   |   |   |   |   |   |   |   |   |       |       |    |    |    |    |    |    |    |    | Х  |
|          | <b>P-1</b> . Developed guidance related to State policies and procedures for special education.  | Х | Х | Х | Х | Х |   | Х | Х | Х | Х     | Х     | Х  | Х  | Х  | Х  | Х  | Х  | Х  | Х  | Х  |
|          | <b>P-2</b> . Developed and adopted State policies for seclusion and restraint.   | X | Х | Х | Χ | Х |   |   |   |   |       |       |    | Х  | Х  |    |    |    |    |    |    |
|          | <b>P-3</b> . Developed model seclusion and restraint policies for districts (aligned to the State's policies and procedures).  | X | Х | Х | Χ | Х |   |   |   |   |       |       |    | Х  | Х  |    |    |    |    |    |    |
|          | <b>P-4</b> . Gathered stakeholder input on special education model forms revisions.  | Χ | Х | Х | Χ | Х |   | Х | Х | Х | Х     | Χ     | Х  | Х  | Х  |    | Х  | Χ  | Х  | Χ  |    |
|          | <b>P-5</b> . Modified model special education forms based on stakeholder input.  | X | Х | Х | Χ | Х |   | Х | Х | Х | Х     | Χ     | Χ  | Х  | Х  |    | Х  | Χ  | X  | Χ  |    |
| Policy   | <b>P-6</b> . Offered testimony regarding State level fiscal support.   | Х | Х | Х | Х | Х |   |   |   | Х | Х     | Х     |    | Х  | Х  |    |    |    |    |    |    |
| <u> </u> | <b>P-7</b> . Offered testimony regarding the implications of dyslexia screening legislation.   | X | Х | Х | X | Х |   |   | Х |   |       |       |    |    | Х  |    |    |    |    |    |    |
|          | P-8. Participated in the Wind River Children's Triad, a partnership between the WDE, WRIR school districts, and many tribal agencies representing the Eastern Shoshone and Northern Arapaho tribes to develop educational policies and seek to improve outcomes for children on the reservation, including assisting in the development of the TRIAD Truancy Prevention Flowchart, a document which illustrates the process districts with Native American students should use to prevent truancy. | X | x | x |   |   |   |   |   |   |       |       |    |    | х  |    |    |    |    |    |    |

## **WYOMING**

|                             | FFY 2011 APR   |   |   |   |   |   |   |   |   |   | Indic | ators | 3  |    |    |    |    |    |    |    |    |
|-----------------------------|--|---|---|---|---|---|---|---|---|---|-------|-------|----|----|----|----|----|----|----|----|----|
|                             | Improvement Activities   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10    | 11    | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
|                             | <b>P-9.</b> Drafted MOU with the Department of Workforce Services – Division of Vocational Rehabilitation to increase support to districts and improve transition planning and services across the State.  |   |   |   |   |   |   |   |   |   |       |       |    | Х  | х  |    |    |    |    |    |    |
|                             | <b>P-10</b> . Finalized and began implementation of a new MOU with the BHD to ensure effective implementation of Part B regulations in preschools.   |   |   |   |   |   |   | Х |   |   |       |       | Х  |    |    |    |    |    |    |    |    |
|                             | P-11. WDE staff provided specialized training to the BHD and regional developmental preschool staff on the State's model forms for special education. This training assisted preschool staff in utilizing forms accurately and meeting IDEA requirements when developing and implementing IEPs for young children with disabilities. |   |   |   |   |   |   | х | х |   |       | х     | х  |    |    |    |    |    |    |    |    |
|                             | <b>DR-1</b> . Provided an annual training session specifically designed for hearing officers to ensure appropriate due process hearing practices.  |   |   |   |   |   |   |   |   |   |       |       |    |    |    |    |    | Х  | Х  | Х  |    |
| Dispute Resolution          | <b>DR-2</b> . The WDE regularly offered early dispute resolution guidance and continues to encourage the use of mediation and resolution sessions as a means of resolving disputes in a timely manner.   |   |   |   |   |   |   |   |   |   |       |       |    |    |    |    | X  | X  | X  | X  |    |
| oute Re                     | <b>DR-3</b> . All dispute resolution specialists participated in TAESE dispute resolution work groups.   |   |   |   |   |   |   |   |   |   |       |       |    |    |    | Х  |    | Х  | Х  | Х  |    |
| Disk                        | <b>DR-4</b> . Held a Special Education Law Seminar for Juvenile and Education Law Practitioners and Advocates; provided dispute resolution training through multiple breakout sessions to parents, advocates, school counsel and administrators.   |   |   |   |   |   |   |   | х |   |       |       |    |    |    | х  | х  |    |    |    |    |
| and                         | <b>IS-1</b> . Provided training and disseminated TA documents to districts concerning the determinations process.  | Х | Х | Х | Х | Х |   | Х | Х | Х | Х     | Х     | Х  | Х  | Х  | Х  |    |    |    |    | Х  |
| Incentives and<br>Sanctions | <b>IS-2</b> . Districts in the <i>Needs Intervention</i> determination category were encouraged to attend a wide variety of professional development and technical assistance opportunities, including the Leadership Symposium and monthly TA calls.  | Х | Х | Х |   | х |   |   | х |   |       | х     |    | Х  | Х  |    |    |    |    |    |    |

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|  | FFY 2011 APR   |   |   |   |   |   |   |   |   |   | Indic | ators | ; |    |    |    |    |    |    |    |    |
|--|--|---|---|---|---|---|---|---|---|---|-------|-------|---|----|----|----|----|----|----|----|----|
|  | Improvement Activities   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10    | 11    |   | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
|  | <b>IS-3</b> . In order to support districts in correction of noncompliance, the WDE monitored the completion and execution of CAP activities through quarterly meetings with district administration.  | Х | х | х |   | х |   |   |   |   |       |       |   |    |    | Х  | Х  |    |    |    |    |
|  | <b>IS-4</b> . Met monthly with the monitoring/TA teams to review progress on all CAPs and compliance agreements, establish plans to address areas of concern, and make plans to provide additional resources or training.  | Х | х | х |   | Х |   |   |   |   |       |       |   |    |    | X  | Х  |    |    |    |    |
|  | <b>IS-5</b> . WDE worked with districts that have not corrected findings within the one-year timeline to establish compliance agreements for correcting the remaining areas of noncompliance. SEA staff meetings with these districts occurred on a monthly basis to support them in completing these activities.        | Х | х | х |   | х |   |   |   |   |       |       |   |    | Х  | Х  | Х  |    |    |    |    |
|  | <b>IS-6</b> . One district that failed to correct areas of noncompliance was required to secure an external coach to facilitate the correction process. The district was required to use federal funds for this purpose.   | Х | х | х |   |   |   |   |   |   |       |       |   |    | Х  | Х  |    |    |    |    |    |
|  | <b>IS-7</b> . Based on the outcomes of the quarterly/monthly CAP/compliance agreement meetings, the WDE often required additional technical assistance and other steps to ensure timely correction.  | X | х | Х |   | х |   |   |   |   |       |       |   | X  | Х  | X  |    |    |    |    |    |
| <b>±</b>   | <b>TA/PD-1</b> . Provided access to all guidance documents via the web.  | X | Х | Х | Х | Х |   |   |   |   |       | Χ     |   |    |    |    |    |    |    |    |    |
| Technical Assistance /<br>Professional Development | <b>TA/PD-2</b> . The WDE began work on an "Answer Book" guidance document for LEAs concerning their responsibilities for COPS. A variety of stakeholders are providing input and feedback on the document. The WDE will complete the guide during FFY 2012.  | Х | х | х |   | х |   |   |   |   |       |       |   | Х  | Х  |    |    |    |    |    |    |
| Technica   | <b>TA/PD-3</b> . The WDE Special Programs Division met monthly as a group to review data, communications, training results, etc. pertaining to districts with open findings of noncompliance. Information shared and gathered during these meetings was utilized to support and guide interactions with these districts. | Х | х | х |   | х |   | Х | х |   |       | X     | Х | Х  | Х  | Х  |    |    |    |    |    |

| FFY 2011 APR   |   |   |   |   |   |   |   |   |   | ndic | ators | <b>,</b> |    |    |    |    |    |    |    |    |
|--|---|---|---|---|---|---|---|---|---|------|-------|----------|----|----|----|----|----|----|----|----|
| Improvement Activities   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10   | 11    | 12       | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| TA/PD-4. The WDE held a three-day education leadership conference. Sessions targeted the following areas: Severe Behavior and Mental Health Needs, Reducing Behavior Problems in the Classroom, Implementation of Wyoming's Rules on Seclusion and Restraint, Weaving Discipline and FAPE, Functional Behavior Assessments and Behavior Intervention Plans, Legal Issues Related to Students with Mental Health Issues, and What All Educators Need to Know About Discipline and Students with Disabilities. | X | X | X | Х | х |   | X | X | X | X    | Х     | X        | X  | X  | X  | X  | X  | Х  | Х  |    |
| <b>TA/PD-5</b> . The WDE Special Programs Division and other WDE Divisions collaborated to plan and host Wyoming's second annual Native American Education Conference on the Wind River Reservation.   | Х | X | Х |   |   |   |   |   |   |      |       |          |    | X  |    |    |    |    |    |    |
| <b>TA/PD-6</b> . Utilized online TA request and data information site to track areas of district need and maintain consistency in WDE responses.   | Х | Х | Х | Х | Х |   |   | Х |   |      |       |          |    | Х  |    |    |    |    |    |    |
| <b>TA/PD-7</b> . Provided training to schools implementing PBIS.   | Х | Χ | Х | Х | Х |   |   | Х |   |      |       |          |    | Χ  |    |    |    |    |    |    |
| <b>TA/PD-8</b> . Trained four Wyoming regional resource coaches who provide technical assistance to schools implementing PBIS.   | X | X | X | X | Х |   |   | Х |   |      |       |          |    | X  |    |    |    |    |    |    |
| <b>TA/PD-9</b> . Evaluated district performance data aligned to monthly TA calls and required that district staff attend these TA sessions.  | Х | Х | Х | Х | Х |   |   |   |   |      |       |          | X  | Х  | Х  |    |    |    |    |    |
| <b>TA/PD-10</b> . Depending on the content of their CAP/compliance agreement, WDE provided districts with specially designed, on-site TA from WDE staff and/or other approved sources.   | Х | Х | х |   | х |   |   |   |   |      |       |          |    | Х  | X  |    |    |    |    |    |
| <b>TA/PD-11</b> . Based on the outcomes of the CAP quarterly/monthly meetings, the WDE required one district to secure an external coach, directing the use of the district's federal funds for this purpose.  | Х | Х | Х |   |   |   |   |   |   |      |       |          |    | Х  | Х  |    |    |    |    |    |
| <b>TA/PD-12</b> . Met with entire division staff on monthly basis to review data, communications, training results, etc of struggling districts and to utilize this information to plan additional supports and guide visits to and other interactions with those districts.   | X | X | X | X | Х |   | X | X |   |      | X     | X        | X  | X  | X  |    |    |    |    |    |

## **WYOMING**

|   | FFY 2011 APR  |   |   |   |   |   |   |   |   |    | Indic | ators |    |    |    |    |    |    |    |    |    |
|---|---|---|---|---|---|---|---|---|---|----|-------|-------|----|----|----|----|----|----|----|----|----|
|   | Improvement Activities  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9  | 10    | 11    | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
|   | TA/PD-13. Held monthly TA calls on the following  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | subjects: Special Considerations in IEP Development:  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | Special Factors; Behavior: FBAs and BIPs; Disciplinary  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | Removals, Change of Placement, & Manifestation  | Χ | Χ | Χ | Χ | Х |   |   | Χ |    |       |       |    | Χ  | Χ  | Χ  |    |    |    |    |    |
|   | Determination; Secondary Students and Special   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | Education; Parentally Placed Private School Students;   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | and Highly Qualified Requirements.  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | TA/PD-14. Held a Special Education Law Seminar for  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | Juvenile and Education Law Practitioners and  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | Advocates; provided dispute resolution training through   |   |   |   |   |   |   |   | Χ |    |       |       |    |    |    | Χ  | Χ  |    |    |    |    |
|   | multiple breakout sessions to parents, advocates,   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | school counsel and administrators.  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | TA/PD-15. Provided student-specific technical   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | assistance to teams working with students who have low  | Χ | Χ | Χ |   | Х |   |   |   |    |       |       |    | Χ  | Χ  |    |    |    |    |    |    |
|   | incidence disabilities.   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | TA/PD-16. The WDE established a Professional  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | Learning Community (PLC) focused on assistive   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | technology. This group was tasked with exploring the  | Х | Х | Х |   | Х |   |   | Х |    |       |       |    |    | Х  |    |    |    |    |    |    |
|   | current provision of assistive technology and developing  | ^ | ^ | ^ |   | ^ |   |   | ^ |    |       |       |    |    | ^  |    |    |    |    |    |    |
|   | promising practices and processes for increasing the  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | effective implementation of assistive technology.   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | TA/PD-17. WDE began planning and organizing a   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | statewide Community of Practices devoted to improving   | Χ | Χ | Х |   | Х |   |   | Х | Х  |       |       |    | Χ  | Х  |    |    |    |    |    |    |
|   | district practices related to postsecondary, early  | ^ | ^ |   |   | ^ |   |   | ^ | ^` |       |       |    | ^  |    |    |    |    |    |    |    |
| 1 | childhood, and LRE transitions.   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | TA/PD-18. The WDE expanded its Project Eye to Eye   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | program for students with learning disabilities by adding   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | an additional site and bringing the total to three. This  | Х | Х | Х |   | Х |   |   |   | Х  |       |       |    |    | Χ  |    |    |    |    |    |    |
|   | program established mentoring relationships between   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | students with learning disabilities in college and those in   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
| - | elementary school.  |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | TA/PD-19. The WDE and BHD met in April of 2012 to   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | discuss a variety of issues including timely transition   |   |   |   |   |   |   |   |   |    |       |       | Χ  |    |    |    |    |    |    |    |    |
|   | from an IFSP to an IEP when an eligible student   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
| - | transitions from Part C to Part B. <b>TA/PD-20</b> . Partnered with other States through their          |   |   |   |   |   |   |   | - |    |       |       |    |    |    |    |    |    |    |    |    |
|   |   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | Deaf-Blind projects to offer webinars to teachers, therapists, family members and administrators in the | Χ | Χ | Χ |   | Х |   | Χ |   |    |       |       |    |    | Χ  |    |    |    |    |    |    |
|   |   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |
|   | following areas: Autism, Developing Routine-Based   |   |   |   |   |   |   |   |   |    |       |       |    |    |    |    |    |    |    |    |    |

|            | FFY 2011 APR   |    |    |   |   |   |   |   |   |   | Indic | ators       | <u> </u> |    |     |    |    |    |    |    |  |
|------------|--|----|----|---|---|---|---|---|---|---|-------|-------------|----------|----|-----|----|----|----|----|----|--|
|            | Improvement Activities   | 1  | 2  | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10    |             | 12       | 13 | 14  | 15 | 16 | 17 | 18 | 19 | 20                                     |
|            | Schedules, Vestibular and Proprioceptive Senses,   |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | CHARGE Syndrome, and Use of the iPad in Daily  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | Routines.  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    | $ldsymbol{ldsymbol{ldsymbol{\sqcup}}}$ |
|            | TA/PD-21. Developed partnerships with  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | University personnel preparation programs to provide   | ., |    |   |   |   |   |   |   |   |       |             |          |    | .,  |    |    |    |    |    |  |
|            | degree/endorsement opportunities for Teachers of the   | Χ  | Х  | Х |   |   |   |   |   |   |       |             |          |    | X   |    |    |    |    |    |  |
|            | Deaf, Teachers for the Visually Impaired, Teachers of  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | the Deaf-Blind and Orientation and Mobility Specialists. <b>M-1</b> . Based on the areas of concern identified through |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    | <u> </u>                               |
|            | the statewide data drilldown, the WDE used a formula   |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | for selecting districts for on-site monitoring that  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | consisted entirely of middle school performance. This  | Χ  | Х  | Х |   | Х |   |   |   |   |       |             |          |    | Х   |    |    |    |    |    |  |
|            | resulted in the WDE visiting the districts that struggled  | ^  | ^  | ^ |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | most in meeting proficiency targets for middle school  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | students with disabilities.  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | M-2. Investigated stable hypothesis regarding the  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | provision of FAPE for students with HI, BI, VI, and MU   | Χ  | Х  | Χ |   | Χ |   |   |   |   |       |             |          | Χ  | Χ   |    |    |    |    |    |  |
|            | during all onsite district monitoring visits.  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | <b>M-3</b> . The WDE continued implementation of an ongoing  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | training process, which includes intensive training for  | Х  | Х  | Х | Х | Х |   |   |   | Х | Х     |             |          | Х  | Х   | X  |    |    |    |    | Х                                      |
| يَ         | new monitors, a multi-day training for all monitors and  | ^  | ^` |   |   |   |   |   |   |   |       |             |          |    | ^   |    |    |    |    |    | ^                                      |
| Monitoring | monthly training during prestaffing activities.  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    | igwdapprox                             |
| oni        | <b>M-4</b> . Refined calibration process to ensure Indicator 13 file review interrater reliability.                    |    |    |   |   |   |   |   |   |   |       |             |          | Х  | Х   |    |    |    |    |    |  |
| Σ          | The review interrater reliability.   |    |    |   |   |   |   |   |   |   |       |             |          | ^  | _ ^ |    |    |    |    |    |  |
|            | M-5. WDE reviewed and revised its CIFM procedure   |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | manual to maintain consistency around self-assessment  |    |    |   |   | Χ |   |   |   | Х | Х     | Χ           | Χ        | Х  |     | Х  |    |    |    |    | Χ                                      |
|            | and desk audit processes.  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    | <u> </u>                               |
|            | <b>M-6</b> . WDE staff participated in each of the monthly   |    |    |   |   |   |   |   |   |   |       | Х           | Х        | Х  |     | Х  |    |    |    |    |  |
|            | MSIP technical assistance teleconferences.   |    |    |   |   |   |   |   |   |   |       | ļ <u>``</u> |          |    |     |    |    |    |    |    |  |
|            | M-7. WDE staff held multiple conference calls and  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | meetings with OSEP Team Lead and State Contact   |    |    |   |   |   |   |   |   |   |       | Χ           | Х        | Χ  |     | Χ  |    |    |    |    |  |
|            | regarding OSEP verification visit and necessary corrective action steps.   |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | M-8. Designed and piloted a fiscal monitoring process  |    |    |   |   |   |   |   |   |   |       |             |          |    |     |    |    |    |    |    |  |
|            | for districts.   | Χ  | Х  | Х |   |   |   | Х |   |   |       | Х           |          |    | X   | X  |    |    |    |    | ĺ                                      |