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**The Colorado Part B State Performance Plan  
For Special Education****Federal Fiscal Years 2005 to 2010****Introduction**

The Individuals with Disabilities Education Act (IDEA) of 2004 established a requirement that all states develop and submit to the U.S. Department of Education, Office of Special Education Programs (OSEP) a performance plan designed to move the state from its current level of compliance with the statutory and regulatory requirements of the law and to improve the educational and functional outcomes for children with disabilities. The state plan must encompass baseline data (where available), projected targets, and activities to achieve those targets. The state is required to submit an annual report in the years following the submission of the performance plan to inform OSEP and the public on the progress toward meeting those goals. This document fulfills the first step of that process – the State Performance Plan.

**Overview of the State Performance Plan (SPP) Development**

The Colorado State Performance Plan was drafted internally by staff at the Colorado Department of Education, Exceptional Student Services (CDE/ESSU) with input from the Colorado Special Education Advisory Council (CSEAC) and local special education directors. The specific tasks requested of these groups were:

- Consider baseline and trend data for each indicator where such information was available;
- Assist in determining appropriate targets for each indicator where a target was required for the SPP;
- Suggest activities that will assist local administrative units and the ESSU in meeting the targets;
- Review the planned activities, timelines, and resources and provide input into the likely efficacy of the strategies proposed.

In addition to the formal input process undergone with the CSEAC and special education directors, CDE/ESSU included a smaller working group of representatives from each of these organizations for ongoing input into the SPP process, indicators, and activities.

Following the submission of the State Performance Plan to the U.S. Department of Education, CDE/ESSU will post the final version on the department website and will alert constituency groups of its availability via existing list serves. Hard copies will be provided to all CSEAC members and special education directors as well as any individual making a request for one. Public notice about the availability of the SPP will be made in the CDE/ESSU newsletter and the PEAK Parent Center Newsletter.

Colorado maintains accountability systems for all public education administrative units and state operated programs. Administrative units include school districts and Boards of Cooperative Educational Services (BOCES). BOCES consist of groups of school districts with fewer than 4000 students or 400 students with disabilities unless they have a variance from the department to operate with fewer students. Charter schools are the responsibility of the administrative unit under which they are chartered. Therefore,

throughout this document the term Administrative Unit will be used to reflect the local education agency.

**Overview of State Initiatives Intended to Drive Improvement on Multiple Indicators:****Continuous Improvement Monitoring Process (CIMP)**

CIMP is a collaborative process that supports a seamless system within Colorado to ensure that federal and state laws are appropriately implemented for the learning and growth of exceptional children. It relies on using meaningful and multiple sources of data, such as parent survey data, staff survey data, graduation rates, dropout rates, a review of student records and the performance of students with disabilities on state and local assessments to gauge effectiveness of special education supports and services. See overview of Indicator 15 for more details.

**Transition Outcomes Project (TOPS)**

The Transition Outcomes Project is a voluntary program for local school districts or administrative units to raise awareness about transition issues. The project includes an IEP record review to look at transition services and how those services are documented on the IEP. Data obtained through this program is used to create and expand services and supports and cannot be used to cite non-compliance.

**Results Matter**

Results Matter is a federally funded grant focused on child and family outcomes for the early care and education system 0-5 managed through Part C, Part B 619 and Colorado Preschool Program. Staff from the Department of Education have coordinated the effort of identified stakeholders in the outcomes measurement system development process and has engaged the various stakeholders over the past 16 months. The state has determined a finite list of four tools or assessment systems that are curriculum referenced with a stand alone child outcome assessment format. Programs will be phased in around the state during 2006-2007 depending on when direct service providers receive training. Initial statewide training will be complete late 2006. Programs in the first stage of training will begin collecting data on children in Spring 2006. Technical assistance and follow-up support will be provided by state Part C, Part B/619, Colorado Preschool Program and Early Childhood Initiatives staff and contract staff beginning in 2006.

**Positive Behavioral Supports (PBS)**

School wide PBS is a broad range of systemic and individualized strategies for achieving important social and learning outcomes while preventing behavior problems in all students. The purpose of the Colorado School-wide Positive Behavior Supports Initiative is to establish and maintain effective school environments that maximize academic achievement and behavioral competence of all learners in Colorado. This is a voluntary program for local school districts or administrative units.

**State Improvement Grant. (SIG)**

The goals of the five year CDE- State Improvement Grant (SIG) are 1) to increase teachers and speech/language pathologists with fully certified credentials and 2) to improve the use of positive behavior interventions thereby reducing discipline referrals, suspensions and increasing academic achievement. A variety of scientifically based

research knowledge and training strategies are being employed to attain these goals. These include:

- Develop and enhance aggressive recruitment strategies to increase certified personnel so that at the end of five-years, Colorado LEAs and state-approved facilities will increase the fully licensed special education teachers from 78% to 100%.
- Increase the training/retraining activities specifically aimed at special education teachers who are not fully licensed and now teaching within LEA.
- Expand the in- and out-of-state training capacity so that all speech and language pathologist vacancies within LEAs can be filled with fully licensed professionals.
- Target the reduction of special education teacher attrition through staff development, coaching, mentoring, and increased administrative support.
- Implement positive behavior supports in LEAs having the highest suspension rates using a three-phase process of 1) Awareness, 2) Readiness, and 3) Implementation.
- Develop and implement the necessary state infrastructure to support a statewide continuing positive behavior support initiative.

### **Response to Intervention (RTI)**

CDE-ESSU provides guidance for administrative units who implementing, or considering implementing, an RTI model. CDE is working closely with the Regional Educational Service Teams to educate general educators as well as superintendents and administrators on the RTI model. CDE guidance has been based on a building self-assessment tool to roll out RTI building by building as schools are ready rather than requiring whole districts be ready to begin the initiative.

### **English Language Learners with Exceptional Needs (ELLEN)**

The ELLEN project provides guidance to administrative units regarding an eight step process for accurately identifying ELL students that may have exceptional needs. This process also overlaps with the RTI initiative. Resources include regional training and a tool kit to assist the process.

### **School District Accreditation**

CDE, through its Regional Services Teams are responsible for accrediting all school districts annually under Colorado State law. School districts are then responsible for accrediting their individual schools. There are eleven indicators for accreditation which include a district improvement plan, performance on statewide assessment (CSAP/CSAPA), data on how districts are closing the learning gaps with various populations, value added growth performance(1 years progress in 1 years time), implementation of standards based curriculum, compliance with the schools' accountability reports compliance with educational accreditation, compliance with safe schools act, and compliance with the Colorado Basic Literacy Act. The ESSU is working closely to ensure that special education is included and that special education non-compliance is tied to accreditation.

Table 1. Potential Impact of Cross-Cutting Statewide Initiatives on Individual Indicators.

Initiative	Indicator														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
CIMP	X	X	X	X	X				X	X	X	X	X		X
RTI	X	X		X	X	X	X	X	X	X	X	X			
PBS/BEST	X	X	X	X	X		X	X	X	X					
Sliver			X	X	X		X	X	X	X		X	X		
SIG Grants	X	X	X	X	X		X	X	X	X					
TOPS	X	X				X							X	X	
Results Matter						X	X	X				X			
ELLEN									X	X					
Accreditation			X	X				X							

## Part B State Performance Plan (SPP) for 2005-2010

**Monitoring Priority: FAPE in the LRE**

For FFY 2008 the measurement for Indicator 1 was changed to align with the reporting required under the Elementary and Secondary Education Act (ESEA). The Indicator now reads:

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

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

**Measurement:** States must report using the graduation rate calculation and timeline established by the Department under the ESEA.

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

\*Colorado will calculate the on-time graduation rate for all students beginning with data from FFY2009-10.

It is important to note that the ESEA calculation does not include Colorado's students in special settings – State Operated Programs (SOPs), Eligible Facilities, or students in private schools receiving services on an ISP. The IDEA definition includes all of these students.

**Overview of Issue/Description of System or Process**

In Colorado, local school boards are responsible for establishing the requirements for high school graduation for all students. There is no statewide definition. Graduation requirements vary from district to district and the State considers a graduate to be any student who has met the requirements of his or her local school district. To ensure that district practices do not discriminate against special education students, districts must:

- establish clearly defined graduation and diploma requirements that include specific, objective criteria and are available to all students,
- provide appropriate advance notice to allow reasonable time to prepare to meet the requirements or make informed decisions about alternative options,
- and, consider the needs of individual students on a case-by-case basis.

While a district can offer different types of diplomas, these options must be available to all students regardless of whether the student has a disability. Diplomas may not be designated for a specific student population or based on special education status. Therefore, the definition of "graduate" for general and special education students is reasonably similar at the state level. Some districts also offer a "certificate of completion" as an option, however, the State does not consider these students graduates for state level reporting.

For calculating graduation rates the following calculation is used:

Number of students with disabilities receiving a regular diploma  
during the 2007-2008 school year

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(Number of students with disabilities finishing 8<sup>th</sup> grade in 2003-2004  
+ (Number of transfers in) – (Number of verified transfers out)

Baseline data was established on the method for calculating graduates based on IDEA. Baseline data will be re-established when Colorado moves to an on-time graduation rate calculation in FFY 2009.

**Baseline Data for FFY 2004 (2004-2005)**

Graduation Rate of Students with Disabilities:	52.9% of Exitors aged 14-21Years [N = 2,799/5,288]
Graduation Rate of Students without Disabilities:	Not comparable

**Discussion of Baseline Data**

In previous Annual Performance Reports submitted to OSEP, the CDE did not include the category “Transferred, Not known to be Continued” in the calculation of graduation rates. Based on the most recent guidance from OSEP, the CDE has adjusted the calculation so that this category is properly reflected in the calculation. Figures 1 and 2 show the eight year graduation rate trends and projected targets based on the old and new methods, respectively. The use of the “transferred, not known to be continuing” category has increased substantially over the past several years and appears to be undermining the precision of graduation and dropout rates. Stakeholder groups have acknowledged the difficulties with following up with these students and believe that a large percentage of these students are not, in fact, dropouts. The CDE intends to use existing forums and develop technical assistance to improve the ability of administrative units to better follow-up with students so that the designation is more accurately applied.

Figure 1. Graduation Rates (Old Method) for Students on IEPs and Projected Targets (in Yellow).

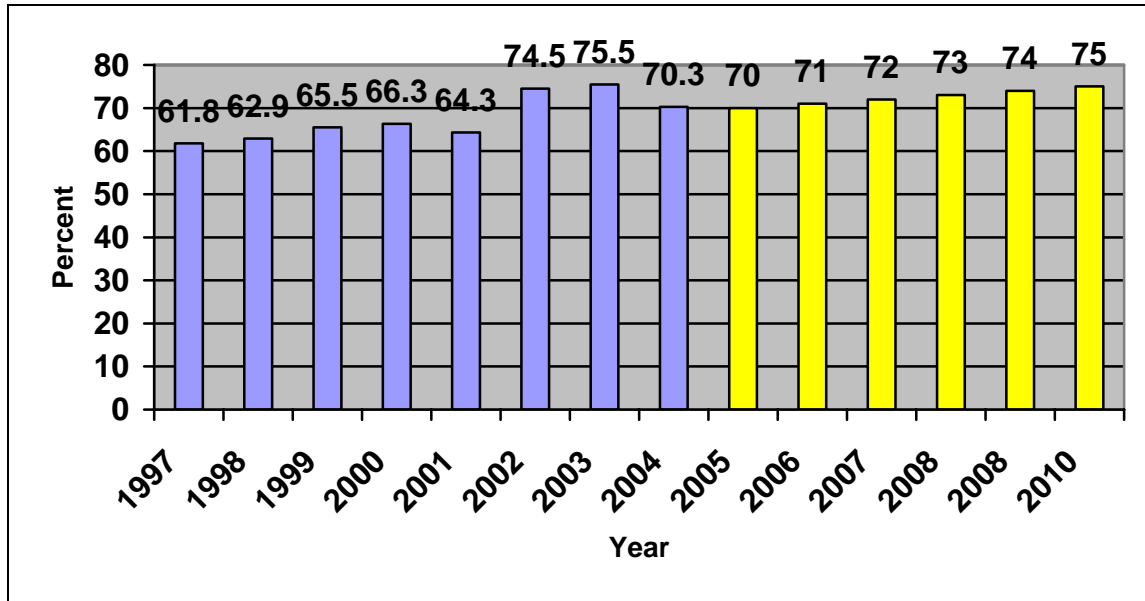
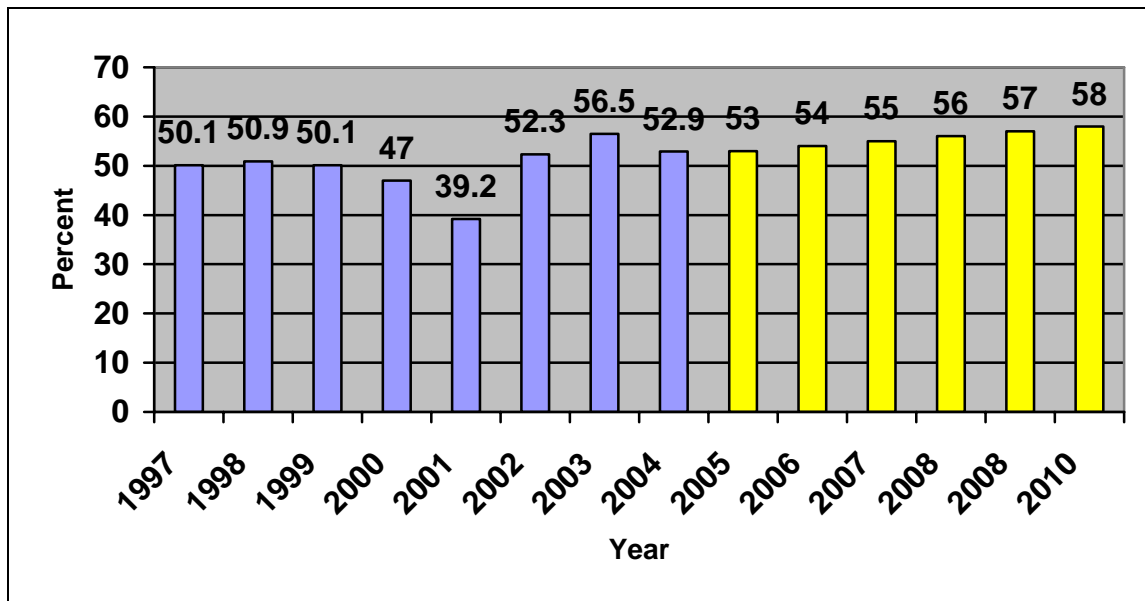


Figure 2. Graduation Rates (New Method) for Students on IEPs and Projected Targets (in Yellow).



In accordance with the measurement change, targets reported in the Annual Performance Report are those targets established by ESEA by the CDE Office of Federal Programs Administration. Targets reported are not specifically designated as graduation rates for students with disabilities but are targets to be reached by all groups of students.



<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>2005 (2005-2006)</b>	57.40%
<b>2006 (2006-2007)</b>	57.40%
<b>2007 (2007-2008)</b>	57.40%
<b>2008 (2008-2009)</b>	59.50%
<b>2009 (2009-2010)</b>	59.50%
<b>2010 (2010-2011)</b>	59.50%

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Improve consistency between AUs in methods of reporting graduation and dropout rates.	FFY 2006 FFY 2007	Regional trainings for End of Year (EOY) data collection and at state special education Directors’ meetings were provided.  The special education data group continues to work with the general education data group on aligning data definitions and codes.		C		
2. Improve tracking of students who transfer to other educational settings.	FFY 2006 FFY 2007 FFY 2008	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D
3. Expand the Positive Behavioral Supports (PBS) program. See discussion under Indicator 4a for further detail.	FFY 2007	Data are not available to confirm the impact of PBS on graduation rates.				D
4. Train and monitor for effective transition plans and progress reporting. See activities under Indicator 13 for more details.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	Training in on-going and is delivered statewide, regionally, and individually as requested by Aus.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
5. Change the reporting period for tracking graduation and dropout rates for special education students using July 1 – June 30 as the reporting period.	FFY 2006	This change was implemented with the FFY 2006 End of Year (EOY) report submissions.		C		
6. Use the Continuous Improvement and Monitoring Process (CIMP) process to identify districts with significant discrepancy from state rates.	FFY 2006 FFY 2007	Regional liaisons worked with Special Education Directors to analyze data.		C		
7. Expand the Transition Outcomes Project (TOPS). See activities under Indicator 13 for additional details.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	TOPS, developed by Ed O’Leary, has been modified to become TOPS Lite. The program has been offered to individual AUs, as well as one a regional basis. The focus has been on the relationship between meaningful transition IEPs and Indicators 1, 2, 13 and 14.	O			
8. Align statewide calculation of graduation rates for students with and without disabilities using cohort approach.	FFY 2008	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D
9. Revise the SPP/APR baseline, targets, and activities to reflect revised graduation and dropout calculations.	FFY 2009	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
10. Develop a strategy to systematically assess risk factors for dropping out among special education students.	FFY 2008	This activity is being addressed in Indicator 2 improvement activities.				D
11. Utilize results from Post School Outcomes survey to further develop strategies that increase graduation rates.	FFY 2008	The data available do not relate to graduation/dropout rates.				D
12. Pilot dropout risk factor approach.	FFY 2009	This improvement activity is more appropriate under Indicator 2.				D
13. Full implementation of dropout risk factor assessment	FFY 2010	This improvement activity is more appropriate under Indicator 2.				D
14. Collaborate with Prevention Initiatives Unit, the Workforce Readiness Taskforce, and the System of Supports Taskforce to identify factors related to graduation and dropout rates and develop/implement strategies and interventions to address the identified factors.  <b>Revised</b> , see p.12, Improvement Activity #1.	FFY 2008	Many units within CDE are addressing this issue.			R	

**Resources Used to Support Activities**

- CDE Exceptional Student Leadership Unit
- CDE Data and Research Unit
- CDE Prevention Initiatives Unit
- Contractors/Vendors
- Special Education Directors

**Revisions for FFY 2008**

The CDE is adding an improvement activity to continue through FFY 2010

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
1. Collaborate with Prevention Initiatives Unit, the Workforce Readiness Taskforce, and the System of Supports Taskforce to identify factors related to graduation and dropout rates and to develop/implement strategies and interventions that address the identified factors. Focus will be on strategies that utilize and coordinate all resources and supports, including the School to Work Alliance Program (SWAP).	Form inter-departmental professional learning community.  Assign an ESLU Secondary Services Team member to serve on statewide teams.  Ensure SWAP personnel are directly involved in state and regional trainings to ensure alignment.  Serve on the Dropout Prevention and Student Reengagement Committee to ensure priority and high-priority districts receive needed support through technical assistance to increase graduation rates for students with disabilities.  Serve on the Individual Career and Academic Plans (ICAP) committee to ensure students with disabilities are included in the process.	FFY 2009             FFY 2010	ESLU  Prevention Initiatives Dropout Prevention Office  Department of Vocational Rehabilitation and the SWAP  ESLU Prevention Initiatives Unit  ESLU Office of Teaching and Learning

## Part B State Performance Plan (SPP) for 2005-2010

**Monitoring Priority: FAPE in the LRE**

For FFY 2008 the measurement for Indicator 2 was changed to align with the reporting required under the Elementary and Secondary Education Act (ESEA). The Indicator now reads:

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

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

**Measurement:** States must report using the dropout rate calculation and timeline established by the Department under the ESEA.

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

It is important to note that the ESEA calculation does not include Colorado's students in special settings – State Operated Programs (SOPs), Eligible Facilities, or students in private schools receiving services on an ISP. The IDEA definition includes all of these students.

For calculating drop out rates, the following calculation is used:

$$\frac{\text{Number of students who dropped out during the 2007-2008 school year}}{\text{Total number of students who were part of the same membership base at any time during the 2007 – 2008 school year}}$$

Baseline data was established on the method for calculating drop out rates based on the IDEA definition of a drop out. Baseline data will be re-established when Colorado moves to an on-time graduation rate calculation in FFY 2009.

**Baseline Data for FFY 2004 (2004-2005)**

All Youth Dropout rate: Not Comparable

Special Education Dropout rate: 40.7% of Exiters aged 14-21 Years  
[N = 2,153/5,288]

**Discussion of Baseline Data**

In previous Annual Performance Reports submitted to OSEP, the CDE did not include the category "Transferred, Not known to be Continued" in the calculation of dropout rates. Based on the most recent guidance from OSEP, the CDE has adjusted the calculation so that this category is properly reflected in the calculation. Figures 3 and 4 show the eight

year graduation rate trends and projected targets based on the old and new methods, respectively.

Figure 3. Dropout rates (Old Method) for Students on IEPs and Projected Targets (in yellow).

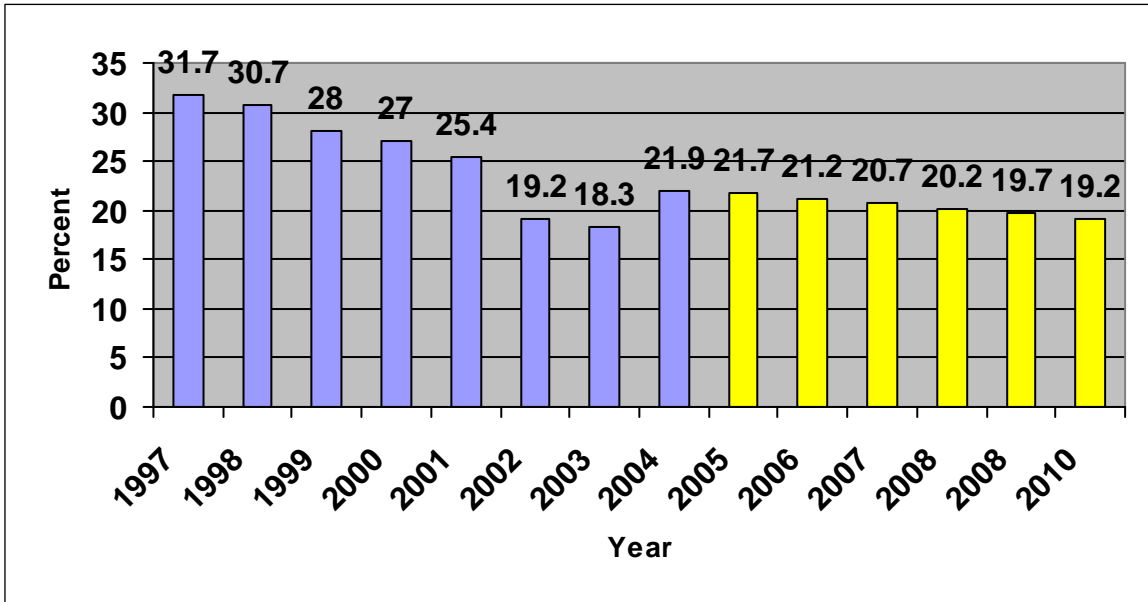
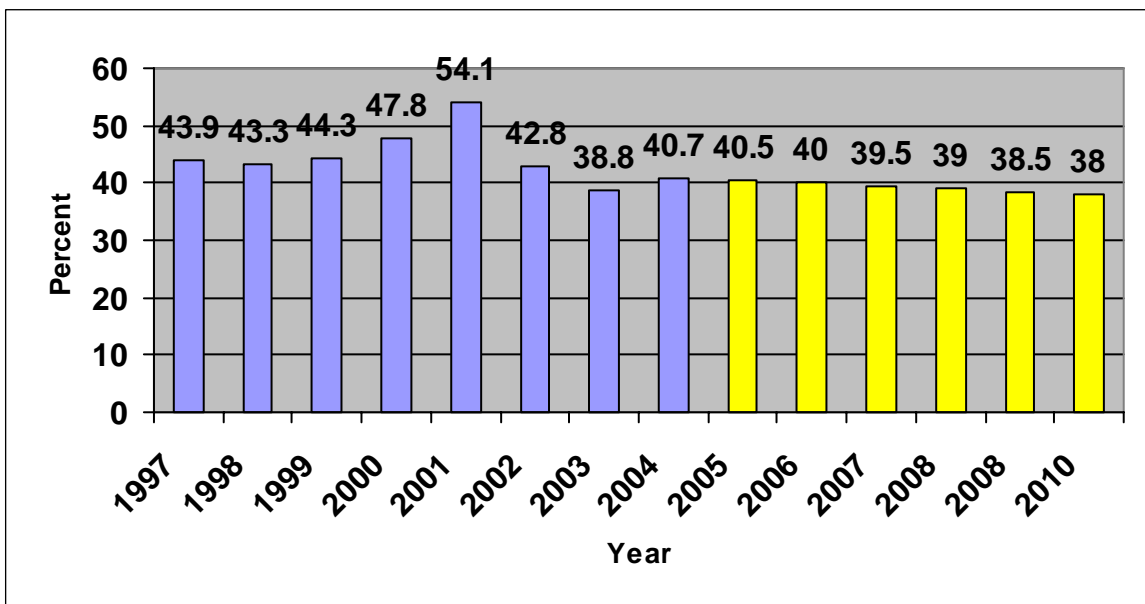


Figure 4. Dropout rates (New Method) for Students on IEPs and Projected Targets (in Yellow).



In accordance with the measurement change, targets cannot be reported. The ESEA does not establish targets for drop out rates for students. Targets will be re-set in FFY 2009.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	40.5%
2006 (2006-2007)	40.0%
2007 (2007-2008)	39.5%
<del>2008</del> <del>(2008-2009)</del>	<del>39.0%</del>
<del>2009</del> <del>(2009-2010)</del>	<del>38.5%</del>
<del>2010</del> <del>(2010-2011)</del>	<del>38.0%</del>



**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Improve consistency between AUs in methods of reporting graduation and dropout rates.	FFY 2006 FFY 2007	Regional trainings for EOY data collection, state special education directors' meetings were provided.  The special education data group has been working with the general education data group on aligning data definitions and codes.		C		
2. Improve tracking of students who transferred to other educational settings.	FFY 2006 FFY 2007 FFY 2008	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D
3. Expand the Positive Behavioral Supports (PBS) program. See discussion under Indicator 4a for further detail.	FFY 2007	Data are not available to confirm the impact of PBS on dropout rates.				D
4. Train and monitor for effective transition plans and progress reporting. See activities under Indicator 13 for more details.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	Training is on-going and is delivered statewide, on a regional basis, and individually as requested by AUs.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
5. Change the reporting period for tracking graduation and dropout rates for special education students using July 1 – June 30 as the reporting period.	FFY 2006	This change was implemented with the FFY 2006 End of Year (EOY) report submissions.		C		
6. Use the Continuous Improvement and Monitoring Process (CIMP) process to identify districts with significant discrepancy from state rates.	FFY 2006 FFY 2007	Regional liaisons worked with Special Education Directors to analyze data.		C		
7. Expand the Transition Outcomes Project (TOPS). See activities under Indicator 13 for additional details.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	The Transition Outcomes Project (TOPS), developed by Ed O’Leary, has been modified to become TOPS Lite. The program has been offered to individual AUs, as well as on a regional basis. The focus has been on the relationship between meaningful transition IEPs and Indicators 1, 2, 13 and 14.	O			
8. Align statewide calculation of graduation rates for students with and without disabilities using cohort approach.	FFY 2009	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D
9. Revise of the SPP/APR baseline, targets and activities to reflect revised graduation and dropout calculations.	FFY 2009	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
10. Develop a strategy to systematically assess risk factors for dropping out among special education students.  <b>Revised</b> , see p.20, Improvement Activity #1.	FFY 2008	A working relationship with the CDE Prevention Initiatives Unit has been established via an inter-unit professional learning community.			R	
11. Utilize results from Post School Outcomes survey to further develop strategies that reduce dropout rates	FFY 2008	The data available do not relate to graduation/dropout rates				D
12. Pilot dropout risk-factor approach  <b>Revised</b> , see p. 20, Improvement Activity #1	FFY 2009 FFY 2010	This will be addressed in a revised improvement activity			R	
13. Implement dropout risk factor assessment  <b>Revised</b> , see p. 20, Improvement Activity #1	FFY 2009 FFY 2010	This will be addressed in a revised improvement activity			R	
14. Use the CIMP system to support the development of improvement plans for administrative units identified with high dropout rates.  <b>Revised</b> , see p. 20, Improvement Activity #1	FFY 2008	This will be addressed in a revised improvement activity			R	

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
15. Collaborate with Prevention Initiatives Unit, the Workforce Readiness Taskforce, and the System of Supports Taskforce to identify factors related to graduation and dropout rates and develop/implement strategies and interventions to address the identified factors.  <b>Revised</b> , see p. 20, Improvement Activity #1.	FFY 2008	Many units within CDE are addressing this issue			R	

**Resources Used to Support Activities**

- CDE Exceptional Student Leadership Unit
- CDE Data and Research Unit
- CDE Prevention Initiatives Unit
- Contractors/Vendors
- Special Education Directors

**Revisions for FFY 2008**

The CDE is adding an improvement activity to continue through FFY 2010

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
<p>1. Collaborate with Prevention Initiatives Unit, the Workforce Readiness Taskforce, and the System of Supports Taskforce to identify factors related to graduation and dropout rates and to develop/implement strategies and interventions that address the identified factors. Focus will be on strategies that utilize and coordinate all resources and supports, including the School to Work Alliance Program (SWAP).</p>	<p>Form inter-departmental professional learning community.</p> <p>Assign an ESLU Secondary Services Team member to serve on statewide teams</p> <p>Ensure SWAP personnel are directly involved in state and regional trainings to ensure alignment.</p>	<p>FFY 2009</p>	<p>ESLU</p> <p>Prevention Initiatives Dropout Prevention Office</p> <p>Department of Vocational Rehabilitation and the SWAP</p>
	<p>Serve on the Dropout Prevention and Student Re-engagement Committee to ensure priority and high-priority districts receive needed support through technical assistance to increase graduation rates for students with disabilities.</p> <p>Serve on the Individual Career and Academic Plans (ICAP) committee to ensure students with disabilities are included in the process.</p>	<p>FFY 2010</p>	<p>ESLU</p> <p>Prevention Initiatives Unit</p> <p>ESLU</p> <p>Office of Teaching and Learning</p>

## Part B State Performance Plan (SPP) for 2005-2010

## Monitoring Priority: FAPE in the LRE

For FFY 2008 the measurement for Indicator 3 was changed to align with the reporting required under the Elementary and Secondary Education Act (ESEA). The Indicator now reads:

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

**Overview of Issue/Description of System or Process**

Colorado statewide assessment system is known as the Colorado Student Assessment Program (CSAP) and the alternate assessment measuring progress against alternative achievement standards is referred to as CSAPA. Grades tested in 2003-2004 were third through tenth. These are the same assessments used to report under the No Child Left Behind Act (NCLB). The CDE administers the CSAP or CSAPA to all students each year in grades 3 through 10. CSAP uses four categories to classify student proficiency level as follows:

- Unsatisfactory
- Partially Proficient
- Proficient
- Advanced

CSAPA uses five categories to classify student proficiency level as follows:

- Inconclusive
- Exploring
- Emerging
- Developing
- Novice

For determining adequate yearly progress (AYP) among districts and schools, the CDE examines the percentage of students scoring partially-proficient or above on CSAP, and Emerging or above on CSAPA. The number of Districts meeting the State's AYP objectives for progress for disability subgroup was calculated on the number having at least 31 students with disabilities in each school level, which is the same number used for the determination of AYP for all other students.

**Calculations:**

A.  $22.7\% = 17$  districts meeting the State's AYP objectives for progress for the disability subgroup (children with IEPs) divided by 75 districts in the State which exceed Minimum N of 30 times 100.

A. Participation Rate

- a. N = 44,282 (Reading) & 44,094 (Math) children with IEPs in grades assessed;
- b. N = 19,535 (Reading) & 20,944 (Math) children with IEPs in regular assessment with no accommodations (44.1% for Reading, 47.5% for Math);
- c. N = 20,643 (Reading) & 19,253 (Math) children with IEPs in regular assessment with accommodations (46.6% for Reading, 43.5% for Math);
- d. N = 0 (Reading) & 0 (Math) of children with IEPs in alternate assessment against grade level standards (0% for Reading, 0% for Math); and
- e. N = 3,836 (Reading) & 3,760 (Math) of children with IEPs in alternate assessment against alternate achievement standards (8.7% for Reading, 8.5% for Math).

Overall Percent for Reading:  $19,535 + 20,643 + 0 + 3,836$  divided by 44,282 = 99.4%

Overall Percent for Math:  $20,944 + 19,253 + 0 + 3,760$  divided by 44,094 = 99.6%

B. Proficiency Rate

- a. N = 44,282 (Reading) & 44,094 (Math) children with IEPs in grades assessed;
- b. N = 11,674 (Reading) & 10,392 (Math) children with IEPs in grades assessed who are "Partially-Proficient" or above as measured by the regular assessment with no accommodations (26.4% for Reading, 23.6% for Math);
- c. N = 10,075 (Reading) & 9,207 (Math) children with IEPs in grades assessed who are "Partially-Proficient" or above as measured by the regular assessment with accommodations (22.8% for Reading, 20.9% for Math);

<p>d. N = 0 (Reading) &amp; 0 (Math) children with IEPs in grades assessed who are partially-proficient or above as measured by the alternate assessment against grade level standards (0% for Reading, 0% for Math); and</p> <p>e. N = 3,322 (Reading) &amp; 2,942 (Math) of children with IEPs in grades assessed who are "Emerging" or above as measured against alternate achievement standards (7.5% for Reading, 6.7% for Math).</p> <p>Overall Percent for Reading: <math>21,749 + 0 + 3,322</math> divided by <math>44,282 = 56.6\%</math></p> <p>Overall Percent for Math: <math>19,599 + 0 + 2,942</math> divided by <math>44,094 = 51.1\%</math></p>
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**Baseline Data for FFY 2004 (2004-2005)**

AYP Rates for Districts with SWD	22.7% [17/75]
Participation Rate for Reading:	99.4%
Participation Rate for Math:	99.6%
State Proficiency Rate for Reading:	56.6% (Partially-Proficient or Above)
State Proficiency Rate for Math:	51.1% (Partially-Proficient or Above)

**Discussion of Baseline Data**

The baseline and targets were revised in the February 2007 update to align the APR reporting process with the Table 6 Report of the Participation and Performance of Students with Disabilities on State Assessments by Content Area, Grade, and Type of Assessment completed by Colorado’s Assessment Unit and submitted to OSEP on a yearly basis. Also, at the time that the original FY2005 – 2010 SPP was written, the most recent assessment participation and performance data was from FY2003. The current adjustment of baseline and targets that aligns with Table 6 is based on FY2004 data.

This adjustment and alignment resulted in two major changes. First, baseline and targets are now based on participation and proficiency rates for grades 3 through 9 instead of grades 3 through 10. Second, part (a) of the calculation for participation and proficiency rates, the number of students with IEPs in the assessed grades (3 through 9), are now based on enrollment data as reported in Table 6 rather than the December Count data that was used in the initial development of baseline and targets for this indicator. The Table 6 enrollment counts by grade are determined using a time window with a much closer proximity to the testing period and therefore, are a more valid denominator for calculating participation and proficiency rates.

These changes in calculating participation and proficiency rates resulted in the following changes to the baselines:

- 2.8% increase in baseline Reading Participation
- 5% increase in baseline Math Participation



- 1.8% increase baseline Reading Proficiency
- 4.4% increase in baseline Math Proficiency

Because these changes in the calculation resulted in participation rates that were so near 100%, no improvement in targets were projected for these two Measures until FY2008, at which point Colorado will have data from a system where standard and alternate assessments are merged into one test publisher. It is hoped that this merged system will allow for the accounting of 100% of students with IEPs with regard to their participation on assessments.

For reading and math proficiency targets, no substantive changes to the magnitude of change over the life the SPP have been made. Only the baseline was changed to reflect the above mentioned changes in calculating reading and math proficiency rates.

No changes were made in AYP Rate calculations, baseline or targets from the SPP submitted in December of 2005.

The updated Measurable and Rigorous Targets table is presented below.

FFY	Measurable and Rigorous Targets				
	Reading Participation	Math Participation	Reading Proficiency	Math Proficiency	AYP Rates
Baseline 2004	99.4%	99.6%	56.6%	51.1%	22.7%
2005 (2005-2006)	99.5%	99.5%	57.0%	51.5%	23.0%
2006 (2006-2007)	99.5%	99.5%	57.5%	52.0 %	25.0%
2007 (2007-2008)	99.5%	99.5%	58.0%	52.5%	25.0%
2008 (2008-2009)	100%	100%	58.5%	53.0%	27.0%
2009 (2009-2010)	100%	100%	59.0%	53.5%	28.0%
2010 (2010-2011)	100%	100%	59.5%	54.0%	29.0%

There are a number of reasons why participation is not a 100%, including:

- Parents deciding to have their children opt out of assessments.
- Extended absence for some children on IEPs.
- Inability to finish the reading or math assessments.

With regard to reading and math assessment scores among students with disabilities, there has been a slight increase in reading scores in the past three years, but a decrease in math scores. The increase in Reading Scores is largely attributable to numerous reading programs that are in place within district and CDE technical assistance and trainings offered, such as:

- Odyssey Program
- Language Essentials for Teachers of Reading and Spelling (LETRS)
- Leadership essentials for Adolescents Struggling with Reading Success (LASRS)

The decrease in Math Scores points to a need for direct activities to address math learning for the special education population.

Baseline and targets were revised in FFY 2006. It has been determined that these baseline and targets continue to reflect data for Colorado and will not be revised.

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Develop a research plan to study effective reading strategies for students with disabilities.	FFY 2006	Result was development of the Rural Secondary Literacy Project. (See activity 10).		C		
2. Examine impact of State’s Math & Science Partnerships on Instructional Practices and use lessons learned to improve math instruction.	FFY 2007	The CDE cosponsors an annual conference, Math on the Planes with Colorado Council for Learning Disabilities, and the International Dyslexia Association/Rocky Mountain Branch.		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
3. Conduct Technical Assistance Trainings on modifications and accommodations within grade level curriculum content areas.	FFY 2007	Regional trainings and webinar on eligibility and instructional accommodations have been provided.		C		
	FFY 2008	Ongoing technical assistance is available through the CDE's Unit of Student Assessment and the Exceptional Student Leadership Unit.	O			
4. Conduct state-wide training on the appropriate use of accommodations in both instruction and assessment.	FFY 2007 FFY 2008	Technical assistance has been provided regarding students with combined hearing and vision loss through the Colorado Services for Children and Youth with Combined Vision and Hearing Loss Project.  Modules have been developed specific to literacy instruction for students with significant support needs.	O	C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
<p>5. Publish two types of accommodations manuals:</p> <ul style="list-style-type: none"> <li>• Colorado Accommodations manual for students with disabilities.</li> <li>• Colorado Accommodations manual for students who are English Language Learners.</li> </ul>	<p>FFY 2007  FFY 2008</p>	<p>Manual can be found on the Unit of Student Assessment’s website  <a href="http://www.cde.state.co.us/cde/assess/documents/csap/manuals/2009/2008-0929_CO_Accomm_Man.pdf">http://www.cde.state.co.us/cde/assess/documents/csap/manuals/2009/2008-0929_CO_Accomm_Man.pdf</a>.</p> <p>The Catalyst Series: Accommodations for CSAP was produced and posted on the CDE website  <a href="http://www.cde.state.co.us/cde/assess/documents/csap/Catalyst/Catalyst_Series_Accommodations_Oct_08.pdf">http://www.cde.state.co.us/cde/assess/documents/csap/Catalyst/Catalyst_Series_Accommodations_Oct_08.pdf</a>.</p> <p>DVD addressing <i>Standard and ELL Accommodations for CSAP</i> was produced and disseminated.</p> <p>Colorado is one of a few of states that has a comprehensive system for review of its Braille and large print tests.</p>		C		
<p>6. An Eligibility packet that informs IEP team decision making regarding eligibility for the state alternate assessment (CSAPA) was developed and released.</p>	<p>FFY 2008</p>	<p>An eligibility packet was updated to include a revised definition of “significant cognitive disability” per the federal review requirements of the CSAPA test. This can be found at:  <a href="http://www.cde.state.co.us/cde/sped/Eligibility.asp">http://www.cde.state.co.us/cde/sped/Eligibility.asp</a>.</p> <p>Training on the eligibility packet was provided.</p>		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
7. Provide regional training on accommodations, adaptations, and eligibility for the state alternate system.	FFY 2007	Regional trainings for District Assessment Coordinators (DACs), Special Education Directors and other personnel on CSAPA and CELA administration were provided. Information about accommodations, adaptations and eligibility for state assessments was included.		C		
	FFY 2008					
8. Revise the accommodations manual to reflect stakeholder feedback on the utilitarian nature of the document.	FFY 2007	ESLU solicited and received public input to inform the revision.  The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.		C		D
	FFY 2008					

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
9. Support and expand trainings on reading instruction.	FFY 2008	Offered 3-semester course on Teaching Reading and Writing: An Introduction for Teachers of Students who are Blind/Visually Impaired.		C		
	FFY 2008	The CDE provided updated training for the state cadre of LETRS (Language Essentials for Teachers of Reading and Spelling) trainers. The cadre has provided regional training and continues to be available.  The CDE continues to support the Odyssey Project to provide literacy training. The topic for 2007 was literacy.  Interventions and Progress Monitoring; oral language and vocabulary development are the planned foci for the 2008 Odyssey Project.	O			
10. The Rural Secondary Literacy Project is a CDE cross-unit project focusing on improving literacy among all students in select rural districts.	FFY 2007 FFY 2008	The Rural Secondary Literacy Project (RSLP) is a three-year collaborative initiative among the CDE's Exceptional Student Leadership Unit, Literacy Grants and Initiatives (LGI) Unit, and Regional Services. It has provided training and coaching support for 21 rural school districts implementing literacy initiatives at the secondary level.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
11. Develop program to address math instruction.	FFY 2007 FFY 2008 FFY 2009	In collaboration with the Office of Teaching and Learning, the CDE supports several conferences and training during the year related to math instruction and performance of students with disabilities.	O			
12. Initiated work to include Special Education general supervision results in the accreditation process of school districts.	FFY 2007 FFY 2008	Discussion with other CDE Units on how to incorporate special education monitoring with accreditation process.  ESLU staff participate in reviews regarding struggling districts and provide data and support to improve student performance.	O			
13. Expand training about instructional strategies related to RtI.	FFY 2007	A video about Response to Intervention (RtI) was created by the CDE giving an overview of the six essential components (leadership, problem solving/consultation process, curriculum and instruction, school climate and culture, family and community engagement). A copy was distributed to every superintendent in the state.  A guidebook for RtI implementation was developed. A copy of this guide can be found on the website at: <a href="http://www.cde.state.co.us/rti/ToolsResourcesRtI.htm">http://www.cde.state.co.us/rti/ToolsResourcesRtI.htm</a> .		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
13. (continued from above) Expand training about instructional strategies related to RtI.	FFY 2007	<p>A Leadership module addressing the six essential components of RtI was developed and 8 regional trainings provided. Over 1,100 administrators were trained. Problem Solving/Consultation, Assessment/Progress Monitoring, and Family and Community Engagement were two consistently identified areas of need. These modules were developed for 2008.</p> <p>A statewide taskforce met to develop guidelines for the identification of Specific Learning Disabilities (SLD) that incorporates an RtI framework for developing of body of evidence used for eligibility determination  <a href="http://www.cde.state.co.us/cde/sped/download/pdf/SLD_Guidelines.pdf">http://www.cde.state.co.us/cde/sped/download/pdf/SLD_Guidelines.pdf</a>.</p>		C		
				C		

**Resources Used to Support Activities**

- The CDE Unit of Student Assessment
- ESLU Indicator 3 team
- ESLU Significant Support Needs team
- RtI team
- Colorado Deafblind Advisory Committee
- Vision Coalition



**Revisions for FFY 2008**

The CDE is revising and/or adding improvement activities to better reflect current practices. Improvement activities are being added to continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
1. Develop tool kit for the new alternate achievement standards.	Develop the tool kit. Provide training/support on the new alternate achievement standards to teachers whose students with significant cognitive support needs take alternate assessments.	FFY 2010	ESLU Low Incidence Support Team
2. Develop teaching guide and training related to accommodations and modifications aligned to the new Colorado Model Content Standards.	<a href="http://www.cde.state.co.us/cde/assessment/UAS/CoAcademicStandards.Html">http://www.cde.state.co.us/cde/assessment/UAS/CoAcademicStandards.Html</a> . Develop learning progressions. Provide training on the use of learning progressions.	FFY 2009 FFY 2010	ESLU Student Achievement Consultant Contractors
3. Statewide Assistive Technology Augmentative, Alternative, Communication (SWAAAC) Summer Symposium Using Assistive Technology for Assessment.	SWAAAC Symposium provides training on selecting and implementing assistive technology for instruction and assessment.	FFY 2009	Assistive Technology Partners
4. Low Vision Evaluation Clinics.	Provide regional low vision evaluation clinics to school age children with low vision to determine the need of magnification tools as instructional and assessment accommodations.	FFY 2009 FFY 2010	ESLU Low Incidence Support Team
5. Cochlear Implants Video Conference.	Provide training for teachers on improving instructional practices for students with Cochlear Implants.	FFY 2009	ESLU Low Incidence Support Team

<b>Activity</b>	<b>Action Steps</b>	<b>Timeline</b>	<b>Resources</b>
6. Deaf/Hard of Hearing Statewide Trainings.	Provide training for teachers on using the communication plan and improving instructional practices for students who are Deaf/Hard of Hearing.	FFY 2008 FFY 2009	ESLU Low Incidence Support Team

## Part B State Performance Plan (SPP) for 2005-2010

## Monitoring Priority: FAPE in the LRE

**Indicator 4:** Rates of suspension and expulsion:

- A. Percent of districts identified by the State 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; and
- B. Percent of districts identified by the State as having a significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year of children with disabilities by race and ethnicity.

**~ Note: Component B Currently Not Required Due to Possible Constitutionality Concerns~**

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

**Measurement:**

- A. Percent = # of districts identified by the State as having significant discrepancies in the rates of suspensions and expulsions of children with disabilities for greater than 10 days in a school year divided by # of districts in the State times 100.
- B. Percent = # of districts identified by the State as having significant discrepancies in the rates of suspensions and expulsions for greater than 10 days in a school year of children with disabilities by race/ethnicity divided by # of districts in the State times 100.

Include State's definition of "significant discrepancy."

**Overview of Issue/Description of System or Process**

## COMPONENT A

The collection of accurate and consistent data on suspensions and expulsions is a challenge in Colorado. A variety of stakeholder groups as well as special education directors have communicated that there is tremendous variability with regard to classification and reporting of discipline data across administrative units and across time. Currently, the CDE compares suspension/expulsion of individual administrative units to the statewide average. Significant discrepancy is defined as two standard deviations above the state average. Colorado uses 618 data reported in Table 5, Section A, Columns 3A, 3B, and 3C to calculate suspension/expulsion rates for students with disabilities. The statewide rate is 12 students for every 1,000 students.

Given the challenges surrounding the issue of consistent reporting of suspension/expulsion, the CDE is considering development of a new definition of significant discrepancy as part of its efforts to address data collection and reporting for Part B of this indicator. One option being considered is using a comparison between rates for general and special education students *within* each administrative unit.

Our system for follow-up if a discrepancy occurs has been limited (see discussion of baseline data under Indicator 15) because of resource constraints that exist within the CIMP process and because of the inconsistency and instability of the discipline data. The CDE has recently convened a task force to address shortcomings both in discipline data

integrity as well as follow-up procedures when discrepancies emerge. The task force is committed to ensuring that when discrepancies occur, the State education agency reviews and, if appropriate, revises (or required the affected State or local educational agency to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards, to ensure that such policies, procedures, and practices comply with the requirement of this indicator.

*February 2007 Update and Measurement Clarification:* During FY2005, the CDE refined its process for flagging and monitoring AU Suspension/Expulsion data for the purpose of driving improvement on this component of the indicator. The definition of “significant discrepancy” continues to be two standard deviations above the mean of all AU rates. The improvement targets are designed such that a monitored AU’s rate is always compared to a cut-off using the statewide mean rate and standard deviation for the year during which the AU was flagged. In order to meet the improvement targets, during each subsequent year, an AU’s current rate is expected to reflect a 0.2 standard deviation drop using the statewide mean rate and standard deviation from the year that the AU was flagged. The CDE continues to monitor the suspension/expulsion for all AUs flagged in a given year until it is within one standard deviation of the mean for the year that it was collected, at which time the flag is cleared. If a flagged AU’s rate does not meet its improvement targets for two years in a row, this will trigger a drill-down on policies and procedures related to suspension/expulsion and may lead to the AU being entered into the Continuous Improvement Monitoring Process.

*February 2008 Update:* OSEP’s FFY2005 SPP/APR indicated strongly recommended that Colorado revise its targets because as originally written, they reference AUs that have already been identified as significantly discrepant. Colorado has updated its targets to reflect the percentage of districts identified by the State as having a significant discrepancy in rates of suspensions and expulsions of children with disabilities for greater than 10 days in a school year. However, Colorado stakeholders feel that there are always going to be at least one or two AUs with relatively high long-term discipline actions among students with disabilities for valid reasons that are not grounded in inappropriate policies, procedures and practices. Colorado’s baseline data for Indicator 4a is 7.1% (N=4). Given the feeling that an improvement target of 0% is unrealistic, Colorado has set rather minimal improvement targets over baseline over the life of the SPP.

Additionally, Colorado has decided in FFY2006 to revise its definition of “significant discrepancy” so that it does not involve use of standard deviation among long-term discipline rates per 100 students. This was used in the original definition because it formed the basis of the improvement targets. Since standard deviations are no longer used in the targets, Colorado prefers using a definition that is less sensitive to the impact of outliers in the definition since the distribution of long-term discipline rates among AUs varies widely. Beginning with FFY2006, Colorado will define “significant discrepancy” as a rate that is over 6 times the median rate among Colorado’s 56 AUs. For FFY2006, the distribution of long-term discipline rates per 100 students among Colorado’s 56 AUs had the following properties:

- Range: 0 to 36.9
- Mean: 1.45
- Median: 0.52
- Standard Deviation: 4.89

For FFY2006, The old definition would have set a more lenient cut-point of 9.78 long-term suspension and expulsions per 100 students while the new definition results in a cut-point of 3.12 students per 100 students. For FFY2006, either definition would result in 1 AU determined to have significant discrepancy in rates of long-term suspension and expulsions for students with disabilities.

#### COMPONENT B

*February 2007 Update:* Most Administrative Units in Colorado report relatively few suspensions/expulsions among students with disabilities for greater than 10 days regardless of race/ethnicity. In FY2005, 17 of the 57 AUs reported long-term suspensions/expulsions for more than 10 students with disabilities (SWD) and only 8 AUs reported long-term suspensions/expulsions for more than 20 SWD. Examining the minority population only, 9 AUs reported long-term suspensions/expulsions for more than 10 SWD and 5 AUs reported long-term suspensions/expulsions for more than 20 SWD. When the minority population is broken out by specific race/ethnicity, the individual cell size for long-term suspension/expulsions is quite small for most AUs.

Therefore, significant discrepancy is calculated by using the total minority population within AUs rather than breaking out the calculation for individual races/ethnicities. Specifically, the calculation involves, for each AU, determining the percent of SWD that had long-term suspensions/expulsions who are in the minority population (A). This percentage is then compared to the percent of all SWD that are in the minority population (B). If A exceeds B by more than 20%, then the AU is flagged for having significant discrepancies in the rates of suspensions and expulsions for greater than 10 days in a school year of children with disabilities by race/ethnicity. However, the minimum cell size for the discrepancy calculation to be performed for any AU is at least 10 SWD with long-term suspension/expulsions, regardless of race/ethnicity.

#### **Baseline Data for FFY 2004(Component A) and FFY2005 (Component B)**

- A. 7.1% (N=4) of the Districts in Colorado had suspension rates of greater six time the median rates for all AUs in the State.
- B. 3.5% (N=2) of the Administrative Units were identified by the State as having significant discrepancies in the rates of suspensions and expulsions for greater than 10 days in a school year of children with disabilities by race/ethnicity.

#### **Discussion of Baseline Data**

Given the challenges with reliability and validity of suspension/expulsion data, examining multi-year trends is not fruitful as changes in the trends can reflect changes in categorization and reporting strategies rather than actual discipline practices in the field. Although data is already reported by ethnicity, as needed by Part B of this indicator, the calculation of significant discrepancy on this new part will need to be defined using stakeholder input. As part of this process, the calculation of significant discrepancy for Part A will also be examined and will more than likely change. All new calculations, baseline data and revised targets will be submitted with the FFY 2005 APR due February 1, 2007.

*February 2007 Update:* See FY2005 APR for a discussion on how the CDE will work to address year-to-year fluctuations in long-term suspension/expulsion data submitted by AUs.

## COMPONENT B

*February 2007:* In FY2005, 17 of the 57 AUs reported long-term suspensions/expulsions for more than 10 students with disabilities (SWD), regardless of race. The “significant discrepancy” for these 17 AUs is shown in the table below. The differences that are highlighted in yellow are considered “significantly discrepant”

AU	SPED POP. (N)	Minority POP. (N)	Total Susp/Exp (N)	% SPED Minority (B)	% LT Susp/Exp Minority (A)	Difference (A-B)
1	3480	1318	19	0.378736	0.631579	0.25
2	760	465	30	0.611842	0.766667	0.15
3	3656	2530	11	0.692013	0.727273	0.04
4	509	178	13	0.349705	0.230769	(0.12)
5	5216	1741	62	0.333781	0.419355	0.09
6	1787	339	14	0.189703	0.5	0.31
7	2016	599	16	0.297123	0.375	0.08
8	9337	7329	163	0.784942	0.858896	0.07
9	4187	620	15	0.148077	0.333333	0.19
10	2884	1026	26	0.355756	0.461538	0.11
11	437	191	19	0.437071	0.263158	(0.17)
12	8989	2382	74	0.264991	0.364865	0.10
13	2567	647	13	0.252045	0.384615	0.13
14	1803	356	36	0.197449	0.305556	0.11
15	2632	554	36	0.210486	0.388889	0.18
16	2013	1301	16	0.646299	0.5625	(0.08)
17	2117	1151	31	0.543694	0.677419	0.13

FFY	Measurable and Rigorous Target (Revised February 2008)  A	Measurable and Rigorous Target  B
2005 (2005-2006)	6%	
2006 (2006-2007)	5%	
2007 (2007-2008)	5%	
2008 (2008-2009)	4%	
2009 (2009-2010)	4%	
2010 (2010-2011)	4%	

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Within the general supervision process, identify AUs with significant discrepancies in either component of this indicator and require these agencies to examine the data and to identify proactive initiatives to reduce discrepant rates.	Fall 2005	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D
2. Develop and implement Technical Assistance to improve data collection and reporting procedures across all AUs.	FFY 2007	Training about reporting suspension/ expulsion data to the CDE has been provided to all AUs during EOY data trainings across the state.		C		
3. Convene stakeholder meeting to develop new criteria for defining significant discrepancy of suspension and expulsion rates.	FFY 2006	“Significant discrepancy” defined in the FFY 2006 APR.		C		



Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
4. Convene a task force to discuss data concerns, integrity and follow up.	Winter 2006	<p>This task force led to the creation of the Indicator 4 team.</p> <p>The Indicator 4 team developed a tool to guide review of policies, procedures and practices.</p> <p>The team created a Technical Assistance document that aligns with best practices and the activities and goals of the Mental Health Team and Colorado School-wide Positive Behavior Supports Initiative.</p>		C		
5. Provide training for School Safety and Prevention staff regarding parent engagement, school attachment, and interventions for alcohol, drug dependency and tobacco use.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	CDE staff from several units provides technical assistance to school districts throughout the year.	O			
6. Provide training provided for School Social Workers, School Psychologists and other educators in positive behavioral supports.	FFY 2006 FFY 2007 FFY 2008	Topics related to the use of Positive Behavior Support strategies and interventions were integrated into statewide conferences.		C		
7. Develop a new Behavior Intervention Plan (BIP) form to align with the state recommended IEP forms.	FFY 2006 Final approval 1/6/08	Training in completing the form was conducted in October 2007.		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
8. Training of non-PBS school districts on behavior, mental health issues, use of positive behavioral interventions and supports for students with the most significant challenges.	FFY 2007	<p>Trainings were offered 3 times each school year in regions across the state.</p> <p>Topics include:</p> <ul style="list-style-type: none"> <li>• functional behavioral assessments;</li> <li>• strategies for working with students with mental health needs;</li> <li>• collaborating with community partners.</li> </ul>		C		
9. The CDE will determine the out of school suspensions (OSS) data trends for children with disabilities in PBS schools.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	Data are available annually using 618 data. This information is reviewed for each AU in the state to identify trends for students with disabilities.	O			
10. The CDE will continue to provide training to improve data collecting and reporting procedures across all AUs.	FFY 2006 FFY 2007 FFY 2008 FFY 2009	PBS regional technical assistance model has provided opportunities to increase proficiency in the data collection, analysis and reporting of Office Disciplinary Referrals.	O			
11. Technical assistance for establishing positive, proactive, and preventative learning environments is provided to 35% of all Colorado school districts—those involved in the PBS initiative.	FFY 2006 FFY 2007 FFY 2008	PBS is providing technical assistance and training to 62 of 178 school districts in the State of Colorado.		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
12. PBS trainings will directly address alternatives to suspension as well as continue training on preventative strategies for minimizing problem behaviors. In addition, function-based support is a training topic for newly implementing districts.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	The CDE is providing training regarding minimizing problem behaviors in schools and classrooms as well as disciplinary alternatives to suspensions.	O			
13. In collaboration with the RtI initiative, the problem-solving model will be taught to districts implementing PBS.	FFY 2007 FFY 2008	This has occurred at multiple conferences as well as direct technical assistance in multiple regions of the State.		C		
14. Support current districts full-scale implementation of Positive Behavioral Supports.	FFY 2008 FFY 2009 FFY 2010	Develop a technical assistance tool called "Partnership for Success" describing phases of implementation for PBS districts.  Provide training and TA to interested AUs on "Partnership for Success" documents annually.	O			
15. Identify and provide training and technical assistance regarding research-based approaches to improve school climate and culture.	FFY 2008 FFY 2009 FFY 2010	Training provided through a variety of state conferences, Blackboard trainings, and regional technical assistance coordinators.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
16. Provide guidance through on-line trainings and technical assistance regarding research-based approaches to reduce discipline issues for students with disabilities.	FFY 2008 FFY 2009 FFY 2010	Multiple units at CDE (ESLU, RtI/PBS, Prevention Initiatives) will provide on-line trainings.	O			
17. Provide information to school personnel regarding bully-prevention research.	FFY 2008	Information continues to be provided as it is updated and as new research becomes available.	O			
18. Develop a technical assistance tool identifying best practices that can be pinpointed to district specific areas of concern based on 618 data.	FFY 2008 FFY 2009	Indicator 4 Self-Assessment Tool, Technical Assistance Probes and related tools were developed and are available at: <a href="http://www.cde.state.co.us/cde/sped/SPP_TrainingMaterials.asp">http://www.cde.state.co.us/cde/sped/SPP_TrainingMaterials.asp</a> The tools continue to be updated as needed.	O			

**Resources Used to Support Activities**

- Training Calendars
- Indicator 4 Team
- CDE Prevention Initiatives Unit
- CDE RtI Team
- CDE Behavior Leadership/PBS Team
- Indicator 4 review documents

## Part B State Performance Plan (SPP) for 2005-2010

**Monitoring Priority: FAPE in the LRE**

For FFY 2008 the measurement for Indicator 5 was changed. The Indicator now reads:

**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.

**Overview of Issue/Description of System or Process**

Colorado used the 618 data reported to OSEP on 12/1/04 to calculate the percentage of children in each of the sub-groups noted above.

**Baseline Data for FFY 2004 (2004-2005)**

- |   |       |
|---|-------|
| A. Served in regular class 80% or more of the day                     | 70.3% |
| B. Served in regular class less than 40% of the day                   | 7.8%  |
| C. Served in separate schools, residential placement or home/hospital | 4.2%  |

**Discussion of Baseline Data**

As shown Table 2, Colorado's placement strategies result in LRE data that substantially exceed national averages. More than two-thirds of students with disabilities are served in the general education classroom for most of the day. However, other options are clearly available and utilized as needed and as appropriate. Three year trend data is shown in Figure 5, and indicates a relatively high level of stability over time. Given that the baseline data is already quite positive, only minimal resources will be expended on improving this indicator and programs targeting this indicator as a whole are not expected to improve percentages dramatically. Therefore, the targets were set accordingly.

Figure 5. Three year trend data for LRE.

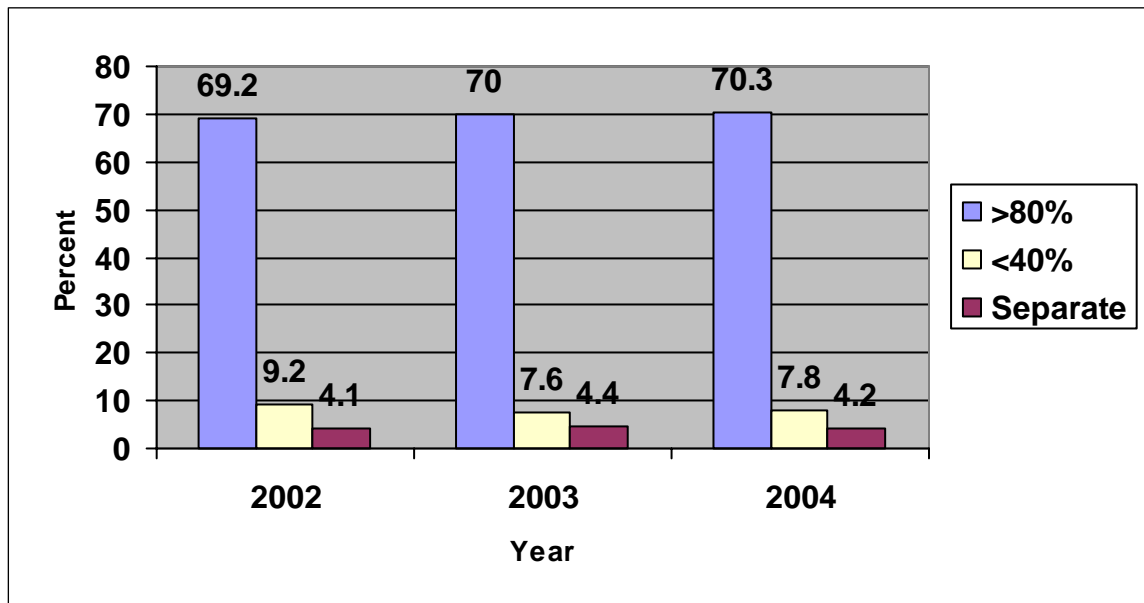


Table 2. Comparison of Colorado LRE with National LRE.

Placement outside the regular classroom	% of CO population	% of US population*
A. >80%	70.3%	50.0
B. >40%	7.8%	19.0
C. Separate facilities	4.2%	3.1

\*Data taken from the USDOE/OSERS website

FFY	Measurable and Rigorous Target		
	Measurement A >80%	Measurement B <40%	Measurement C Separate
2005 (2005-2006)	70.3%	7.8%	4.2%
2006 (2006-2007)	70.5%	7.7%	4.1%

FFY	Measurable and Rigorous Target		
	Measurement A >80%	Measurement B <40%	Measurement C Separate
2007 (2007-2008)	70.7%	7.6%	4.0%
2008 (2008-2009)	70.9%	7.5%	3.9%
2009 (2009-2010)	71.1%	7.4%	3.8%
2010 (2010-2011)	71.3%	7.3%	3.7%

Baseline data were reported for FFY 2004 and was used to set targets. While the measurement has changed it was a language change and not a data change. Therefore, baseline and targets are not being re-set at this time.

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Identify administrative units with excessive numbers of restrictive placements.	FFY 2006 FFY 2007 FFY 2008	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
2. Continue training and supervision of LRE reporting.	FFY 2006 FFY 2007	Training was part of Student 618 data collection training where every AU in the state was trained.  Technical assistance is ongoing.		C		
3. Expand the Positive Behavioral Supports program.	FFY 2006 FFY 2007	Data are not available to provide a connection between Positive Behavioral Supports and placement.				D
4. Modify the CIMP system to require AUs with high numbers of restrictive placements to investigate placement procedures and additional options.	FFY 2008	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D
5. Support AUs that have excessive numbers of restrictive placements to develop improvement strategies.	FFY 2008 FFY 2009 FFY 2010	Drill down procedures were used to identify and provide specific technical assistance necessary.	O			
6. Formation of Indicator 5 team.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	The Indicator 5 Team was formed for the purpose of analyzing data and provided technical assistance.  The team will develop procedures for AUs to use to examine their policies, procedures and practices related to how placement decisions are made.  The team will disaggregate data to determine if there is a correlation between placement and disability category.	O			



Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
7. Follow up with AUs that are outliers in placement data to determine cause.	FFY 2008 FFY 2009 FFY 2010	AUs that are outliers were identified. Such AUs examine policies, procedures and practices to determine how placement decisions are made.	O			
8. Form RtI Implementation Team.	FFY 2006 FFY 2007	Team comprised of a variety of stakeholders across the state (e.g., Superintendents, Principals, teachers, parents).		C		
9. Provide professional development of essential components of RtI.	FFY 2007 FFY 2008	Trainings in the essentials of RtI were conducted across the state to a variety of audiences.		C		

**Resources Used to Support Activities**

- CDE RtI/PBS Unit
- ESLU General Supervision team
- ESLU Indicator 5 team
- CDE Data Services Unit

**Revisions for FFY 2008**

The CDE is revising and/or adding improvement activities to better reflect current practices. Improvement activities are being added to continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
1. Professional Development activities to include: a. Learner Outcomes and Inclusive Practices. b. Settings vs. Services. c. Differentiation.	Development of the trainings in several formats (e.g., Trainer of Trainers modules, webinars, or Blackboard online courses).	FFY 2009 FFY 2010	ESLU Low Incidence Support Team

Activity	Action Steps	Timeline	Resources
2. Colorado Autism and Significant Support Needs Model Programs Project.	Four elementary programs were developed in FFY 2009. Four preschool and/or secondary level programs will be added.	FFY 2009 FFY 2010	ESLU Low Incidence Support Team CDE RtI/PBS Unit
3. Development of Quality Indicators with a component on inclusive practices (Autism and SSN populations).	Provide copies of the Quality Indicators to AUs. Statewide trainings.	FFY 2009	ESLU Low Incidence Support Team
4. Professional Development on the use of Accommodations and Modifications for instruction.	Statewide trainings conducted on a regional basis.	FFY 2009 FFY 2010	ESLU Low Incidence Support Team
5. Professional Development on the RtI process for students with Low Incidence Disabilities.	Develop products ( <i>e.g.</i> , Fast Facts) about implementing the RtI process for students with low incidence disabilities. Provide training for AUs who are not using the RtI process for students with low incidence disabilities.	FFY 2009 FFY 2010	ESLU Low Incidence Support Team CDE RtI/PBS Unit
6. Math Instruction for Students with Disabilities including specialized instruction and adaptive materials.	Provide statewide training for teachers of students with visual impairments on specialized math instruction and the use of adaptive materials. RtI Math Module training to improve performance of students with disabilities.	FFY 2010	ESLU Low Incidence Support Team CDE RtI/PBS Unit

## Part B State Performance Plan (SPP) for 2005-2010

**Monitoring Priority: FAPE in the LRE**

**Indicator 6:** Percent of preschool children with IEPs who received special education and related services in settings with typically developing peers (*e.g.*, early childhood settings, home, and part-time early childhood/part-time early childhood special education settings).

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

**Measurement:**

Percent = # of preschool children with IEPs who received all special education services in settings with typically developing peers divided by the total # of preschool children with IEPs times 100.

**Overview of Issue/Description of System or Process**

Colorado is a national leader in inclusion practices for children with disabilities of all ages with rates of services provided in the context of the general classroom placing the state well above national averages. Since the inception of the preschool special education mandate, the primary model for providing FAPE, including access to the general curriculum, and LRE for young children with disabilities in Colorado has been a blended preschool classroom approach -- braiding funds from special education, the Colorado Preschool Program (CPP), Title I, Head Start and private pay tuition. These blended classrooms may be established and supervised on public school property or as partnerships with private or Head Start Programs. Some sites place or maintain placement of preschoolers with disabilities in community settings on a child by child basis.

The Colorado Quality Standards for Early Care and Education Programs provide guidance that general education preschool classrooms or groups should include no more than 3 children with disabilities in a maximum class size of 15. Historically, this ratio of 3 to 12 has been difficult to maintain. While acknowledging that this represents preferred practice, a goal of 5 children with disabilities to 10 typically developing children in a group or classroom has been the target "rule-of-thumb" for classroom ratios.

In past years, placement setting definitions focused on "who" the setting is designed for, coding differently for settings that are "Integrated Early Childhood Settings" and "Early Childhood Special Education Settings". This has led to confusion in selecting the appropriate code when IEPs are developed. For example, providers were inclined to select the latter category (Early Childhood Special Education Setting) because Colorado preschool classrooms were initially formed to serve children with disabilities AND they are frequently staffed by early childhood special education teachers as lead teachers. However, in this example, 2/3 or more of the children may be typical peers and, in Colorado, early childhood special educators are also qualified as general early childhood educators.

There is anecdotal evidence that preschool program proportions may be moving toward a 50/50 ratio of children with disabilities to those who are typically developing. This is attributed to rapid population growth and limited classroom space availability. Because of the high value Colorado places on inclusion, the research on the efficacy of inclusive

preschool programming as well as concerns with recent appellate court rulings on what constitutes preschool LRE (see *L.B. v. Nebo School District (Nebo)* [www.kscourts.org/ca10/cases/2004/08/02-4169.htm](http://www.kscourts.org/ca10/cases/2004/08/02-4169.htm) ), CDE plans to target LRE and inclusive practices over the next six years. In addition to the placement discussion, emphasis will continue to be placed on the quality of special education and related services in the context of general classroom activities and routines.

February 2007 Update: There is continuing anecdotal evidence in some areas of the state that preschool program proportions may be moving toward a 50/50 ratio of children with disabilities to those who are typically developing. This is attributed to continuing population growth and limited classroom space availability.

CDE experienced a complete turnover in preschool special education staff between 2005 and 2006. In addition, during late 2005/early 2006 the training program for preschool inclusion with the University of Denver was in transition and not re-started again until summer 2006 with the new staff. And in late 2006/early 2007 a new partnership with the national Center for the Social Emotional Foundations for Learning was formed which adds additional valuable resources to support high quality preschool programs which can serve as successful LRE for preschool children with disabilities.

The CDE early childhood education staff has been working with Colorado's largest district to change its inclusion policy. The City and County of Denver voters approved funding for a universal preschool option for parents, which will impact the opportunities for all children including children with IEPs. Given the size of the county and logistical challenges, it not anticipated that this new option will be fully implemented until FFY2007.

#### **Baseline Date for FFY 04 (2004-2005)**

Based on December 1, 2004 count of students by age and federal placement category, 85% of eligible preschoolers received special education and related services in settings with typical peers. (N=10,307)

#### **Discussion of Baseline Data**

Based on current placement definitions, 8,665 of the 10,307 eligible preschoolers counted in December of 2004 received their special education and related services in integrated or combined early childhood setting, with an additional 54 children receiving services in the home environment for a total of 8,719 or 85%.

February 2007 Update: During this past reporting period, there have been substantive barriers in Colorado undermining the realization of improvement in of this performance indicator. These barriers are primarily attributable to a lack of space while at the same time accommodating an increasing number of children being served. Unfortunately, the public school/community preschool system does not have the money and personnel to increase the number of classrooms needed at this time.

Given these barriers, coupled with the high recent turnover experienced in preschool special education staff, the transition of the training program for preschool education, and the timing of implementation of the universal preschool option in community with the state's largest district, the CDE early childhood special education staff concluded that immediate improvement on this indicator is an unrealistic expectation. Therefore, the CDE has proposed a new set of improvement targets that reflect the conclusion that the current changes that are occurring in the state will not show an impact in the data until FFY2007. The original and revised targets are shown in the following table. The timing

of some of the improvement activities has also been adjusted somewhat and the revised timeline is presented in a subsequent table.

<b>FFY</b>	<b>Measurable and Rigorous Target (Original)</b>	<b>Measurable and Rigorous Target (Revised February 2007)</b>
<b>2005 (2005-2006)</b>	86% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.	85% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.
<b>2006 (2006-2007)</b>	87% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.	85% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.
<b>2007 (2007-2008)</b>	88% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.	86% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.
<b>2008 (2008-2009)</b>	89% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.	87% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.
<b>2009 (2009-2010)</b>	90% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.	88% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.
<b>2010 (2010-2011)</b>	91% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.	89% of percent of preschool children with IEPs receive special education and related services in settings with typically developing peers.

**Improvement Activities/Timelines/Resources**

**(Revised Timelines for Commencement of Items #3 and #4 Only)**

<b>Improvement Activities</b>	<b>Timelines</b>	<b>Resources</b>
<p>1. Refine data collection and reporting strategies regarding the location of special education and related services provision. Establish baseline data and determine rigorous targets for improvement. Provide training and technical assistance to LEAs around data collection strategies.</p>	<p>2005 - 2007</p>	<p>CDE Early Childhood Special Education staff CDE Fiscal Management Staff</p>
<p>2. Develop Colorado specific subsets for data collection around placement setting codes and definitions that are consistent with new OSEP reporting requirements, but include additional levels of specificity. Provide training and technical assistance to LEAs around new definitions and data collection strategies.</p>	<p>2005 - 2007</p>	<p>CDE Early Childhood Special Education CDE Fiscal Management Staff</p>
<p>3. Provide training and technical assistance on recommended practices and strategies for defining and supporting a true continuum of placement options in early childhood programs.</p>	<p>2007 - 2010</p>	<p>CDE Early Childhood Special Education and Early Childhood staff Center for the Social/Emotional Foundations of Learning staff</p>
<p>4. Develop and disseminate tools and strategies for guiding and documenting LRE decision making within the staffing process.</p>	<p>2007 - 2010</p>	<p>CDE Early Childhood Special Education staff</p>

**Improvement Activities/Timelines/Resources**

**(Revised Timelines for Commencement of Items #3 and #4 Only)**

<b>Improvement Activities</b>	<b>Timelines</b>	<b>Resources</b>
5. Develop and implement regional training for LEA staff on preschool inclusion.	2006 - 2010	CDE Early Childhood Special Education and Early Childhood staff University of Denver National Preschool Inclusion Program trained team Center for the Social/Emotional Foundations of Learning staff CDE training cadre

## Part B State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan (SPP) Development

FFY 2008 is the first year that states are required to present baseline data for Indicator 7. Using this baseline data, states are required to establish rigorous targets for FFY 2009 and FFY 2010. To help set targets, the CDE convened a stakeholder group that included Special Education Directors and Preschool Directors, as well as representatives from Head Start, Part C, the CDE Early Childhood and Special Education staffs, PEAK Parent Center (Colorado's Parent Training Information Center) and other partners. Additional participants in the group included representatives from a quality rating program, parents of students in programs, and those with expertise in research, policy, and professional development.

The stakeholder group was charged with two tasks:

- Consider baseline data from the assessment methods
- Assist in determining appropriate targets for Indicator 7 and for each summary statement

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

Progress categories for A, B and C:

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



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

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

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

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

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

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

FFY	Measurable and Rigorous Target
2008	N/A

**Overview of Issue/Description of System or Process**

**Measurement System and Strategies Used to Collect Data**

Section 619 Indicator 7 measurement and reporting are administered by the Results Matter initiative at the Colorado Department of Education (CDE) and in collaboration with the Colorado Department of Human Services (DHS). Results Matter is a statewide program that promotes ongoing assessment and documentation of child learning and development for a total of 44,000 children served in a variety of early childhood initiatives such as Part C,

Head Start, private for-profits, non-profits, faith based and home based programs. It is a comprehensive outcomes and accountability system made up of multiple components including measurement and reporting of child and family outcomes, longitudinal analysis of achievement data, links to program quality indicators and an extensive professional development system designed to support high quality assessment practices and the use of data to inform decision making at multiple levels from classroom instruction to program improvement to local and state policy development.

- o Who is included in Indicator 7 measurement? Indicator 7 data in Colorado are based on census data for only those children eligible for special education services funded through IDEA Part B Section 619. Such students are assessed three times annually.
- o What are the sources of Indicator 7 data? Assessment and outcomes data are derived from one of three curriculum or criterion referenced assessment systems chosen by the local program. The process requires ongoing observation, portfolio documentation and periodic assessment ratings. The menu of approved assessment systems includes: Creative Curriculum Developmental Continuum (CCDC), Work Sampling System (WSS) and High/Scope Child Observation Record (COR).
- o Who conducts the assessments? The child's primary caregiver is designated as the assessment lead and has the final word on all assessment decisions. Members of the classroom and intervention teams, as well as families and providers from other programs serving the child, contribute to the body of progress information which includes observations, work samples, digital photo and/or video files and rating scales.
- o When does assessment occur? Observation and documentation are ongoing, culminating in assessment rating checkpoints for all children scheduled three times per school year (four checkpoints for year round programs). Checkpoints for Colorado are October 29, February 14 and May 31.
- o How are data transmitted to the state? All assessment information, including observation notes and other forms of documentation, is entered online using secure systems hosted by the assessment vendors. These online assessment systems provide immediate access to child and group level data reports for teachers, local administrators and state administrators. Both status and progress reports are available and can be generated based on developmental or content domain, outcomes or state standards.
- o What methods are used to determine progress categories? Conversion to the OSEP progress categories is achieved through an automated process calibrated to each of the assessment tools. Results Matter has been working closely with the assessment authors, researchers and the Early Childhood Outcomes Center (ECO) to fine tune these algorithms. Although further adjustment is needed to address issues of over representation in some categories, great strides have been made in the past year that have allowed Colorado to capture a much more comprehensive statewide data set.

### **Data System Elements**

- o Data Input and Maintenance Vendor hosted online assessments systems function as the portal for data input at the classroom level and also currently serve as a data warehouse for information entered beginning in 2005. Security of the online systems was vetted by the CDE Information Management Services Unit (IMS). Local programs are instructed to archive data from prior years rather than delete. System

wide exports of data are also carried out routinely and data files are stored at the CDE. All automated reports can be run with or without archived records included.

- o Data Analysis Status, progress and correlation reports can be produced at all administrative levels of the online systems. A Results Matter team member with expertise in data management and analysis was hired.

### **Policies and Procedures**

Policies and procedures guiding the Results Matter outcomes measurement system are partly built into the procedures for the assessment itself and the accompanying online system. Other policies and procedures are outlined in a series of *Results Matter Implementation Guidelines*. A process is in place to compile written guidance in a Results Matter handbook to be completed by fall 2010. Guidance is communicated to providers through email, online system alerts and through the website at [http://www.cde.state.co.us/resultsmatter/rm\\_docs.htm](http://www.cde.state.co.us/resultsmatter/rm_docs.htm).

### **Provision of Training and Technical Assistance**

Training continues to be a cornerstone of the Results Matter program. The addition of five (5) consultants who support the implementation of Results Matter in inclusive settings enabled a higher level of local technical assistance during the 2008-09 school year. Training and technical assistance in the areas of observation, documentation, and specific assessment tool use, as well as skill building in the use of digital documentation and the online system are provided on a regional schedule and upon request. The Results Matter observation module training materials were made available online and have been disseminated nationwide. The documentation module is being revised with a release date of June, 2010 in Colorado followed by national dissemination at the OSEP conference in August, 2010. At the end of 2009, the Results Matter video series was also made available on the website where users can stream the video clips or download them for later use. Plans were put into place to develop and host interactive online training options with access to an interactive presentation software system. Some training materials can be found at: <http://www.cde.state.co.us/resultsmatter/observation.htm>. There is a Results Matter Video Library that can be found at: <http://www.cde.state.co.us/resultsmatter/RMVideoSeries.htm>.

### **Quality Assurance and Monitoring**

Advances in implementing quality assurance strategies in FFY 2008 included multiple components:

1. Increased site visits with personalized technical assistance to support quality assessment practices.
2. A shift from a training-of-trainers model to a direct, state-sponsored training for local teachers and administrators on the topic of introductory and advanced assessment.
3. Complete revision and field testing of an observation skills module.
4. Sponsorship of a second assessment roundtable series.
5. Plans put into place for increased administrator training to build local capacity for quality monitoring.
6. Continued work with publishers and ECO to refine conversion algorithms and to continue to build out the online system to provide ways to easily monitor levels of implementation.

7. ECO used remaining Colorado General Supervision Enhancement Grant (GSEG) funds to run preliminary analyses, including pattern checking, of statewide data.
8. Plans put into place to continue a partnership with ECO and also a research analysis team at the University of Northern Colorado (UNC) to assist with data analysis and monitoring beginning in FFY 2009.

**Progress/Baseline Data (Preschool Children Exiting During FFY 2008)**

**Table 7.1 Positive social-emotional skills (including social relationships):**

<b>A. Positive social-emotional skills (including social relationships):</b>	<b>Number of Children</b>	<b>% of Children</b>
a. Percent of preschool children who did not improve functioning	104	3.1%
b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	246	7.3%
c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it.	455	13.5%
d. Percent of preschool children who improved functioning to reach a level comparable to same aged peers	739	21.9%
e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers	1829	54.2%
<b>Total</b>	<b>3373</b>	<b>100.0%</b>

**Table 7.2 Acquisition and use of knowledge and skills (including early language/communication and early literacy):**

<b>B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):</b>	<b>Number of Children</b>	<b>% of Children</b>
a. Percent of preschool children who did not improve functioning	121	3.6%
b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	269	7.9%
c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it.	594	17.5%
d. Percent of preschool children who improved functioning to reach a level comparable to same aged peers	630	18.6%
e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers	1781	52.5%
<b>Total</b>	<b>3395</b>	<b>100.0%</b>

**Table 7.3 Use of appropriate behaviors to meet their needs:**

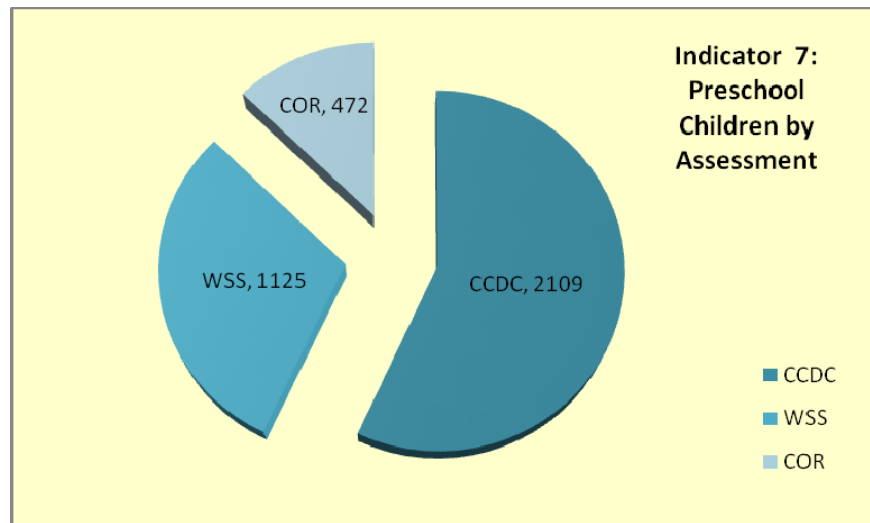
<b>C. Use of appropriate behaviors to meet their needs:</b>	<b>Number of Children</b>	<b>% of Children</b>
a. Percent of preschool children who did not improve functioning	99	2.9%
b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	283	8.3%
c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	505	14.8%
d. Percent of preschool children who improved functioning to reach a level comparable to same aged peers	670	19.7%
e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers	1848	54.3%
<b>Total</b>	<b>3405</b>	<b>100.0%</b>

**Discussion of Progress Data**

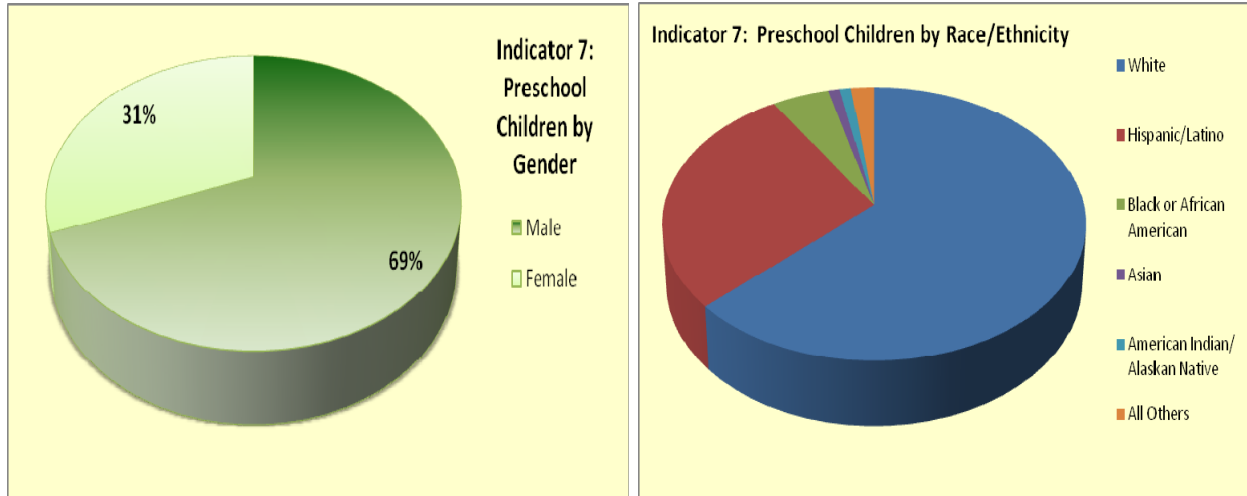
**Complete Data:** Improved functioning of online systems over the past year and increased emphasis on data clean-up with individual sites and programs has led to a significant increase in the amount of data Colorado has to report for FFY 2008.

Although an independent analysis of all Results Matter child assessment data revealed a high percentage of missing data, it should be noted that this particular analysis excluded assessments when even 1 item was left un-scored. The assessments and outcomes conversion formulas have a preset threshold for missing items so it is quite possible that many of the excluded assessment results would actually be included in most day to day reporting functions.

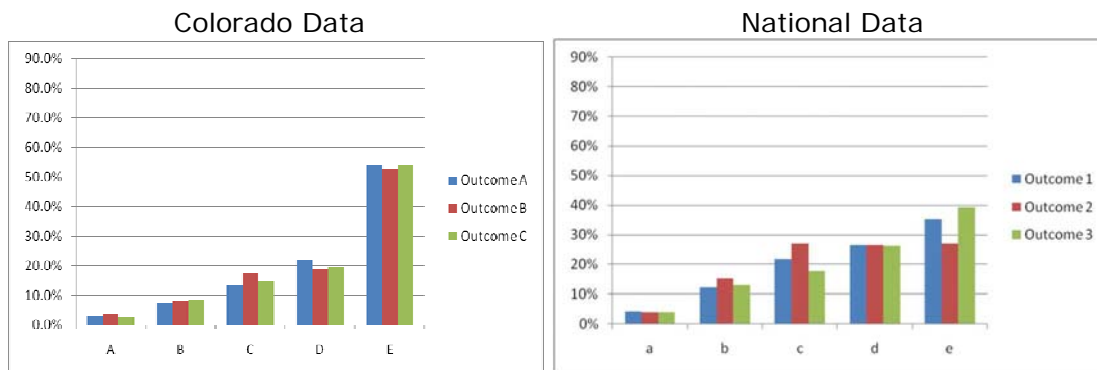
With data for close to 3400 children included in this SPP/APR submission, it is evident that efforts to improve completeness of data are paying off. However, there are significant concerns over some assessments remaining incomplete and the action plan at the end of the Indicator 7 section includes activities that address this. The breakdown of child outcomes measurements completed across the three assessment systems in Results Matter is depicted in this chart. We would expect there to be similar numbers generated by the COR assessment community as Work Sampling, but it is evident there is some sort of issue and plans are in motion to work with the publisher and local programs to try to understand why there is so much missing data in this area.



**Representative Data:** Data included in this report represent children served in rural remote, rural resort, rural farming, urban and suburban communities from every region of Colorado. Indicator 7 data reflect approximately 3400 preschool children, 69% male and 31% female, who completed preschool in FFY 2008. In this data set a breakdown of race/ethnicity data indicated 63% White, 28% Hispanic, 5% Black or African American, 2% Asian, 1% American Indian/Alaskan Native and 2% all others, which is similar to averages in Colorado.



**Outcomes Data Combined Across the Three Assessments:** Great improvements have been made in the use of the online systems to automatically generate outcomes data and the work to refine these formulas continues. However, conversion data for some of the assessments is still producing a high number of ratings in OSEP Progress Category “e”, while another assessment used in Colorado is producing higher than expected numbers in Category “c”. These differently flawed results occur because of unique differences in the way the particular vendor’s work group approached the development of the algorithm, establishment of cut points and how various assessment items feed each outcome. In other words, all three assessment data sets are producing some puzzling automated reports but for different reasons.



The tables above show combined Colorado data which look promising on the surface, but because results within each of the assessment systems are still out of balance and because we are missing so much of the COR data, we recognize that there is more work to be done before we can have complete confidence in our outcomes information. The teams working on these conversion revisions are extremely close to a solution, but unfortunately there was not a ready solution in time for the submission of the APR.

**Overall Assessment Data Quality:** An analysis of Colorado data reflecting 17,597 children from a cross section of programs, communities and funding streams was completed at the end of 2009, yielding the following information.

It is an established finding that developmental abilities increase from birth to 7 years of age (Santrock, 1999). This finding has been demonstrated across most developmental assessments (*e.g.* BDI-II, Newborg, 2005). This relationship should lead to high correlations between chronological age and raw score or chronological age and developmental age. Correlations are moderate and in the expected direction for Creative Curriculum Developmental Continuum® and High/Scope COR. The correlations for WSS-P3 and WSS-P4 are very small.

An important feature of instruments that are used to measure progress is the sensitivity of scores to change over time. More children showed progress on The Creative Curriculum Developmental Continuum® and High/Scope COR compared to the **WSS-P4 and WSS-P3**<sup>1</sup>. This difference could be a function of the programs using the different tools, the children they serve, or a characteristic of the tool itself. In general, a larger percentage of children demonstrated progress in Outcome B and the lowest number of children demonstrated progress in Outcome C. This could result from the larger focus of the preschool curriculum on Outcome B or that the skills measured in Outcome B are easier or more amenable to change.

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<sup>1</sup> WSS-P4 and WSS-P3 refers to the Work Sampling System for 4 and 3 year olds.



**Targets for Preschool Children Exiting in  
FFY 2009 (2009-10) and FFY 2010 (2010-2011)  
and Reported in Feb 2011 and Feb 2012**

Summary Statements	Baseline FFY 2008 (% of children)	Targets FFY 2009 (% of children)	Targets FFY 2010 (% of children)
<b>Outcome A: Positive social-emotional skills (including social relationships)</b>			
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program	77.3%	77.8%	78.3%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program	76.1%	76.6%	77.1%
<b>Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)</b>			
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program	75.8%	76.3%	76.8%
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program	71.0%	71.5%	72.0%
<b>Outcome C: Use of appropriate behaviors to meet their needs</b>			
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program	75.5%	76.0%	76.5%
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program	74.0%	74.5%	75.0%

**Required response to FFY 2007 APR**

None required.

**Discussion of Improvement Activities**

Colorado has established, in the SPP, improvement activities for Indicator 7 through FFY 2010. The table below displays the improvement activities that have occurred as well as the progress and current status of each.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Provide briefings about the Results Matter child and family outcomes initiative for broad stakeholder groups.	FFY 2008 FFY 2009	<p>Posted full overview DVD on website <a href="http://www.cde.state.co.us/resultsmatter">http://www.cde.state.co.us/resultsmatter</a></p> <p>Published overview in State Preschool Program Legislative Report found at <a href="http://www.cde.state.co.us/cpp/download/CPDocs/2009_Legislative_Report.pdf">http://www.cde.state.co.us/cpp/download/CPDocs/2009_Legislative_Report.pdf</a> .</p> <p>Briefed:</p> <ul style="list-style-type: none"> <li>• University of Colorado-Denver graduate students.</li> <li>• State Preschool Program local coordinators.</li> <li>• Briefed staff at Rise School (local private school for young children with disabilities).</li> </ul> <p>Presented at the Lt Governor’s Progress and Possibilities Conference.</p> <p>Presented at the Early Childhood Outcomes Conference.</p>	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
2. Strengthen reliable use of assessment by providing ongoing observation, documentation and assessment instrument training as well as training in use of the online assessment systems for providers and administrators.	FFY 2008 FFY 2009 FFY 2010	<p>Conducted four assessment training-of-trainers workshops.</p> <p>Conducted 20+ observation and documentation trainings.</p> <p>Completed comprehensive revision and field test of observation module.</p> <p>Posted observation module materials on web and disseminated nationally <a href="http://www.cde.state.co.us/res/ultsmatter/observation.htm">http://www.cde.state.co.us/res/ultsmatter/observation.htm</a></p> <p>Developed and disseminated print instructions for OSEP entry/exit process for all online assessment systems.</p>	O			
3. Collect and analyze data for use at the federal, state and local levels to inform families, child-level planning, local program level training and statewide technical assistance.	FFY 2008 FFY 2009 FFY 2010	<p>Assessment data from more than 30,000 children were entered into the online system.</p> <p>The CDE staff have received training from assessment trainers in order to better understand data and be able to use the data to inform technical assistance to service providers.</p> <p>Continued to refine data collection systems with the help of the assessment publishers</p> <p>Continued to develop systems to facilitate the use of the state student identifier system.</p> <p>Conducted preliminary level data quality review.</p>	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
4. Incorporate findings and lessons learned from data analysis into state level planning for training, technical assistance and monitoring activities.	FFY 2008	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D
5. Develop and implement a "Level II" assessment instrument training module for providers using each of the three tests to increase reliable implementation.	FFY 2008	Determined to be addressed in Improvement Activity # 2 above.				D
6. Develop and implement systematic training and technical assistance for local program administrators to support their ability to effectively supervise, monitor and improve their staff's reliable use of assessment tools.	FFY 2008	Determined to be addressed in Improvement Activity # 2 above.				D
7. Assist with analysis of conversion to the COSF Scale and with refinement of the calibration of the assessment tools to the COSF.	FFY 2008	The CDE determined that this is an ongoing administrative task and not an improvement activity targeted at improving results so it is being deleted.				D
8. Assist with analysis of assessment data to determine if refinements to the actual assessment items for certain tools may be needed.	FFY 2008	The CDE determined that this is an ongoing administrative task and not an improvement activity targeted at improving results so it is being deleted.				D

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
9. Develop and implement professional development resources on linking assessment to planning instruction and intervention.	FFY 2008 FFY 2009	Training needs were reviewed and revised.  A process identified to create professional development resources on linking assessment with instruction and intervention in FFY 2009 and FFY 2010.	O			

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2008**

Improvement activities are being added to reflect current practice.

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
1. Provide briefings about the Results Matter child and family outcomes initiative for broad stakeholder groups.	Brief staff from Lt Governor’s office.  Present at Colorado Association for Education of Young Children (CAEYC) annual conference.  Brief Clayton Early Learning Institute leadership.  Brief Senate Bill 212 (School Readiness) Work Group.  Revise printed information brief and disseminate.  Present at Association for Christian Schools International conference.  Publish updated overview in 2010 state preschool legislative report.  Brief federal early childhood representative(s).	FFY 2009	Revised PPT presentation  Video series highlights

<b>Activity</b>	<b>Action Steps</b>	<b>Timeline</b>	<b>Resources</b>
<p>2. Strengthen reliable use of assessment by providing ongoing observation, documentation and assessment instrument training as well as training in use of the online assessment systems for providers and administrators.</p>	<p>Provide webinars on use of the online systems.</p> <p>Provide introductory and advanced assessment supervision training for administrators.</p> <p>Continue to provide rounds of introductory and advanced assessment instrument training for new and continuing local staff.</p> <p>Conduct complete review and revision documentation module. Field test and prepare for broad dissemination by August, 2010.</p> <p>Provide ongoing site visits and technical assistance to monitor and assist with local implementation.</p> <p>Provide ongoing random checks of observation and assessment data quality and train local administrators to conduct these checks locally.</p>	<p>FFY 2009 FFY 2010</p>	<p>Purchase agreements with vendors</p> <p>Content plans</p> <p>Training staff</p> <p>Print training resources</p> <p>Videography and video editing services</p> <p>Field TA staff</p> <p>TA plans</p> <p>Online system access</p> <p>Plans for systematizing monitoring</p>
<p>3. Collect and analyze data for use at the federal, state and local levels to inform families, child-level planning, local program level training and statewide technical assistance.</p>	<p>Publish quarterly checkpoint deadlines and assessment window information.</p> <p>Assure local access to online systems, print materials and required trainings.</p> <p>Monitor entry status and assessment completion.</p> <p>Send periodic reminders.</p>	<p>FFY 2009 FFY 2010</p>	<p>Online subscription process</p> <p>Online access</p>

Activity	Action Steps	Timeline	Resources
<p>4. Develop and implement professional development resources on linking assessment to planning instruction and intervention.</p>	<p>Identify subject matter experts to assist with content.</p> <p>Identify lead and work group members.</p> <p>Conduct literature/resources review.</p> <p>Refine plan to include:</p> <ul style="list-style-type: none"> <li>• Traditional and web based learning objects</li> <li>• Map for video resource needs</li> <li>• Details for online interactive learning</li> <li>• Examples for case study method</li> </ul> <p>Produce draft materials.</p> <p>Conduct pilot-revise-field test-revise process.</p> <p>Finalize and disseminate electronic and print resources.</p> <p>Schedule local events.</p>	<p>FFY 2009</p> <p>FFY 2010</p>	<p>Product developer</p> <p>Suggestions of possible development team members</p> <p>Books and other resource materials</p> <p>Videographer</p> <p>Video editing service</p> <p>Articulate Studio</p> <p>Camtasia</p> <p>Volunteer programs for pilot/field test</p> <p>Training calendar</p>
<p>5. Improve completion rate of assessments in programs where High/Scope Child Observation Record is used.</p>	<p>Consult with High/Scope and Red-e Set Grow about possible reasons for so many incomplete assessments.</p> <p>Schedule mandatory training for participating districts.</p> <p>Assign field staff to closely monitor and provide feedback/support to struggling programs.</p> <p>Discuss issue with special education directors. Notify superintendents if needed.</p>	<p>FFY 2009</p>	<p>Staff at both companies</p> <p>Training materials</p> <p>Field staff</p> <p>Research and data consultant staff</p>

## Part B State Performance Plan (SPP) for 2005-2010

## Monitoring Priority: FAPE in the LRE

**Indicator 8:** Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

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

**Measurement:**

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

**PARENT INVOLVEMENT: K-12****Overview of Issue/Description of System or Process**

Colorado's Exceptional Student Services unit has been collecting data from parents for many years and then, more recently, as part of its updated monitoring efforts with students on IEPs on a yearly basis since 2001 as part of its CIMP process. This effort has historically involved a Web-based surveying effort using a sample of school districts every year. As part of Colorado's effort to adequately respond to this effort in the future, the CDE will conduct a cross-walk between the existing parent survey and the National Center for Special Education Accountability Monitoring (NCSEAM) survey to develop a hybrid version that allows CDE to continue to assess trend data from previous years while also meeting the needs of this new indicator. While the Web-based system is already in place, response rates have been historically low, pointing to a need to develop strategies to get more parents to participate in the survey effort. Although it is anticipated that the Web-based system will be continued into the foreseeable future, the CDE also intends to create alternative mechanisms for parents to participate so that response rates increase over time. The CDE also intends to continue to work more closely with Administrative Units (AU) to improve communications and other locally-based strategies to further encourage parent participation.

Colorado will provide clear, quantifiable baseline data for FFY 2005 that will be collected annually thereafter.

*February 2007 Update:* The process of updating the Parent Survey has been delayed by one year for two reasons. First, given the large number of data collection and analytic updates being addressed in FY2005, priority was to those systems which were deemed most critical for the reporting of valid and reliable data on Colorado's APR. These include collections such as the December Count, End of Year Report, and the Student Record Review; and analytic mechanisms and procedures to support reporting on Indicator 4 on Suspension Expulsion and Indicators 9 and 10 on Disproportionality. Because the CDE already had a mechanism in place for collecting information on LEA facilitation of parent involvement as a means of improving services and results for SWD, the CDE pushed back the process on creating a hybrid version of the parent survey as described above. The second reason why the CDE delayed the development and implementation of the hybrid survey has to do with the fact that in FY2005, the final



batch of Administrative Units were entered into the 5 year Continuous Improvement Monitoring process (CIMP). Because the parent survey is an integral piece of CIMP, maintaining consistency in the survey for all AUs in the original 5 year sampling plan was deemed important. Moving forward, the CDE anticipates a major update of the CIMP process to align better with State Performance Plan requirements and as part of this effort, the CDE is currently working on how to best utilize parent survey data for both the CIMP process while at the same satisfying the data collection requirements of the SPP.

The CDE also believes that although the hybrid version will yield greater measurement sensitivity and better information for developing strategies to improve performance, it feels that a direct comparison between results from the existing the survey and the hybrid version will be possible for reporting purposes in Colorado's FY2005 APR. The CDE is currently in the process of finalizing the questions and hopes to use the updated version in its spring 2007 data collection effort.

For the data reported as baseline for FFY2005, the CDE derived a composite score based on the responses to the following items from the Parent Survey (see Exhibit A and B for this indicator, sent as an attachment to this SPP update, for a copy of the entire survey used in FY2005):

**In preparation for the Individualized Education Program (IEP) meeting were you informed about assessment plans (testing) for your child, to determine skills and/or eligibility or continued eligibility for special education services? (scoring 1 point for yes, 0 for no and missing)**

**Were you asked to provide input for the assessment plans (testing) for your child? (Scoring: 2 points for yes, 0 points for no and missing)**

**Did you receive any assessment results (testing) before the Individualized Education Program (IEP) meeting? (Scoring: 3 points for yes, 0 points for no and missing)**

**Were you given timely notice of the Individualized Education Program (IEP) meeting? (Scoring: 2 points for yes, 0 points for no and missing)**

**At your child's most recent Individualized Education Program (IEP) meeting, on a scale of 1-5 (with 5 being best) how well was your input valued? (Scoring: 0 to 4 points, respectively)**

**Do you receive regular reports on your child's progress toward the annual goals listed on the Individualized Education Program (IEP)? (Scoring: 3 points for yes, 0 points for no and missing)**

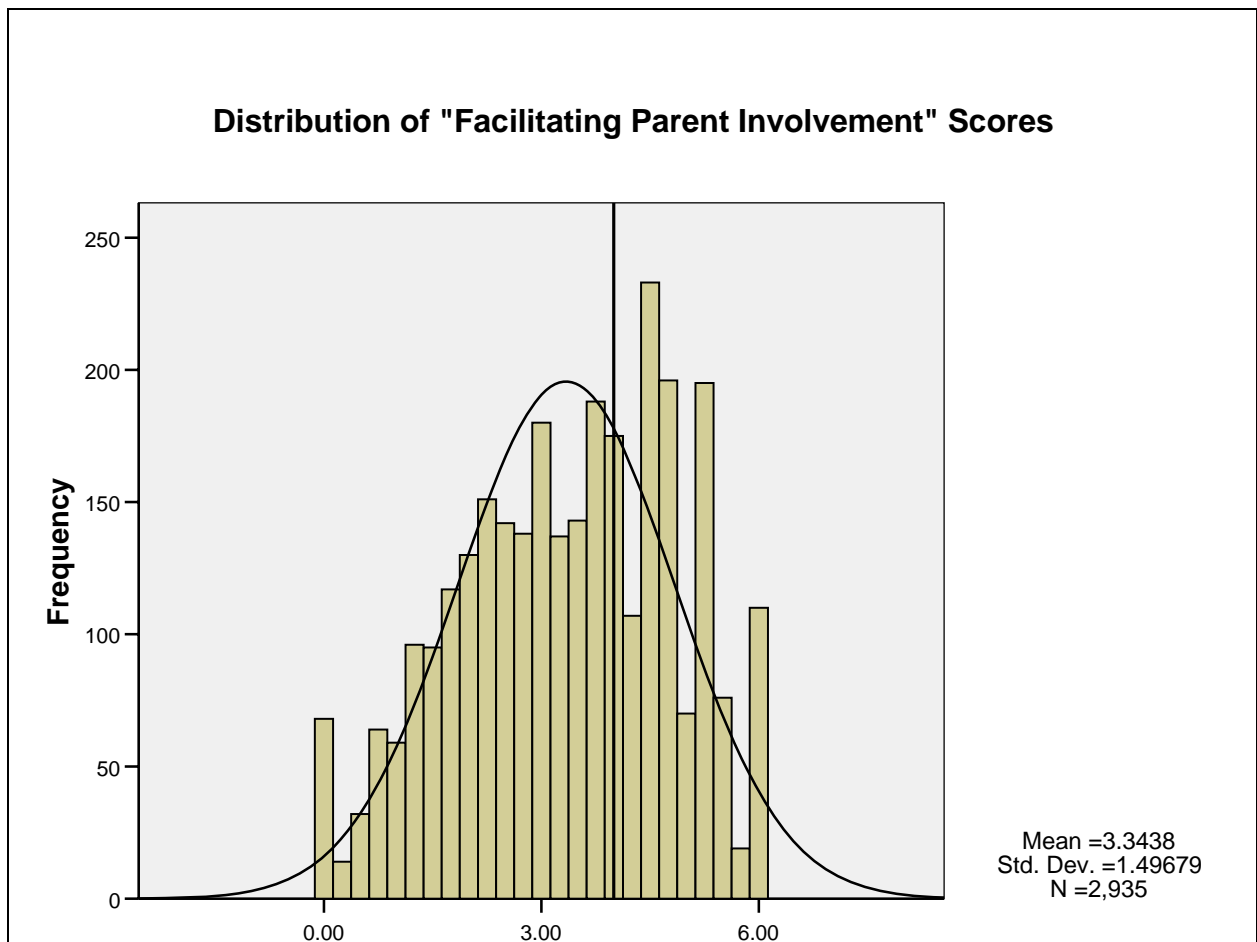
**At your child's last Individualized Education Program (IEP) meeting did you provide input about your child's participation in statewide testing (CSAP or CSAPA)? (Scoring: 3 points for yes, 0 points for no and missing)**

**Has the school district/ Board of Cooperative Educational Services (BOCES) provided you adequate information and training on your child's special needs? (Scoring: 3 points for yes, 0 points for no and missing)**

Has the school district/ Board of Cooperative Educational Services (BOCES) provided you adequate information and training to support your child's Individualized Education Program (IEP) goals and objectives? (Scoring: 1 point for yes, 0 points for no and missing)

Does the district/Board of Cooperative Educational Services (BOCES) provide you with information about any parent trainings or workshops? (Scoring: 2 point for yes, 0 points for no and missing)

Scoring for each item was done so each area of inquiry or factors accounted for an appropriate portion of the overall score and that items within factors were weighted in terms of relative importance. Individual item scores were summed for each respondent and then divided by 4 to decrease the range in the overall composite score, yielding a range of 0 to 6. The CDE chose a fairly conservative minimum cut-off of 4 points or higher to consider a parent's response as one that reflects adequate facilitation of parent involvement on the part of the AU. The Figure on the next page shows the distribution of scores for data used in the baseline calculation for FY2005, with the cut-off for adequate facilitation shown by the vertical bar.



**Baseline Data for FFY 2005 (2005-2006):** 40.2%

- 1181 of respondent parents reported that schools facilitated parent involvement as a means of improving services and results for children with disabilities divided by the total of 2,935 respondent parents of children with disabilities times 100.

**Discussion of Baseline Data**

A total of 2,935 parents of SWD from 18 AUs in geographically varied areas of the state responded to the survey. A comparison of the AUs on key characteristics to state percentages is presented on the next page. As seen in the table, the AUs in the sample mirror the state percentages rather well.

	% SPED Within Total Pop.	Percent Within SPED							% ELL Within Total Pop.
		% LD	% ED	% MR	% Speech/ Language	% All Other Dis.	% Female	% Minority	
<b>Sampled AUs</b>	10.0%	35.2%	10.0%	3.8%	26.4%	24.6%	32.3%	34.7%	<b>13.5%</b>
<b>State</b>	10.6%	36.5%	10.0%	4.2%	24.8%	24.7%	32.4%	38.2%	<b>12.8%</b>

Although the above table demonstrates that the AUs in the sample represent the state rather well on these key characteristics, relatively low return rates (<20% overall) from each AU undermine the extent to which the respondents from each AU represent the parents from the district as a whole. Unfortunately, the current parent survey does not include student demographic information that would allow for a thorough comparison to state and AU characteristics. The survey does, however, collect information on the student’s primary disability, and this comparison is shown in the table below. While this comparison is encouraging in that it roughly mirrors that state and AU percentages, it points to the need to collect additional student demographic data in future surveying efforts.

	% LD	% ED	% MR	% Speech/ Language	% All Other Disabilities
<b>Survey Respondents</b>	<b>32.6</b>	<b>8.6%</b>	<b>4.7%</b>	<b>23.4%</b>	<b>30.7%</b>
<b>Sampled AUs</b>	<b>35.2%</b>	<b>10.0%</b>	<b>3.8%</b>	<b>26.4%</b>	<b>24.6%</b>
<b>State</b>	<b>36.5%</b>	<b>10.0%</b>	<b>4.2%</b>	<b>24.8%</b>	<b>24.7%</b>

Also, once the survey update is completed, the CDE will work on additional strategies to improve return rates. Return rates improves somewhat in FY2005 (about 3 to 5% for most AUs), the overall rates are still quite low. During spring 2007, the CDE will pilot the use of hardcopy mail-outs with postage-paid return envelopes to assess whether this

will substantially improve return rates. Because of the significant additional cost in this surveying method, the CDE will not implement this strategy unless it is shown to substantially improve return rates in the pilot.

Note that the existing parent survey is offered in both English and Spanish and parents have the option of calling a toll-free number to complete the survey over the phone in either of these two languages. The CDE intends to continue to offer these options for the updated survey.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	
2006 (2006-2007)	45%
2007 (2007-2008)	50%
2008 (2008-2009)	55%
2009 (2009-2010)	60%
2010 (2010-2011)	65%

**Improvement Activities/Timelines/Resources (Revised)**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Conduct survey with representative sample of Administrative Units (AUs).	FFY 2007	Survey completed with AUs in the sampling plan.		C		
2. Review baseline data, set targets and develop improvement activities.	FFY 2005 FFY 2006 FFY 2007	Baseline and targets were identified in 2005.  Improvement activities will be identified each year through the APR.		C		
3. Pilot hard-copy survey mail-outs with postage-paid reply envelopes.	FFY 2008	A pilot was not conducted. Instead, for the FFY 2008 survey, each parent in the AUs that participated received a hard copy survey with a postage-paid envelope. Families were provided the mail-in option, in addition to the email, fax, online and telephone options.		C		
4. Increase access to the survey for parents whose languages are other than English.	FFY 2007 FFY 2008	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D
5. Collaborate with the CSEAC on an Official Position Statement with regard to improving parent involvement.	FFY 2007 FFY 2008 FFY 2009	A Parent Involvement <i>Fast Facts</i> document has been drafted by CSEAC.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
6. Analyze data and disseminate to Administrative Units and the public via the CDE Website.	FFY 2006 FFY 2007	Data are included in public reports on the CDE website AT <a href="http://www.cde.state.co.us/cde/sped/AUperformanceprofiles.asp">http://www.cde.state.co.us/cde/sped/AUperformanceprofiles.asp</a> .		C		
7. Identify strategies for focused monitoring and provision of technical assistance based on parent survey results.	FFY 2007 FFY 2008 FFY 2009	Use current data  Continue to gain input from directors, CSEAC, PEAK and other stakeholders.	O			
8. Increase cross unit collaboration within the CDE focused on parent involvement to identify opportunities with the CDE Communications Unit to disseminate special education related information to parents.	FFY 2008 FFY 2009 FFY 2010	Continue to update materials ( <i>i.e.</i> , IEP Manual, CDE Fast Facts) regarding parent involvement and work with the CDE Communications Unit to disseminate.	O			
9. The CDE sponsors and/or supports conferences throughout the year that enhance parent and family involvement.	FFY 2007 FFY 2008 FFY 2009	These activities are ongoing within the state.	O			
10. Improve communication with families and increase the marketing of the survey to improve the response rate.	FFY 2008	Cover letter was revised to improve communication about purpose of survey. Correspondence to families receiving the survey was personalized.		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
11. Collect information about effective parent involvement from a variety of sources.	FFY 2008 FFY 2009	A Family and Community Engagement Training of Trainers' module was developed and training was provided.  An RFP was developed to conduct a literature review and develop curriculum on Effective Family-School Partnerships.	O	C		
12. Revise parent survey questions to better measure parent/family involvement and engagement.	FFY 2010	The CDE determined this to be an ongoing administrative task rather than an improvement activity targeted at improving results so it is being deleted.				D
13. Contract with a third party vendor to manage the Indicator 8 data collection.	FFY 2009 FFY 2010	Contracting with a third party vendor continues to be considered as CDE addresses this and other data collection efforts.	O			
14. Collaborate with various parent/family organizations on statewide strategies for improving parent involvement.	FFY 2008 FFY 2009 FFY 2010	Collaborated with:  Colorado's OSEP-designated Parent Training and Information Center and Region 5 Parent Technical Assistance Center (PEAK Parent Center).	O			

**Resources Used to Support Activities**

- CDE ESLU personnel
- CDE webmaster
- Contract with PEAK Parent Center
- CSEAC
- Special Education Directors
- Indicator 8 budget included funds for improvement activities and costs associated with conducting survey

- OSEP consultation
- MPRRC consultation
- Research in family engagement practices and other states’ performance plans

**Revisions for FFY 2008**

Improvement activities are being added to reflect current practice and continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
<p>1. Collaborate with CSEAC, PEAK Parent Center and Parent to Parent to provide outreach to AU special education advisory committees (SEACs) on strategies to improve parent involvement.</p>	<p>Increase use of AU SEAC listserv to disseminate information and share strategies.</p> <p>Hold a Spring 2010 meeting with AU SEACs to network and share strategies.</p>	<p>FFY 2009 FFY 2010</p>	<p>ESLU staff CSEAC AU SEACs PEAK Parent Center Parent to Parent of Colorado Special Education Directors</p>
<p>2. Develop and provide training to AUs in strategies for developing and maintaining parent involvement and effective family and school partnerships.</p>	<p>Complete a literature review of effective family school partnerships.</p> <p>Develop training for soliciting, maintaining and maximizing parent involvement and effective school partnerships.</p> <p>Select pilot sites for 2010-2011 implementation of training on parent involvement and effective family school partnerships.</p>	<p>FFY 2009 FFY 2010</p>	<p>ESLU Staff PEAK Parent Center Special Education Directors</p>



Activity	Action Steps	Timeline	Resources
3. Connect educators and families of children with disabilities to resources to increase parent involvement.	Regional Parent/Family Mentor Services will be provided to connect families and educators to a variety of resources that will increase their understanding and knowledge of IDEA special education requirements, procedural safeguards, quality instructional practices for children with disabilities and effective family and school partnerships.	FFY 2009 FFY 2010	ESLU Staff PEAK Parent Center

**Sampling Plan**

The CDE intends to continue the use of sampling of AUs over the remaining period of Colorado’s FFY2005-2010 State Performance Plan. In fall 2006, the CDE developed a 5 year sampling plan for the remaining five years of Colorado’s SPP. All AUs that participated in the baseline data collection described above were re-entered into the 5 year sampling plan. Therefore, all of Colorado’s 57 Administrative Units will participate in the Parent Survey data collection between FFY2006 and FFY2010.

The sampling calculator developed by the National Post School Outcomes Center was used for the purpose of developing the 5 year sampling plan. AU characteristics that were factored into the process were as follows:

- Number of AUs
- AU region (urban/suburban vs. rural)
- AU size
- Percent of AU population disabled
- Percent of SPED population in 4 disability categories (LD, ED, MR and all other disabilities)
- Gender of SPED population
- Percent of SPED population that is non-white (total minority)
- Percent of SPED population that is Hispanic
- Percent of SPED population that is 15 years of age or older

The CDE drew approximately 35 separate plans using the sampling calculator and considered 20 of them. Serious consideration was given to the 6 best solutions. While all the solutions had difficulty containing year-to-year variation in the total minority and Hispanic variables within +/-3 percentage points of the state percentage, the chosen plan maintained no more than +/- 3 percentage points variation from the state for all the disability categories and provided the best solution in terms of the variation in

race/ethnicity over the 5 years of the plan. This was especially true for the percent Hispanic variable, which is a key demographic variable in Colorado.

The comparison of each year's sample to the overall state percentages is shown in the table on the next page. The highlighted cells represent differences from the state percentage in excess of +/- 2 percentage points. The specific AUs that will be sampled in each year of the 5 year plan are shown in a subsequent table.

The CDE intends to invite *all* parents of students with IEPs in the AUs from each year's sample to participate in the survey. As discussed earlier, the CDE is actively working on improving its response rates on the parent survey with the goal of exceeding 60% within 2 years. If return rates do not dramatically improve within the next two years, the CDE may move away from trying to survey all parents in the AUs sampled each year to drawing a parent sample from each AU in the plan and using the off-set in resources to conduct extensive follow-up procedures with these parents.

Finally, additional student demographic characteristics will also be collected to help assess the extent to which each year's respondents represent the state as a whole. Dependent on the outcome of this year-to-year assessment, the CDE may employ weighting techniques to help ensure comparability of the results over the 5 year period of the sampling plan.

*July 2007 Update:* Sampling plan was updated because the Post-School Outcomes sampling calculator did not properly bring in the AUs with an average daily member ship of over 50,000 students. The yearly sample characteristics in the below tables does not reflect the four largest AUs that will sampled **every** year of the sampling plan. About 20% of the parents from these large AUs will be randomly selected for participation in the survey per year. Additionally, the Colorado School for the Deaf and Blind will be included in the FFY2006 sample and Department of Youth Corrections will be included in the FFY2008 sample. This sampling plan is now identical to the plan for Indicators 13 and 14 (Part C to B transitions and Post School Outcomes, respectively) based on feedback from the Colorado's Educational Data Advisory Committee (EDAC).

		Sample				
	State	FFY2006	FFY2007	FFY2008	FFY2009	FFY2010
<b>Size</b>	521393	104724	104886	93094	111399	107560
<b>SPED</b>	57353	11590	11189	10105	11398	10540
<b>% LD</b>	37	38	37	36	39	36
<b>% ED</b>	10	9	9	9	10	11
<b>% MR</b>	4	5	4	5	3	4
<b>% AO</b>	49	47	50	52	48	49
<b>% Female</b>	32	33	32	32	32	32
<b>% Minority</b>	38	35	32	45	34	34
<b>% Hispanic</b>	26	27	23	27	29	25
<b>% 15 Years +</b>	23	24	23	23	23	23

# SPP Template – Part B (3)

# Colorado

In the table below, the **highlighted** cells indicate the **school year** an administrative unit (AU) or state operated program (SOP) is to submit demographic information in EOY reporting. \*\*Please note that this sampling plan has not changed for Indicators 14 and 8. Aus with total student enrollment of 50,000+ will be sampled annually.

	Indicator 8 and 14 Collection Year (demographic information)	2006-07 from EOY 2005-06	2007-08 from EOY 2006-07	2008-09 from EOY 2007-08	2009-10 from EOY 2008-09	2010-11 from EOY 2009-10	2011-12 from EOY 2010-11
01010	Adams 1, Mapleton				X		
01020	Adams 12, Northglenn			X			
01030	Adams 14, Commerce City		X				
01040	Adams 27 J, Brighton					X	
01070	Adams 50, Westminster						X
03010	Arapahoe 1, Englewood			X			
03020	Arapahoe 2, Sheridan		X				
03030	Arapahoe 5, Cherry Creek		X	X	X	X	X
03040	Arapahoe 6, Littleton		X				
03060	Adams-Arapahoe 28J, Aurora				X		
07010	Boulder RE-1J, St. Vrain						X
07020	Boulder RE-2, Boulder Valley					X	
15010	Delta 50J				X		
16010	Denver 1	X	X	X	X	X	X
18010	Douglas RE-1	X	X	X	X	X	X
21020	El Paso 2, Harrison						X
21030	El Paso 3, Widefield				X		
21040	El Paso 8, Fountain				X		
21050	El Paso 11, Colorado Springs			X			
21060	El Paso 12, Cheyenne Mountain			X			
21080	El Paso 20, Academy				X		
21085	El Paso 38, Lewis Palmer					X	
21090	El Paso 49, Falcon		X				

**SPP Template – Part B (3)**

**Colorado**

	Indicator 8 and 14 <b>Collection Year</b> (demographic information)	2006-07 from EOY 2005-06	2007-08 from EOY 2006-07	2008-09 from EOY 2007-08	2009-10 from EOY 2008-09	2010-11 from EOY 2009-10	2011-12 from EOY 2010-11
21490	Fort Lupton/Keenesburg			X			
22010	Fremont RE-1, Canon City		X				
26011	Gunnison RE-1J					X	
30011	Jefferson R-1		X	X	X	X	X
35010	Larimer R-1, Fort Collins						X
35020	Larimer R-2J, Loveland						X
35030	Larimer R-3, Estes Park						X
38010	Logan RE-1, Sterling			X			
39031	Mesa 51, Grand Junction		X				
41010	Moffat RE-1, Craig				X		
43010	Montrose RE-1J		X				
44020	Morgan RE-3, Fort Morgan					X	
51010	Pueblo 60, Urban		X				
51020	Pueblo 70, Rural		X				
62040	Weld RE-4, Windsor		X				
62060	Weld 6, Greeley					X	
64203	Centennial BOCES						X
64043	East Central BOCES			X			
64053	Mount Evans BOCES				X		
64093	Mountain BOCES					X	
64103	Northeast BOCES						X
64123	Northwest BOCES					X	
64133	Pikes Peak BOCES			X			
64213	Rio Blanco BOCES						X
64143	San Juan BOCES					X	
64153	San Luis Valley BOCES		X				
64160	Santa Fe Trail BOCES				X		
64163	South Central BOCES			X			
64193	Southeastern BOCES					X	
64083	Southwest BOCS				X		
64200	Uncompahgre BOCS						X

**SPP Template – Part B (3)**

**Colorado**

	Indicator 8 and 14 <b>Collection Year</b> (demographic information)	<b>2006-07</b> from EOY 2005-06	<b>2007-08</b> from EOY 2006-07	<b>2008-09</b> from EOY 2007-08	<b>2009-10</b> from EOY 2008-09	<b>2010-11</b> from EOY 2009-10	<b>2011-12</b> from EOY 2010-11
64205	Ute Pass BOCES			X			
80010	Charter School Institute					X	
66050	CSDB		X				
66080	Division of Youth Corrections				X		

## Part B State Performance Plan (SPP) for 2005-2010

**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 # of districts in the State times 100.

Include State's definition of "disproportionate representation."

Describe how the State determined that disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification, *e.g.*, monitoring data, review of policies, practices and procedures under 618(d), etc.

February 2008 Update**State's definition of "disproportionate representation."**

As a result of OSEP's response to Colorado's FFY 2005 SPP/APR, two methods were developed between the Fall of 2007 and January 2008 to define "disproportionate representation". Both methods examine each of 5 race/ethnicity categories:

- 1) American Indian or Alaskan Native
- 2) Asian or Pacific Islander
- 3) Black (not Hispanic)
- 4) Hispanic
- 5) White (not Hispanic)

Method 1: This method examines each Administrative Unit's (AU) percent of special education students in the five race/ethnicity categories and compares these percentages to the percent of the total education population in that AU for the same race/ethnicity categories. A cell size of at least 30 special education students within any given race/ethnicity category was set as the minimum to perform a comparison. Disproportionate over-representation is defined as a discrepancy of 10 or more percentage points between SPED and total education within any of the 5 race/ethnicity categories while under-representation is defined as a discrepancy of 15 or more percentage points.

Method 2: This method examines each AU's percent of total education students in the five race/ethnicity categories and sets upper and lower bounds. The upper bound for the five race/ethnicity categories within each AU is computed by taking the total education percentages and multiplying each by 0.4 and then adding this result to the original

percentages. Similarly, the lower bounds for the five race/ethnicity categories in each AU is computed by taking the total education percentages and multiplying by 0.5 and then subtracting this result from the original percentages. See the following table for an example.

**An Example of Setting Upper and Lower Bounds for an AU**

	American Indian/Alaskan Native	Asian/Pacific Islander	Black	Hispanic	White
<b>Percent In Total Education</b>	6%	10%	24%	28%	32%
<b>Calculation for Upper Bound</b>	$(6 \times .4) + 6$	$(10 \times .4) + 10$	$(24 \times .4) + 24$	$(28 \times .4) + 28$	$(32 \times .4) + 32$
<b>Upper Bound Result</b>	8.4%	14%	33.6%	39.2%	44.8%
<b>Calculation for Lower Bound</b>	$6 - (6 \times .5)$	$10 - (10 \times .5)$	$24 - (24 \times .5)$	$28 - (28 \times .5)$	$32 - (32 \times .5)$
<b>Lower Bound Result</b>	3%	5%	12%	14%	16%

Upper and lower bounds are set for the five race/ethnicity categories for every AU. If an AU's SPED percentage within any race/ethnic category exceeds the upper bound, the AU meets the definition of disproportionate over-representation. If an AU's SPED percentage within any race/ethnic category is below the lower bound, the AU meets the definition for disproportionate under-representation. A cell size of at least 30 special education students within any given race/ethnicity category was set as the minimum to perform a comparison. Additionally, a difference of at least +/- 2% under Method 1 was set as a minimum before any result under Method 2 would meet the definition of disproportionate representation.

Overall, disproportionate representation in an AU is defined as having a discrepancy between SPED and total education in any of the five race/ethnicity categories under the thresholds set in either Method 1 or Method 2.

**Significant Disproportionality** is determined using the same two methods, but the thresholds involve a discrepancy of over 15% under Method 1 and calculating an upper bound using a multiplier of 0.8 rather than 0.4 under Method 2. For AUs that exceed these thresholds, in addition to a review of policies, procedures and practices, they will be required to allocate 15% of their following year's Part B funds for the provision of early intervening services. One AU was determined to have significant disproportionality under Indicator 9 for over-representation of Whites in special education under both methods.

Consistent with 34 CFR §§300.646(b)(1) and 300.646(b)(3), the CDE is working with the identified AU to review policies, procedures. If it is determined that the AU's policies and procedures are noncompliant, the CDE will require the AU to revise any such noncompliant policies and procedures and require the AU to public report on any such revisions.

**Describe how the State determined that disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification, e.g., monitoring data, review of policies, practices and procedures under 618(d), etc.**

Given the timing of Colorado's FFY 2006 Student Count and the need to develop a definition of disproportionality based on every race/ethnicity category rather than using "total minority", the State did not identify disproportionate AUs until January 2008 and is initiating the process to review the policies, procedures and practices in these AUs. This process will be completed by June 1, 2008.

#### Description of Colorado's Review Process

Colorado's process entails collaboration with targeted AUs to review their policies, procedures and practices:

- The review of written policies includes: (1) an examination of the AU's Board Policies which, for Boards of Cooperative Educational Services (BOCES), may include review of the School Board Policies of each of the BOCES' constituent school districts; and (2) a desk audit of the special education comprehensive plan that all AUs must submit to CDE.
- To evaluate procedures, CDE staff engages with the AU to examine various special education documents, including but not limited to the Procedural Handbook/Manual for the AU, the schedule and topics for professional development, and the Specific Learning Disability criteria implementation plan (using a Response to Intervention model) that must be submitted to CDE by 8/15/08 per state special education regulation.

If an on-site visit is necessary, CDE use the visit to observe the AU's practices related to special education eligibility. Activities to be engaged in during an on-site visit include direct observation of intervention team, referral team, and eligibility team meetings. Other activities may include direct interviews or focus group interviews of various stakeholder groups such as parents, general education teachers, special education teachers.

#### Overview of Issue/Description of System or Process

Colorado has been looking at issues related to disproportionality for many years as part of the CIMP process (see Indicator 15) and Annual Performance Profiles provided to Administrative Units on a yearly basis. Currently, Colorado calculates, for each Administrative Unit, the extent to which the total minority population in special education varies from that Unit's minority population in general education. Administrative Units that have 20% or higher minority representation in special education as compared to that Unit's general education population are flagged for disproportionality. Colorado also calculates, for each Administrative Unit, disproportional representation within five categories of special education disability: Preschool with Disability, SLIC (Mental Retardation), SIED (ED), P/C (LD) and Speech/Language. This calculation examines the difference between an individual Unit's minority representation within each disability category and compares it to the total minority population in that AU. If the difference in any of these 5 disability categories is greater than 20% of that



Unit's minority representation within the total education population, the Unit is also flagged for disproportionality.

While the CDE plans on continuing to examine disproportionality using the methods described above, Colorado also intends to begin use of the electronic spreadsheet provided by Westat to more thoroughly analyze ethnicity by disability data to better identify Administrative Units at risk of significant disproportionality that is a result of inappropriate identification. The results from the Westat tools will be examined in tandem with other assessments to address the extent to which multiple data sources converge on indications of disproportionality. Colorado also intends to consider other methods to assess disproportionality as a result of stakeholder input. It is anticipated that all tools will be folded into the CIMP process (see the overview of cross-cutting initiative on page 5 and indicator description of Indicator 15).

February 2007 Update: In FY2005, Colorado examined a number of different tools to define "disproportionate representation". Most AUs in Colorado have quite small individual cell sample sizes when data is broken out by each ethnicity and the five primary disability categories used in Colorado's calculation. Therefore, the CDE will continue to use "Total Minority" rather than attempting to use specific races/ethnicities when flagging Units for disproportionate representation. Also, the CDE has decided that it will continue to use the +/- 20% cut-off as described above for defining significant disproportionate representation within individual AUs. The CDE also requires a minimum individual cell sample size of 15 to consider exceeding +/- 20% of an AUs total education population as a reliable indication of significant disproportionality.

While the primary trigger for an AU to be flagged for disproportionality is the +/- 20% cut-off, the CDE also examines minority representation as a function of the proportion of an AU's total education population that is considered minority. This calculation is conducted by taking a Unit's percent of the total education population and multiplying it by 0.2. This result is then added to the total minority percentage to define an "Upper Bound" and also subtracted from the total minority percentage to form a "Lower Bound." If a unit's minority SPED population or minority population within the 5 SPED categories is outside of these bounds, the CDE conducts a more comprehensive assessment of the Unit's race/ethnicity data to determine if there is evidence of significant disproportionate representation. While it is believed that this second method will rarely flag additional units as having disproportionate representation, it is useful for choosing which AUs race/ethnicity data warrants additional scrutiny. Also, because this second analytic method is shared with each AU every year, it is an important tool to allow Units to track their race/ethnicity trends over time and make appropriate adjustments in their own policies and procedures before they result in being designated by the CDE as having significant disproportionate representation.

The CDE continues to also work with disproportionality within the Continuous Improvement Monitoring Process, and as that system is updated in FY2006, additional tools and methods may be brought to bear to address this issue.

However, once an AU is flagged for significant disproportionality using either method and the data is verified, the CDE will conduct a thorough analysis of the AU's data by individual race/ethnicity as well as all disability categories present at the AU. If the additional analytic work continues to point to a potential problem with disproportionality at the AU, the CDE will begin a drill-down on that Unit's policies and procedures to determine whether the results are due to inappropriate identification. A Unit's performance with regard to disproportionality as *a result of inappropriate identification* can also trigger a focused monitoring visit and ultimately a citation and sanctions if the citation is not corrected within the one-year timeline.

The CDE will continue to monitor the effectiveness of these systems to address disproportionality and will refine and/or bring in additional tools as needed as appropriate.

#### **Preliminary Baseline Data for FFY 2005 (2005-2006)**

Actual Target Data for FFY 2005: Actual target data for FFY 2005 is pending results of review of policies, procedures and, if necessary, practices for the 8 (14%) AUs that met the definition for disproportionate representation in special education and related services. For the 8 AUs having disproportionate representation based on FFY 2005 data, CDE will conduct the required review of policies and procedures to determine whether the disproportionate representation is due to inappropriate identification by June 30, 2008.

The 8 AUs that met the definition for disproportionate representation did so for the following reasons:

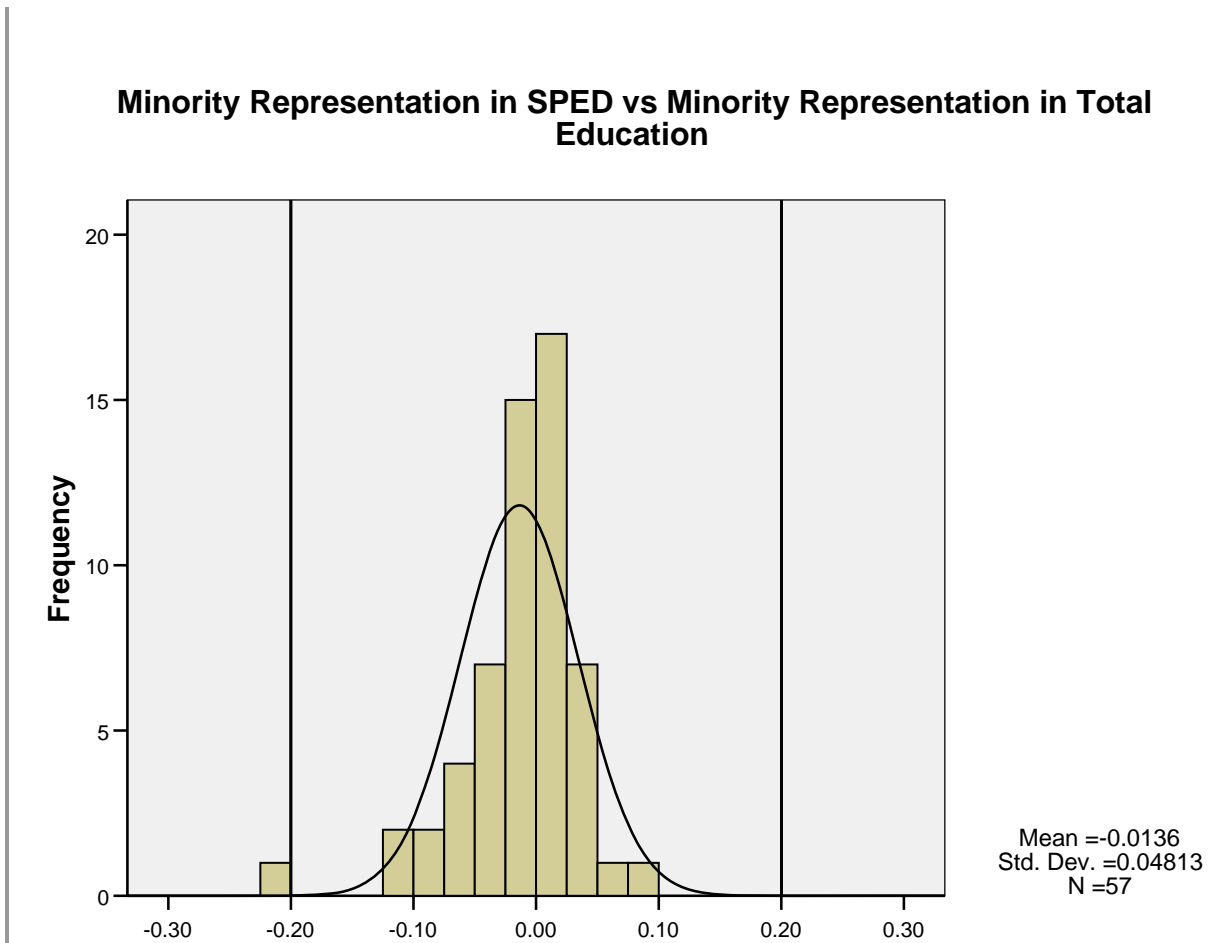
- AU #1: Over-representation of Whites under Method 1
- AU #2: Over-representation of Asians/Pacific Islanders under Method 2; under-representation of Hispanics under Method 1; and over-representation of Whites under Method 2
- AU #3: Over-representation of Blacks under Method 2
- AU #4: Over-representation of Asians/Pacific Islanders under Method 2
- AU #5: Over-representation of Whites under Method 1
- AU #6: Under-representation of Asians under Method 2
- AU # 7: Over-representation of Hispanics under Method 2
- AU #8: Over-representation of Hispanics under Method 1

1.8% = 1 AU with disproportionate representation of racial and ethnic groups in special education divided by 57 of AU in the State times 100. This Unit's data shows *under*-representation of minorities in their SPED population of 20.4%

#### **Discussion of Baseline Data**

The figure on the next page shows the distribution of Colorado's 57 AUs with respect to the difference between minority representation in SPED as compared to minority representation in total education. Specifically, the calculation of the X axis is done by taking the percent minority in SPED and subtracting the percent minority in total education. As shown in the figure, the bulk of Colorado's AUs show very little difference in minority percentages in SPED versus total population, and all but 3 are within +/- 10% points. The district flagged for disproportionate under-representation is shown as the short bar on the very left. The two vertical lines in the histogram represent the upper and lower cut-off for defining disproportionate representation.

The CDE is currently conducting additional analyses by race/ethnicity for the one AU that has reported disproportionate under-representation and will work with the AU administration on determining whether this was due to inappropriate identification in the spring of 2007.



**[(% Minority SPED) – (% Minority Total ED)]**

Overall, disproportionality does not appear to a major issue in Colorado. The AUs flagged in FY2005 for either Indicator 9 or Indicator 10 were for under-representation rather than over-representation, the latter of which is arguably the more pressing problem nationally. While one might argue that Colorado’s lack of apparent disproportionality is driven by a large number of AUs with small minority populations, this does not appear to be the case. As part of the analytic work for Indicators 9 and 10, the CDE specifically scrutinized data from Colorado’s largest AUs as well as medium to large AUs that have large Hispanic populations. This analysis showed that almost all comparisons to the total education population in that Unit were well under the +/- 20% threshold with most comparisons coming in under +/- 10%.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	0%
2006 (2006-2007)	0%
2007 (2007-2008)	0%
2008 (2008-2009)	0%
2009 (2009-2010)	0%
2010 (2010-2011)	0%

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Determine definition of disproportionate representation.	FFY 2006	Definition is available in this document .		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
2. Collaborate with stakeholder groups and Special Education Directors to assess and revise the disproportionality tools for Colorado AUs.	FFY 2007	It was determined that not enough tools were available to address disproportional representation.  Tools developed and implemented.	O			
3. Require identified agencies to complete the revised disproportionality analysis tools and submit to CDE.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	CDE completes the review in collaboration with AUs.  AUs are identified now with reports embedded in the 618 collection.	O			
4. Identify AUs that continue to show a high level of disproportionate representation and collaborate on the development of a remediation action plan.	FFY 2008 FFY 2009 FFY 2010	Trend data now exist that AUs with consistent disproportionate representation are being identified.  When citations for non-compliance are warranted, the AU is required to submit a corrective action plan and correct the issue.	O			
5. Compute baseline and targets for the FFY 2006 APR due February 1, 2007.	FFY 2007	This has now been completed and data are available above.		C		

**Resources Used to Support activities**

- Indicator 9/10 team
- General Supervision team
- Special Education Directors
- Data and Research Unit
- Information Management Systems staff

**Revisions for FFY 2007**

The CDE is revising and/or adding improvement activities to better reflect current practices. Improvement activities are being added to continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
1. Identify agencies with disproportionate representation and collaborate with AUs to identify root causes of disproportionate representation and provide technical assistance to improve practice.	Apply formula to 618 data. Embed formula into 618 data collection to alert AUs upon data submission of disproportionate representation. Implement tools for drill down. Identify resources to improve practice. Review implementation of corrective action .	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	Indicator 9/10 team Information Management Systems Unit Data and Research Unit General Supervision team
2. Incorporate requirements related to disproportionate representation in AU comprehensive plans to be submitted to the CDE.	Develop Comprehensive Plan template Train on Comprehensive Plan development.	FFY 2008 FFY 2009	General Supervision team
3. Expand RtI tools and website.	Add materials for English Language Learners, students in poverty, cultural sensitivity.	FFY 2008 FFY 2009	RtI Team English Language Learners with Exceptional Needs (ELLEN) team
4. Develop protocols for students living in poverty.	Develop standard protocols to be used in RtI and the universal tier to help address instruction for children living in poverty.	FFY 2009	RtI team ELLEN team
5. Collaborate with Title I, ELA and Title III units within CDE to provide technical assistance.	Determine key projects that can address concerns surrounding disproportionate representation.	FFY 2009	ELLEN team

## Part B State Performance Plan (SPP) for 2005-2010

## 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 # of districts in the State times 100.

Include State's definition of "disproportionate representation."

Describe how the State determined that disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification, *e.g.*, monitoring data, review of policies, practices and procedures under 618(d), etc.

February 2008 Update**State's definition of "disproportionate representation."**

As a result of OSEP's response to Colorado's FFY 2005 SPP/APR, two methods were developed between the Fall of 2007 and January 2008 to define "disproportionate representation". The methods for Indicator 10 are similar to those described under Indicator 9, except that 25 comparisons are conducted under each method for each AU rather than the 5 for Indicator 9. The 25 cells are the result of examining 5 disability categories by 5 race/ethnic categories. Also, the underlying approach to Indicator 10 is comparing the AU's prevalence of the 5 disability categories within each of the 5 race/ethnicity categories to the AU's prevalence of the 5 disability categories for the total SPED population, regardless of race/ethnicity. The cut points used for Indicator 10 are the same as those used for Indicator 9.

Both methods examine each of 5 race/ethnicity categories:

- 6) American Indian or Alaskan Native
- 7) Asian or Pacific Islander
- 8) Black (not Hispanic)
- 9) Hispanic
- 10) White (not Hispanic)

Both methods also examine each of five required disability categories (Colorado does not use the category "other health impairments" category):

- 1) Mental Retardation
- 2) Emotional Disturbance
- 3) Specific Learning Disabilities

- 4) Speech or Language Impairments
- 5) Autism

Method 1: This method examines every Administrative Unit's (AU) percent of SPED students in five disability categories within each race/ethnicity and compares these percentages to the percent of the AU's overall SPED population in each of the five disability categories. A cell size of at least 30 special education students within any given race/ethnicity and disability category was set as the minimum to perform a comparison. Disproportionate over-representation is defined as a discrepancy of 10 or more percentage points between a disability category within race/ethnicity and a disability category independent of race/ethnicity while under-representation is defined as a discrepancy of 15 or more percentage points.

Method 2: This method examines every AU's percent of all SPED students in the five disability categories and sets upper and lower bounds. The upper bound for the disability categories within each AU is computed by taking the total SPED percentages and multiplying each by 0.4 and then adding this result to the original percentages. Similarly, the lower bounds for the five disability categories in each AU is computed by taking the total SPED student percentages and multiplying by 0.5 and then subtracting this result from the original percentages. See the following table for an example.

**An Example of Setting Upper and Lower Bounds for an AU's Overall SPED Population**

	<b>Mental Retardation</b>	<b>Emotional Disturbance</b>	<b>Specific Learning Disability</b>	<b>Speech or Language Impairment</b>	<b>Autism</b>
<b>Percent In Total SPED Population</b>	5%	10%	36%	25%	3%
<b>Calculation for Upper Bound</b>	$(5 \times .4) + 5$	$(10 \times .4) + 10$	$(36 \times .4) + 36$	$(25 \times .4) + 25$	$(3 \times .4) + 3$
<b>Upper Bound Result</b>	7%	14%	50.4%	35%	4.2%
<b>Calculation for Lower Bound</b>	$5 - (5 \times .5)$	$10 - (10 \times .5)$	$36 - (36 \times .5)$	$25 - (25 \times .5)$	$3 - (3 \times .5)$
<b>Lower Bound Result</b>	2.5%	5%	18%	12.5%	1.5%

Upper and lower bounds are set for the five disability categories for every AU. If an AU's percent in a disability category within any given race/ethnicity exceeds the upper bound, the AU meets the definition of disproportionate over-representation. If an AU's percent in a



disability category within any given race/ethnicity is below the lower bound, the AUs meet the definition for disproportionate under-representation. A cell size of at least 30 special education students in any given disability category within each race/ethnicity category was set as the minimum to perform a comparison. Additionally, a difference of at least +/- 2% under Method 1 was set as a minimum before any result under Method 2 would meet the definition of disproportionate representation.

Overall, disproportionate representation in an AU for Indicator 10 is defined as having a discrepancy in disability prevalence between any of the 5 races/ethnicities and that AU's overall prevalence among the SPED population (regardless of race) under the thresholds set in either Method 1 or Method 2.

**Describe how the State determined that disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification, e.g., monitoring data, review of policies, practices and procedures under 618(d), etc.**

As described under Indicator 9, given the timing of Colorado's FFY 2006 Student Count and the need to develop a definition of disproportionality based on every race/ethnicity category rather than using "total minority", the State did not identify disproportionate AUs until January 2008 and is initiating in the process to review policies, practices and procedures in these AUs. This process will be completed by June 1, 2008.

Given the timing of Colorado's FFY 2006 Student Count and the need to develop a definition of disproportionality based on every race/ethnicity category rather than using "total minority", the State did not identify disproportionate AUs until January 2008 and is initiating the process to review the policies, procedures and practices in these AUs. This process will be completed by June 1, 2008.

#### Description of Colorado's Review Process

Colorado's process entails collaboration with targeted AUs to review their policies, procedures and practices:

- The review of written policies includes: (1) an examination of the AU's Board Policies which, for Boards of Cooperative Educational Services (BOCES), may include review of the School Board Policies of each of the BOCES' constituent school districts; and (2) a desk audit of the special education comprehensive plan that all AUs must submit to CDE.
- To evaluate procedures, CDE staff engages with the AU to examine various special education documents, including but not limited to the Procedural Handbook/Manual for the AU, the schedule and topics for professional development, and the Specific Learning Disability criteria implementation plan (using a Response to Intervention model) that must be submitted to CDE by 8/15/08 per state special education regulation.

If an on-site visit is necessary, CDE use the visit to observe the AU's practices related to special education eligibility. Activities to be engaged in during an on-site visit include direct observation of intervention team, referral team, and eligibility team meetings. Other activities may include direct interviews or focus group interviews of various stakeholder groups such as parents, general education teachers, special education teachers.

**Overview of Issue/Description of System or Process**

As discussed under Indicator 9, in FY2005, Colorado examined a number of different tools to define “disproportionate representation”. Most AUs in Colorado have quite small individual cell sample sizes when data is broken out by each ethnicity and the five primary disability categories used in Colorado’s calculation (Preschool with Disability, SLIC (Mental Retardation), SIED (ED), P/C (LD) and Speech/Language). Therefore, the CDE will use “Total Minority” rather than attempting to use specific races/ethnicities when flagging Units for disproportionate representation. The specific calculation for flagging significant disproportionate representation examines the difference between an individual Unit’s minority representation within each of the 5 disability category and compares it to the total minority population in that AU. If the difference in any of these 5 disability categories is greater than 20% of that Unit’s minority representation within the total education population, the Unit is also flagged for significant disproportionality. The CDE also requires a minimum individual cell sample size of 15 in any of the disability categories to consider exceeding +/- 20% of an AUs total education population as a reliable indication of significant disproportionality.

While the primary trigger for an AU to be flagged for significant disproportionality is the +/- 20% cut-off, the CDE also examines minority representation as a function of the proportion of an AU’s total education population that is considered minority. This calculation is conducted by taking a Unit’s percent of the total education population and multiplying it by 0.2. This result is then added to the total minority percentage to define an “Upper Bound” and also subtracted from the total minority percentage to form a “Lower Bound.” If a unit’s minority population within any one of the 5 SPED categories is outside of these bounds, the CDE conducts a more comprehensive assessment of the Unit’s race/ethnicity data to determine if there is evidence of disproportionate representation. While it is believed that this second method will rarely flag additional units as having significant disproportionate representation, it is useful for choosing which AUs race/ethnicity data warrants additional scrutiny. Also, because this second analytic method is shared with each AU every year, it is an important tool to allow Units to track their race/ethnicity trends over time and make appropriate adjustments in their own policies and procedures before they result in being designated by the CDE as having significant disproportionate representation.

The CDE continues to also work with disproportionality within the Continuous Improvement Monitoring Process, and as that system is updated in FY2006, additional tools and methods may be brought to bear to address this issue.

However, once an AU is flagged for significant disproportionality using either method and the data is verified, the CDE will conduct a thorough analysis of the AU’s data by individual race/ethnicity as well as all disability categories present at the AU. If the additional analytic work continues to point to a potential problem with significant disproportionality at the AU, the CDE will begin a drill-down on that Unit’s policies and procedures to determine whether the results are due to inappropriate identification. A Unit’s performance with regard to disproportionality as *a result of inappropriate identification* can also trigger a focused monitoring visit and ultimately a citation and sanctions if the citation is not corrected within the one-year timeline.

The CDE will continue to monitor the effectiveness of these systems to address disproportionality and will refine and/or bring in additional tools as needed as appropriate.

**Baseline Data for FFY 2004 (2004-2005)**

3.5% = 2 of AUs with disproportionate representation of racial and ethnic groups in specific disability categories divided by 57 of AUs in the State times 100. A total of 4 Units were originally flagged for disproportionality by disability category. However, additional analyses conducted, showed that disproportionality was not apparent for two AUs when the percent SPED minority within each of the 5 disability categories was compared to the percent SPED non-minority within each of the same categories. The apparent disproportionality in the other two AUs remained after conducting the additional analytic work.

**Discussion of Baseline Data**

One AU reached the definition of disproportionate representation for under-representation in SIED (ED) and nearly meets the definition for under-representation of PC(LD), and Preschool with disability.

The second AU reached the definition of disproportionate representation for under-representation in SIED (ED).

The CDE is currently conducting additional analyses by race/ethnicity for these two AUs and will work with the AU administrations on determining whether these were due to inappropriate identification in the spring of 2007.

Nine additional AUs met the threshold of +/- 20 discrepancy from the percent minority for total education population, but did not meet the minimum cell size requirements for the discrepant disability categories.

Overall, disproportionality does not appear to a major issue in Colorado. The AUs flagged in FY2005 were for under-representation rather than over-representation, the latter of which is arguably the more pressing problem nationally. While one might argue that Colorado's lack of apparent disproportionality is driven by a large number of AUs with small minority populations, this does not appear to be the case. As part of the analytic work for Indicators 9 and 10, the CDE specifically scrutinized data from Colorado's largest AUs as well as medium to large AUs that have large Hispanic populations. This analysis showed that almost all comparisons to the total education population in that Unit were well under the +/- 20% threshold with most comparisons coming in under +/- 10%.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	0%
2006 (2006-2007)	0%
2007 (2007-2008)	0%

FFY	Measurable and Rigorous Target
2008 (2008-2009)	0%
2009 (2009-2010)	0%
2010 (2010-2011)	0%

**Improvement Activities/Timelines/Resources:**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Determine definition of disproportionate representation.	FFY 2006	Definition is available in this document.		C		
2. Collaborate with stakeholder groups and Special Education Directors to assess and add or adjust, as needed, the disproportionality tools for Colorado AUs.	FFY 2007	It was determined that not enough tools were available to address disproportionate representation.  Tools developed.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
3. Require identified agencies to complete the revised disproportionality analysis tools and submit to CDE.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	CDE still completes the review. AUs are identified now with reports embedded in the 618 collection.	O			
4. Identify those agencies that continue to show a high level of inappropriate identification and collaborate on the development of a remediation action plan.	FFY 2008 FFY 2009 FFY 2010	Enough trend data now exist that AUs with consistent issues are being identified. When citations for non-compliance are warranted, the AU is required to submit a corrective action plan and correct the issue.	O			
5. Compute baseline and targets for the FFY 2006 APR due February 1, 2007.	FFY 2007	This has now been completed and data are available above.		C		

**Resources Used to Support Activities**

- Indicator 9/10 team
- General Supervision team
- Special Education Directors
- CDE Data and Research Unit
- CDE Information Management Systems staff

**Revisions for FFY 2008**

The CDE is revising and/or adding improvement activities to better reflect current practices. Improvement activities are being added to continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
1. Identify agencies with disproportionate representation and collaborate with AUs to identify root causes of disproportionate representation and provide technical assistance to improve practice.	Apply formula to 618 data. Embed formula into 618 data collection to alert AUs upon data submission of disproportionate representation. Implement tools for drill down. Identify resources to improve practice. Review implementation of corrective action.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	Indicator 9/10 team Information Management Systems Unit Data and Research Unit General Supervision team
2. Incorporate requirements related to disproportionate representation in for AU comprehensive plans to be submitted to the CDE.	Develop Comprehensive Plan template. Train on Comprehensive Plan development.	FFY 2008 FFY 2009	General Supervision team
3. Expand RtI tools and website.	Add materials for English Language Learners, students in poverty, cultural sensitivity.	FFY 2008 FFY 2009	RtI Team ELLEN team
4. Develop protocols for instruction for students living in poverty.	Develop standard protocols to be used in RtI and the universal tier to help address the instruction for children living in poverty.	FFY 2009	RtI team ELLEN team
5. Collaborate with Title I, ELA and Title III units within CDE to provide technical assistance.	Determine key projects that can help address concerns surrounding disproportionate representation.	FFY 2009	ELLEN team

## Part B State Performance Plan (SPP) for 2005-2010

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

For FFY 2008 the measurement for Indicator 11 was changed. The Indicator now reads:

**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.

**Measurement:**

- a. 208 of children for whom parental consent to evaluate was received.
- b. Unknown # determined not eligible whose evaluations and eligibility determinations were completed within 60 days (or State established timeline).
- c. 176 determined eligible whose evaluations and eligibility determinations were completed within 60 days (or State established timeline = 45 school days).

Account for children included in a but not included in b or c: Appropriate extensions of the timeline due to extenuating circumstances, incomplete information in the student file, discrepancy between initiation of the IEP and the signature date, and the determination process being started just prior to summer break and not being completed until after the summer break. The number of days in excess of the 45-day timeline is not typically collected during the SRR process.

84.6% = 176 + 0 divided by 208 times 100.

**Overview of Issue/Description of System or Process**

For information on the selection of Administrative Units for monitoring, see Indicator 15.

Colorado has had a requirement for evaluation timelines for some time. The timeline is 45 school days from consent for the collection of additional data to the determination of eligibility. If there are extenuating circumstances and both the Administrative Unit and parent agree, the timeline can be extended in order to ensure appropriate and sufficient information has been collected. Through Colorado's CIMP, a random selection of files is reviewed every year. This timeline is one factor that is examined for each file. If an

Administrative Unit has a problem meeting this 45 day timeline, they are cited as out of compliance and must correct the problem within 1 year. This system for gathering this data is already in place in Colorado. However, the Colorado data collection system via monitoring collects data on both initial and reevaluations and is based on the review of files of children found eligible for special education services.

February 2007 Update: Colorado continues to collect compliance with the 45-day timeline within the CIMP process using the Student Record Review process. Because this process entails the review of files for students who were found eligible for services, Colorado does not have data on component “b” of the measurement: the # determined *not* eligible whose evaluations and eligibility determinations were completed within 45 days. By fall of 2007, the CDE intends to include data collection for all pieces of this indicator as part of its redesign of the End-of-Year report. Data from the new system on this indicator will be available for Colorado’s FFY2007 Annual Performance Report. This will allow the CDE to base the results on the basis of census data rather than drawing a yearly representative sample. Targets will be adjusted accordingly at that time. In the interim, the CDE will continue to use the SRR for reporting on performance with regard to the 45 day timeline for 1 more year.

February 2010 Update: Colorado’s updated Rules (for the) Administration of the Exceptional Children’s Educational Act (Rules) went into effect December 30, 2007. These Rules provided better alignment with the Federal Regulations for the Individuals with Disabilities Education Improvement Act of 2004. This Rules change now requires that initial evaluations are completed within 60 calendar days of the AU/SOP receiving written consent from the parent(s). Data for this indicator are collected on the Special Education End of Year data collection.

**Baseline Data for FFY 2005 (2005-2006)**

84.6%

**Discussion of Baseline Data**

In FY2005, 1,060 files from nine AUs were reviewed. 208 of these files reviewed Initial IEP meetings where parental consent to evaluate was received.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%



FFY	Measurable and Rigorous Target
2009 (2009-2010)	100%
2010 (2010-2011)	100%

**Improvement Activities/Timelines/Resources:**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Collect data on reasons for delays in evaluation timeline.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	Reasons for delay are coded in end of year (EOY) data collection; data analysis conducted by CDE in collaboration with AU.	O			
2. Communicate to AUs that summer break is not an acceptable delay of the evaluation timeline.	FFY 2006	Training provided to AU Directors.		C		
3. Add Indicator 11 data collection elements to the ESLU's EOY student data collection system.	FFY 2006	Indicator 11 data elements were added to EOY student data collection.		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
4. Provide technical assistance on the evaluation timeline during the End-of-Year Training Process.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	Training incorporated into process as described.	O			
5. Utilize AU level data in the annual local determination process and report in the individual AU public reports.	FFY 2006 FFY 2007 FFY 2008 FFY 2009	Annual Determinations included Indicator 11 data; public reports are available on the CDE website at <a href="http://www.cde.state.co.us/cdesped/AUperformancprofiles.asp">http://www.cde.state.co.us/cdesped/AUperformancprofiles.asp</a> .	O			
6. Build a reporting process that calculates and displays each AU's compliance rate with the evaluation timeline at the time of the AU's submission.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	ESLU collaborates with DSU and IMS to review and revise reports that AU Special Education Directors review prior to final approval of data. Special Education Directors sign and submit reports that verify the validity and reliability of data.	O			
7. Develop procedures developed based on IDEA, ECEA and OSEP's Related Requirements document to assist AUs to identify root causes of delays in timely completion of initial evaluations.	FFY 2007	Protocols developed and Directors trained during fall Statewide Directors' Meeting.		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
8. Review and revise allowable reasons for delay.	FFY 2008	Reason codes were reviewed and only allowable reason codes are included in the data collection.		C		

Improve review of policies, procedures and practices at the AU level

**Resources Used to Support Activities**

- CDE RtI team
- ESLU General Supervision team
- ESLU Indicator 11 team
- CDE Data and Research Unit

**Revisions for FFY 2008**

An improvement activity that more accurately reflects current practice has been added and is displayed in the following table.

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
1. Improve review of policies, procedures and practices at the AU level.	<p>Review and revise Indicator 11 drill-down materials (current version is posted at</p> <p><a href="http://www.cde.state.co.us/cdesped/SPP_TrainingMaterials.asp">http://www.cde.state.co.us/cdesped/SPP_TrainingMaterials.asp</a></p> <p>Collaborate with AUs to conduct review of data and analyze root cause(s) for delays in completion of initial evaluations.</p> <p>Provide training to AUs to engage in ongoing evaluation of policies, procedures and practices.</p>	FFY 2009 FFY 2010	Indicator 11 Team General Supervision Team AU staff

## Part B State Performance Plan (SPP) for 2005-2010

## 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 eligibility determination.
- b. # of those referred determined to be NOT eligible and whose eligibilities were determined prior to their third birthdays.
- c. # of those found eligible who have an IEP developed and implemented by their third birthdays.

Account for children included in a but not included in b or c. Indicate the range of days beyond the third birthday when eligibility was determined and reasons for the delays.

Percent = c divided by a – b times 100.

**Overview of Issue/Description of System or Process**

The early intervention system, including their LEA partners, completed compliance requirements under a Federal compliance plan for timely 0-3 transitions June 2005. Local early childhood systems (the local Part C coordinator, early intervention CCB director, Child Find and LEA personnel at a minimum in each community) all participated in a thorough review of transition requirements under IDEA between September 2004-November 2004 and submitted a joint analysis of transition processes and compliance plan to assure compliance with IDEA transition requirements by June 2005, including notification, IFSP planning and timelines.

Local early childhood systems have refined their transition processes and procedures to achieve timely transitions, create plans with all necessary steps and services included, notify the LEA so as to enable them to be part of the planning process and documenting the process. All local Early Childhood interagency groups have written transition agreements which include policy and procedures for timelines, notification, transition planning and plans. They are all aware and informed of the requirements for 100% compliance targets.

At the time of this report, Colorado does not have data on Part "c" of this indicator. While the CDE is currently able to count the number of students that have an IEP developed by their third birthday, it is not possible to back out the number of newly identified children as opposed to children that were served by Part "c". The development of SASID tracking numbers for Part "c" students would remediate this problem, but a number of challenges exist. Regardless of these challenges, a new system for collecting Part "c" will be developed in spring 2006 and will be more fully articulated with baseline and targets in our next APR due February 2007.

Currently, if an Administrative Unit is going through the CIMP process, a stratified sample of young children with IEPs is reviewed. If the child was served by Part C previously, the timeline for IEP development by the child's 3<sup>rd</sup> birthday is examined and if there are problems, they are brought to the attention of the Unit and the Part C provider. Unfortunately, for most of the Administrative Units that have gone through CIMP, the number of files that have been selected where children did not participate in Part C has been so small that the data cannot be used at the state level to utilize in the decision making process or to assess trends over time.

*February 2007 Update:* The Colorado Department of Education (CDE) Early Childhood Special Education staff continues to support LEA personnel as they transition children from the birth to three system into public school preschool services. In January 2006, the lead agency for Part C of IDEA was changed. CDE formed a partnership in spring 2006 with the National Early Childhood Transition Center (NECTC), an OSEP funded project. CDE staff continued to provide planned training and technical assistance to LEA and birth to three agencies through the spring of 2006.

Support for LEAs from CDE Early Childhood Special Education staff continues through on-going technical assistance and a targeted training initiative in partnership with the NECTC. In a summer/fall 2006 survey, LEAs indicated a strong, statewide need for support in the area of transition practices. Spring and fall 2006 CIMP monitoring (4 LEAs or Administrative Units) revealed planning and evaluation for eligibility timelines were being met, however, IEP review indicated that the transition plan was not always individualized or specific. This input helped inform the work of CDE in developing the partnership project with the NECTC.

#### **Baseline Data for FFY 2004 (2004-2005)**

- a. 1,659 children were referred to Part B for eligibility determination.
- b. 223 children or 11.6 % of the total referred were determined NOT eligible for Part B. There were 69 children or 4.2% for whom eligibility was not established or confirmed. 54 children were over the age of 3 years when they transitioned to Part B
- c. No data is available detailing the # of Part B eligible children who had an IEP developed and implemented by their 3<sup>rd</sup> birthday.

#### **Discussion of Baseline Data**

Baseline data for items "a" and "b" is derived from the Part C Statewide Data Report for 12.1.04 which utilized local database information. Intensive work was done at the state and local level to analyze the state and local issues contributing to non-compliance on the transition process. The state developed training and technical assistance materials and provided training statewide. Data for Part "c" is not currently collected. A process for collecting this information will be implemented in FFY2006.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Conduct critical appraisal of current data systems' ability to address this indicator.	FFY 2006	Indicator 12 data elements were added to the EOY student data collection.		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
2. Continued training and technical assistance provided by the CDE to AUs.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	Training for data collection and interpretation of data results is provided with EOY data training in eight regions across the state.	O			
3. Training and technical assistance from CDE state staff for both Part C and Part B local teams continue to focus on compliance with transition and eligibility timeline requirements.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	Both lead agencies provide technical assistance on transition on an ongoing basis.  State Child Find Responsibilities were laid out for Part C and Part B agencies and can be found at:  <a href="http://www.cde.state.co.us/early/downloads/CHILDFIND/DHS-CDEJoinCFMemo.pdf">http://www.cde.state.co.us/early/downloads/CHILDFIND/DHS-CDEJoinCFMemo.pdf</a> .	O			
4. Convene meetings with Part C and Part B staff to remediate any shortcomings identified in # 1 above.	FFY 2007	Data systems for Part C and Part B are in place to address the SPP requirements.		C		
5. Statewide training for child find teams on transition compliance indicators.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	The CDE meets with child find coordinators and early childhood teams twice annually.  Communication is disseminated via listserve on a monthly basis.  Technical assistance is provided by the CDE and Part C as requested.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
6. Data collection strategies developed to establish baseline data for measurement "c" - # of eligible children with an IEP established and implemented by third birthday.	FFY 2006	Baseline data are available in the SPP.		C		
7. Continued data collection and analysis.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	The Indicator 12 team has developed self-assessment tools to determine root causes of delay.  Training was provided to all AU Special Education Directors at meeting in fall 2008.  The Indicator 12 team conducts reviews of data for AUs.	O			
8. Implement additional data collection mechanisms.	FFY 2008	The clarification of IEP implementation date will be corrected with FFY 2008 EOY student collection.		C		
9. Collected data on reasons for delays in Part C to Part B transitions.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	This element has been added to the EOY student data collection.  Technical assistance is provided for AUs using the data on reasons to help identify root causes of delays.	O			
10. Included AU level Indicator 12 data in the annual determination process and in public reports.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	Annual Determinations included Indicator 12 data; public reports are available on the CDE website at <a href="http://www.cde.state.co.us/cde/sped/AUperformanceprofiles.aspx">http://www.cde.state.co.us/cde/sped/AUperformanceprofiles.aspx</a> .	O			



Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
11. Built a reporting process that calculates and displays each AU's compliance rate with the evaluation timeline at the time of the AU's submission.	FFY 2006 FFY 2007 FFY 2008 FFY 2009	Reports are produced when data collection closes; AU Directors sign report assuring validity and reliability of data.	O			
12. Disseminate research based transition practices to Part C and Part B systems.	FFY 2008	<p>Link to the National Early Childhood Transition Center is posted on the CDE Early Childhood Special Education website Transition page with specific transition-based transition practices:</p> <p><a href="http://www.hdi.uky.edu/NECTC/Home.aspx">http://www.hdi.uky.edu/NECTC/Home.aspx</a>.</p> <p>This information, along with other technical assistance documents, was disseminated via monthly early childhood electronic resources, statewide conference calls between both Part C and Part B (preschool) systems, and through CDE's official electronic weekly updates for school districts.</p>		C		

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
13. Provide training to PEAK Parent Mentors on early transitions.	FFY 2008	<p>Trained PEAK Parent Mentors and school district Child Find coordinators on Transition practices modules developed by the CDE.</p> <p>The modules are posted on the CDE Early Childhood website.</p> <p><a href="#">PowerPoint for Early Intervention to Part B Transitions</a></p> <p><a href="#">Guidelines for Transition from Early Intervention (Part C) to Preschool (Part B)</a></p>				
14. Revise EOY data collection to capture date that IEP is implemented.	FFY 2008	AUs were required to provide actual implementation dates in the collection for the 2008-2009 school year.		C		

**Resources Used to Support Activities**

- CDE Early Childhood Education Team
- ESLU General Supervision team
- ESLU Indicator 12 team
- CDE Data and Research Unit

**Revisions for FFY 2008**

An improvement activity is being added to reflect current practice and to continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

<b>Activity</b>	<b>Action Steps</b>	<b>Timeline</b>	<b>Resources</b>
1. Early Childhood Transition statewide conference (to include Part C, preschool and kindergarten personnel).	Identify content for, develop and conduct Early Childhood Transition conference.	June 2009	CDE Early Childhood staff  Other partners as appropriate

## Part B State Performance Plan (SPP) for 2005-2010

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

**Indicator 13:** Percent of youth aged 16 and above with an IEP that includes coordinated, measurable, annual IEP goals and transition services that will reasonably enable the student to meet the post-secondary goals.

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

**Measurement:**

Percent = # of youth with disabilities aged 16 and above with an IEP that includes coordinated, measurable, annual IEP goals and transition services that will reasonably enable the student to meet the post-secondary goals divided by # of youth with an IEP age 16 and above times 100.

**Measurement:**

2.1% = 22 youth with disabilities aged 16 and above with an IEP that includes coordinated, measurable, annual IEP goals and transition services that will reasonably enable the student to meet the post-secondary goals divided by 1,024 youth with an IEP age 16 and above times 100.

**Overview of Issue/Description of System or Process**

In Colorado we recognize the need for accurate data collection and continuous improvement of student outcomes. This data will be collected as part of our Continuous Improvement and Monitoring Program (CIMP). Although we have been collecting this data through CIMP and the Transition Outcomes Project, (TOPS) we have not used a random sampling strategy for the data collection. We will now include sample selection for all monitoring activities by stratified random sampling. The stratification is based on disability, grade, and school site with an appropriate number of students in the mandated transition range included in the sample. We will use the TOPS process as a means of providing technical assistance to districts with compliance issue in the areas of transition. That data will then be used to determine if districts corrected the concerns in one year.

In order to implement this change we have:

- Reviewed current systems of data collection used for general education and special education federal and state mandates, including moving to an End of Year reporting system rather than a December to December reporting system.
- Analyzed transition data through the Transition Outcomes Project and the Continuous Improvement Monitoring Process to determine the connection and issue of effective transition planning on students' IEPs.
- Reviewed current data on student performance for students on IEPs.

- Worked across units at the Colorado Department of Education to increase awareness and integrate efforts.
- Participated in the NCSET National Transition Summit.
- Participated in National Drop-out Prevention Center for Students with Disabilities telephone seminars and conference calls.
- Discussed information on transition and post-school outcome data collection with the Colorado Special Education Advisory Committee (CSEAC).
- Worked on building capacity among transition coordinators throughout Colorado's eight regions.

*February 2007 Update:* In FFY2005, the CDE decided *against* collecting data for Indicator 13 through CDE's CIMP and TOPs systems as described above. It was decided that the data collected through these existing systems did not meet the level of rigor deemed necessary with respect to this measurement requirements to adequately report on this Indicator. Therefore, the ESSU of the CDE contracted with Cutting EdJ which utilizes the National Secondary Technical Assistance Center's (NSTTAC) Indicator 13 checklist approved by OSEP as a rigorous, valid and reliable tool to assess performance on this Transitions Planning Indicator (see Exhibit A for Indicator 13 for a copy of the review protocol in use and assessment criteria). CDE's Indicator 13 file review team received extensive training so that they strictly adhere to the data collection methodology and review benchmarks outlined by NSTTAC. Only those IEPs that demonstrate compliance with all six elements of the checklist are considered to have fully met the requirements of this Indicator.

As part of the contract with Cutting EdJ, the CDE utilizes all the functionality of the Web-based support provided for data entry, assessment and dissemination to participating AUs. The standard reporting systems built into the Cutting EdJ Website allows for the timely and user-friendly development of AU level results for each item of the NSTTAC review checklist as well as total score so that local agencies can readily utilize this information in future planning activities.

#### **Baseline Data for FFY 2005 (2005-2006)**

2.1% of youth with disabilities aged 16 were deemed to have an IEP that includes coordinated, measurable, annual IEP goals and transition services that will reasonably enable the student to meet the post-secondary goals.

#### **Discussion of Baseline Data**

##### *FY2005 Sample Characteristics*

A total of 14 AUs from geographically varied areas of the state were included in the FFY2005 sample. The AUs sampled also included AUs that varied in size demographic composition. The table on the next page provides a comparison on key characteristic between the AUs in the sample and state overall. As seen in the table, with the exception of somewhat inflated percentages of Hispanic and Total Minority populations, the AUs in the sample mirror the state percentages rather well.

For each AU in the FY2005 sample, a random sample of IEPs for students that were 16 years old or above were selected for review. For each AU, 15% of these IEPs, with a minimum of 50, were randomly selected for a total of 1,024.

<b>Characteristic</b>	<b>AUs in Sample</b>	<b>State</b>
<b>% SPED Within Total Education Population</b>	<b>11.5%</b>	<b>10.6%</b>
<b>% ELL Within Total Education Population</b>	<b>14.8%</b>	<b>12.8%</b>
<b>% LD Within SPED Population</b>	<b>37.5%</b>	<b>36.5%</b>
<b>% ED within SPED Population</b>	<b>10.7%</b>	<b>10.0%</b>
<b>% MR within SPED Population</b>	<b>5.0%</b>	<b>4.2%</b>
<b>% Speech/Language within SPED Population</b>	<b>22.3%</b>	<b>24.8</b>
<b>% All Other Disabilities within SPED Population</b>	<b>24.5%</b>	<b>24.7%</b>
<b>% Female</b>	<b>32.8%</b>	<b>32.3%</b>
<b>% Hispanic within SPED Population</b>	<b>33.3</b>	<b>26.6%</b>
<b>% Total Minority within Sped Population</b>	<b>46.6%</b>	<b>38%</b>
<b>% of SPED Population that was 15 years old or older.</b>	<b>24.0%</b>	<b>23.4%</b>
<b>% Drop-outs within Total SPED Population (Divisor is all SPED Students)</b>	<b>3.2%</b>	<b>3%</b>

*Discussion of FY2005 Baseline Data Results*

The Indicator 13 review team (comprised of 2 CDE staff and 7 independent contractors) has concluded the following upon completion of the first year of Indicator 13 file review data. First, there are some sites that seem to document transition services better than others; this typically occurred in rural or small districts, we assume this is a result of having fewer teachers to train and thus having stronger cohesiveness within AU practices. Second, the review team is certain that many more transition activities and services are being provided within schools to students than can be gleaned from the IEP documentation alone. Third, some sites evaluated had insufficient forms that would prompt the IEP author to include critical data for transition planning such as a section dedicated to the Post School Goals, Transition Services, or Transition Assessment. Such deficiencies are clearly a major contributor to the lack of transition documentation found within IEPs. Fourth, in many cases (approximately 1/3 of IEPs reviewed) a complete lack of Post School Goals was present thus indicating an absence of the fundamental understanding of IDEA 2004 transition requirements. For a significant portion of IEPs that did have Post School Goals (measurable or not), it also was apparent that the understanding of the term “coordinated set of activities” was unclear. A vast majority of IEPs did not connect all the elements of the checklist and thus led the team to conclude that a large gap in the fundamental understanding of transition services and their purpose was neglected. Fifth, the team noted that very few IEPs indicated linkages with Adult Service agencies, leading the team to be further convinced transition planning has

been neglected. Lastly, the team felt that the requirement to measure “if consent was provided prior to inviting agencies” was an unfair benchmark and may have contributed to some of the noncompliant conclusions. This latter requirement was not publicly evident until the final IDEA 2004 regulations were provided in Sept of 2006, and thus it was not possible to account for this benchmark prior to that date. Also the requirement that Post School Goals be updated annually and be based upon age appropriate transition assessment also undermined the reporting of positive results. AUs were informed that they would be held harmless by not implementing all the requirements of IDEA 2004 until the final regulations were available, thus AUs did not move forward with this, and CDE did not provide statewide training on the assessment issue until fall of 2006. This requirement most certainly contributed to such a low baseline rate.

Some positive aspects of the data obtained include that finding that Colorado’s state IEP form enables review for the Indicator 13 elements in an efficient way. Many small AUs had very good data and will be able to meet the full indicator with minor adjustments to practice and IEP authoring. Most of the AU Special Education Directors were very receptive to the overall results and looked forward to making changes to do better in the future. Most of all, this process has ignited new energy to the conversations related to transition and will undoubtedly contribute to meaningful change in the future.

It is important to note that although Colorado used a tool that is rigorous and may have seemed overly stern to many in the field, the CDE remains confident that NSTTAC checklist is appropriate for assessing performance with regard to Indicator 13. All of the questions posed within the checklist cumulatively and appropriately answer the underlying Indicator question and are all essential elements to both meeting the minimal requirements of the reauthorization and in effectively planning transitions for youth.

It is also important to note that although this checklist did measure for two elements we had not provided professional development and training for and because they were only released in the Federal IDEA Regulations released in September 2006, a significant portion of the files neglected transition planning all together. The CDE has developed a list of six main issues that were discovered from the collection of baseline data on this indicator that it will use in planning technical assistance and communications with AUs in both the short- and long-tem.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%

FFY	Measurable and Rigorous Target
2009 (2009-2010)	100%
2010 (2010-2011)	100%

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Utilize Indicator 13 review team to provide direct instruction and technical assistance.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	Contracted team members provide training to any AU who requests it.	O			
2. Provide TOPs Lite transition training.	FFY 2007 FFY 2008 FFY 2009	Training is provided when requested. TOPs Lite covers more than just Indicator 13 checklist requirements.	O			
3. Host Transition Leadership Institute with support of National Secondary Transition Technical Assistance Center (NSTTAC).	FFY 2006 FFY 2007 FFY 2008	Two summer institutes have been offered with almost all AUs participating. Plans are proceeding for 3 <sup>rd</sup> institute summer 2009.	O			



Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
4. Revise state recommended IEP forms to ensure all IDEIA 2004 transition requirements are clearly prompted.	FFY 2006	IEP forms revised.		C		
	FFY 2007	Training for all AUs occurred summer 2008.				
5. Provide technical assistance and training via online tools, regional and local opportunities.	FFY 2007	Modules are in development.	O			
	FFY 2008	Regional trainings occur through regional cadre meetings.				
	FFY 2009					
	FFY 2010	Cadre meetings are videotaped and made available to teams who cannot attend.				
6. Continue to work collaboratively with the institutions of higher education of Colorado to ensure pre-service instruction is commensurate with IDEIA 2004 regulations and requirements.	FFY 2006	Faculty in higher education have been made aware of what training could look like and curriculum materials have been shared.	O			
	FFY 2007					
	FFY 2008					
7. Collaborate with Colorado Community College System (CCCS) and Career and Technical Education (CTE) of Colorado to maximize postsecondary education opportunities for youth with disabilities.	FFY 2008	Secondary Services Team member will coordinate with the Governor appointed workgroup reviewing and recommending State Content Standards and accompanying assessments.	O			
	FFY 2009					
	FFY 2010					

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
8. Consider adopting workplace readiness standards as part of the Colorado State Content Standards required for all Colorado Students.	FFY 2008 FFY 2009 FFY 2010	The CDE has contracted with the SWRCC at WestEd to review and analyze the Colorado Model Content Standards including review of major definitions related to College Readiness, and Career/Postsecondary Readiness; Secondary Services team member will coordinate with the workgroup.	O			
9. Include transition skills in a working curriculum for all students and infusing transition activities and education into the intervention toolbox associated with RtI for all secondary students.	FFY 2008 FFY 2009 FFY 2010	Secondary Services team member will be assigned to RtI workgroup.  Team will review RtI materials and training opportunities.	O			
10. Provide material review and IEP form consultation as AUs are revising IEP forms.	FFY 2006 FFY 2007	Consultation was available to any AU requesting help designing IEP forms that were not using the state recommended form.		C		
11. Provide training through the Eligible Facilities JADe trainers to ensure all eligible facilities staff are able to appropriately address Indicator 13.	FFY 2006 FFY 2007 FFY 2008 FFY 2009	Staff from each eligible facility have been trained.	O			
12. Collaborate with NSTTAC to further the CDE's understanding and practice.	FFY 2007 FFY 2008	Attended conferences in: Oklahoma, North Carolina, Utah (with MPRRC).  Attended planning institutes.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
13. Utilize of AU staff to review IEPs as part of Indicator 13 record review.	FFY 2008 FFY 2009 FFY 2010	Staff are trained by review team prior to review. This allows for teams to build their capacity.	O			
14. Partner with DVR to enhance School to Work Alliance Program (SWAP).	FFY 2008 FFY 2009 FFY 2010	State and local partners identified ways SWAP teams can collaborate with schools to improve transition assessment planning, and work-based opportunities.	O			

**Resources Used to Support Activities**

- CDE staff
- Contracted vendors
- Local AUs/SOPs
- Cutting EdJ
- NSTTAC

**Revisions for FFY 2008**

The CDE is revising and/or adding improvement activities to better reflect current practices. Improvement activities are being added to continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
<p>1. Development of <i>Indicator 13 Compliance Tips</i> based on comments written for each of the 1,695 IEPs reviewed fall, 2008.</p>	<p>First three <i>Tips</i> addressed first three questions of I-13 checklist.</p> <p>Emailed and mailed to 32 AUs that participated in I-13 Fall, 2008 data collection, 11/24/08, to assist in individual IEP correction.</p> <p>Will create similar resource for remaining three I-13 questions and electronically distribute statewide.</p>	<p>FFY 2008</p>	<p>Secondary Services team</p>
<p>2. Increase support for transition planning from High School Administrators.</p>	<p>Revise materials applicable to Administrators.</p> <p>Present at Administrator Conferences and workgroups.</p> <p>Place informational articles in the CDE newsletter that goes to all school Administrators.</p>	<p>FFY 2008</p>	<p>Secondary Services team</p> <p>Contract I-13 review team</p> <p>AU transition leaders</p>
<p>3. Develop I-13 Manual designed for use by both AUs and I-13 File Review Team Members to demonstrate consistency and transparency and detail the review process, compliance tips, and available resources.</p>	<p>Create a draft.</p> <p>Solicit feedback from stakeholders: CDE staff, I-13 file review team members, AU transition team leaders and members.</p> <p>Revise based on feedback.</p> <p>Share final copy electronically statewide.</p>	<p>FFY 2008</p>	<p>Secondary Services team</p> <p>Contract I-13 review team</p> <p>AU transition leaders</p>

## Sampling Plan:

**Special Education Student Sampling Table for Indicators 13**

**Indicator 13: Secondary Transition with IEP Goals:** Percent of youth age 16+ with IEP with measurable post school goals, measurable annual IEP goals that clearly align with the post school goals, and transition services to help the student move toward the post school goals.

Indicator 13 data is collected through student file reviews in the fall based on the previous year's December count. For ease of understanding, this chart has been revised using school year rather than federal fiscal year. **Discard any previous versions you may have of this chart.**

In the table below, the **highlighted** cells indicate the **school year** an administrative unit (AU) or state operated program (SOP) is to be sampled for Indicator 13. AUs with total student enrollment of 50,000+ will be sampled annually. If, after the initial sampling the AU/SOP is found to be out of compliance, it will be subject to verification reviews until found to be in substantial compliance with the requirements of Indicator 13.

		Pilot Sample Year	Year 1	Year 2	Year 3	Year 4	Year 5
	Indicator 13 Collection Year (file review)	2006-07 from Dec '05 count	2007-08 from Dec '06 count	2008-09 from Dec '07 count	2009-10 from Dec '08 count	2010-11 from Dec '09 count	2011-12 from Dec '10 count
01010	Adams 1, Mapleton				X		
01020	Adams 12, Northglenn						X
01030	Adams 14, Commerce City		X				
01040	Adams 27 J, Brighton					X	
01070	Adams 50, Westminster	X		X			
03010	Arapahoe 1, Englewood			X			
03020	Arapahoe 2, Sheridan		X				
03030	Arapahoe 5, Cherry Creek		X	X	X	X	X
03040	Arapahoe 6, Littleton		X				
03060	Adams-Arapahoe 28J, Aurora			X			
07010	Boulder RE-1J, St. Vrain			X			
07020	Boulder RE-2, Boulder Valley					X	
15010	Delta 50J			X			
16010	Denver 1		X	X	X	X	X

**SPP Template – Part B (3)**

**Colorado**

		<b>Pilot Sample Year</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>	<b>Year 5</b>
	<b>Indicator 13 Collection Year (file review)</b>	<b>2006-07 from Dec '05 count</b>	<b>2007-08 from Dec '06 count</b>	<b>2008-09 from Dec '07 count</b>	<b>2009-10 from Dec '08 count</b>	<b>2010-11 from Dec '09 count</b>	<b>2011-12 from Dec '10 count</b>
18010	Douglas RE-1		X	X	X	X	X
21020	El Paso 2, Harrison			X			
21030	El Paso 3, Widefield	X			X		
21040	El Paso 8, Fountain	X			X		
21050	El Paso 11, Colorado Springs				X		
21060	El Paso 12, Cheyenne Mountain						X
21080	El Paso 20, Academy				X		
21085	El Paso 38, Lewis Palmer					X	
21090	El Paso 49, Falcon		X				
21490	Fort Lupton/Keenesburg						X
22010	Fremont RE-1, Canon City		X				
26011	Gunnison RE-1J					X	
30011	Jefferson R-1		X	X	X	X	X
35010	Larimer R-1, Fort Collins	X		X			
35020	Larimer R-2J, Loveland						X
35030	Larimer R-3, Estes Park			X			
38010	Logan RE-1, Sterling	X			X		
39031	Mesa 51, Grand Junction		X				
41010	Moffat RE-1, Craig	X			X		
43010	Montrose RE-1J		X				
44020	Morgan RE-3, Fort Morgan					X	
51010	Pueblo 60, Urban		X				
51020	Pueblo 70, Rural		X				
62040	Weld RE-4, Windsor		X				
62060	Weld 6, Greeley					X	
64203	Centennial BOCES						X
64043	East Central BOCES	X		X			
64053	Mount Evans BOCES				X		

**SPP Template – Part B (3)**

**Colorado**

		<b>Pilot Sample Year</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Year 4</b>	<b>Year 5</b>
	<b>Indicator 13 Collection Year (file review)</b>	<b>2006-07 from Dec '05 count</b>	<b>2007-08 from Dec '06 count</b>	<b>2008-09 from Dec '07 count</b>	<b>2009-10 from Dec '08 count</b>	<b>2010-11 from Dec '09 count</b>	<b>2011-12 from Dec '10 count</b>
64093	Mountain BOCES					X	
64103	Northeast BOCES						X
64123	Northwest BOCES					X	
64133	Pikes Peak BOCES						X
64213	Rio Blanco BOCES						X
64143	San Juan BOCES					X	
64153	San Luis Valley BOCES		X				
64160	Santa Fe Trail BOCES	X			X		
64163	South Central BOCES			X			
64193	Southeastern BOCES					X	
64083	Southwest BOCS				X		
64200	Uncompahgre BOCS	X		X			
64205	Ute Pass BOCES						X
80010	Charter School Institute					X	
66050	CSDB		X				
66080	Division of Youth Corrections				X		

## Part B State Performance Plan (SPP) for 2005-2010

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

**Indicator 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 both, within one year of leaving high school.

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

**Measurement:**

44.2% = 145 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 both, within one year of leaving high school divided by 328 of youth assessed who had IEPs and are no longer in secondary school times 100.

**Overview of Issue/Description of System or Process**

At the end of the 2005-2006 school year, school districts were required to fill out a post-school outcomes exit survey for each student with an IEP who exited that year. All youth with IEPs who exited high school were included in the sample, including those who graduated, dropped out, aged out, graduated with a modified diploma or certificate of completion, and those who moved and were not known to be continuing. The survey asked for the student's exit reason, transition goals and services provided, and student and family contact information. The contact information collected on this survey was used to contact students in the summer of 2007 to follow up on their progress a year after exiting high school.

**Sampling Process**

School districts across the state provided ESLU-CDE with exit survey data on a total of 1,836 students with IEPs who had exited high school in 2005-2006. Contact information was provided to a third-party evaluation vendor, OMNI Institute, in two MS Excel files from which to draw samples of students to participate in the one-year post-school exit survey. Prior to drawing the samples, OMNI cleaned data files and removed 160 students for whom no phone number or exit information was provided. A total of 1,676 students remained in the two files, from which the samples were drawn. The first file contained 1,343 students representing 43 districts across the state, while 333 students were compiled in a separate file containing three large, urban districts. Three sequential samples were drawn from the pool of 1,343 students, yielding a final sample population of 895 students. Because the large, urban districts were likely to contain a higher proportion of minority and transient students, all 333 students were included in the calling sample in order to ensure that these students were adequately represented in collected data. Collectively, 1,228 student families were contacted to invite participation in the follow-up survey. This sample represented 73% of all exited students with contact information provided by local school districts.



**Data Collection**

OMNI research staff conducted the phone interviews from June through September 2007.

The sample of 1,228 students was contacted up to 3 times each. When interviewers reached a household member, they invited exited student participation in the phone survey. Two bilingual staff members were available to administer the phone survey in Spanish with Spanish-speaking households. Although interviewers attempted to speak to the student whenever possible, it was often a parent who completed the survey. If respondents reported that the student had returned to a high school program at the time of the interview, this information was documented and the interview was discontinued.

**Survey Sample Description**

As shown in the table below, phone surveys were completed with 339 participants or 37% of the total sampled. Of these participants, 11 indicated that the student had returned to school. Post-school outcomes were collected on a total of 328 students, who were no longer enrolled in secondary schools.

	<b>Number</b>	<b>% of Total Contacted</b>	<b>% of Successful Contacts*</b>
<b>Completed Surveys</b>	<b>328</b>	<b>27%</b>	<b>72%</b>
<b>Student had returned to school</b>	<b>11</b>	<b>.9%</b>	<b>2.4%</b>
<b>Refused Surveys</b>	<b>116</b>	<b>9%</b>	<b>25%</b>
<b>Total Successful Contacts</b>	<b>455</b>	<b>37%</b>	<b>100%</b>
<b>Wrong Numbers</b>	<b>375</b>	<b>30%</b>	<b>N/A</b>
<b>No answer</b>	<b>398</b>	<b>33%</b>	<b>N/A</b>
<b>Total Students Contacted</b>	<b>1228</b>	<b>100%</b>	<b>N/A</b>

\* *Successful contacts* = caller reached student or parent on the phone.

OMNI staff was unable to successfully reach one-third of the sample. Almost another third of the sample contained invalid contact information. Among those successfully reached, 25% of respondents refused to participate in the survey, (this number represented nine percent of the total sample). In addition, 70% of those successfully reached were parents, and only four phone surveys were administered in Spanish.

Additional work to assess the extent to which the AUs/districts that provided contact information represent the State as well as response rates within AUs will be conducted by June 1, 2008.

**Baseline Data for FFY 2004 (2004-2005)**

44.2%

**Discussion of Baseline Data****Competitive Employment Definition and Results**

“Competitive employment” was defined as work in a competitive setting for pay without support, employment in the military, or work in a family member’s home or business. Although the survey did not allow analysts to determine whether work in a family home or business was competitive, there were only four respondents who indicated this response. For the current effort, these participants were included with others defined as competitively employed. Based on this definition, survey results indicated that 57.6% (189) students with survey data were currently employed in a competitive setting.

Full- and part-time status of those currently employed in a competitive setting was examined. Colorado’s definition of full- and part-time work does not match the federal definition of 35 or more hours worked per week. Many Colorado employers define “full-time work” differently, as indicated by survey response categories. For the purposes of the 2007 survey, any respondent who worked over 30 hours per week was defined as a full-time worker. According to this definition, survey results indicated that 69% (131) of students with survey data worked over 30 hours/week, while 26% (49) worked under 30 hours/week. (Nine respondents did not know or refused to answer).

Survey results indicated that an additional 58 respondents had been employed in the past year but were not currently employed. It is unknown whether this employment met the standard definition of competitive employment.

**Education Definition and Results**

“Postsecondary education” was defined as enrollment in any educational or vocational training program, including employment training programs, vocational school, 2- and 4-year colleges, military training, and enrollment in studies while incarcerated. GED and life skills programs were not included in this definition.

Full- and part-time enrollment status was included in the survey, but this analysis was limited as full-time and part-time status was not specifically indicated by a total number of hours. Therefore the definition of full- and part-time enrollment may vary by respondent.

Survey results indicate that 44% (145) of respondents were currently enrolled or had been enrolled in some form of postsecondary education. 68% of these respondents (99) were enrolled full-time, while 29% (42) were enrolled part-time. (Four respondents refused to answer whether they attended full- or part-time).

Survey results also indicate that 26% (86) of respondents were both competitively employed and enrolled in a postsecondary education program.

**Limitations**

There were several limitations of the 2007 survey instrument that limited analyses:

- The survey did not accurately capture the federal definition of full-time work (35+ hours/week), nor did it specify full-time student enrollment hours.

- The survey did not specifically ask whether the respondent was paid minimum wage, therefore it could not be determined whether respondents who worked in a family members’ home or business were competitively employed.
- Furthermore, the survey did not measure whether past employment was in a competitive setting.
- Finally, neither the school exit survey used to select the sample nor the outcomes survey collected information on gender, ethnicity, and disability; therefore Colorado cannot describe the students in these terms or accurately conclude that the results are a representative sample of the state.

The survey will be adjusted to address these limitations during the 2008 data collection.

In addition, ESLU-CDE will work with local school districts to improve exit data, with particular focus on the collection of valid contact information. This work will improve the number of successful contacts and completed surveys, as 30% of the respondents contacted had disconnected or wrong numbers.

<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>2005 (2005-2006)</b>	<b>48%</b>
<b>2006 (2006-2007)</b>	<b>52%</b>
<b>2007 (2007-2008)</b>	<b>56%</b>
<b>2008 (2008-2009)</b>	<b>60%</b>
<b>2009 (2009-2010)</b>	<b>64%</b>
<b>2010 (2010-2011)</b>	<b>68%</b>

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Design an exit survey and data collection plan.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	The survey is reviewed annually and revised based on data.	O			
2. Identify all students with IEPs who have dropped out, graduated with a diploma or certificate of completion, or aged out.	FFY 2006 FFY 2007	Information included in EOY data collection for 2007.		C		
3. Gather post-school data on students identified as exiters during 2006-2007.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	Use OMNI for research or similar strategy to contact students each year.	O			
4. Build baseline of exit and post-school outcome data annually.	FFY 2006	Baseline data reported in SPP.		C		
5. Analyze data at state and AU level, continue to improve surveys and reports based upon data analysis; include integration into indicators 1, 2, and 13 of SPP.	Fall FFY 2007 and each fall thereafter	Data collection requirements and survey questions included in Indicator 13 training to support development of Measurable Post-school Goals and Annual Goals.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
6. Set annual and six year rigorous and measurable targets based upon baseline data.	Reviewed in FFY 2008	Targets established in SPP.		C		

**Resources Used to Support activities**

- ESLU Secondary Services Team
- AU Special Education Directors
- AU Data Managers
- OMNI Institute
- National Post-school Outcomes Center
- Secondary Services Contract staff

**Revisions for FFY 2007**

The CDE is revising and/or adding improvement activities to better reflect current practices. Improvement activities are being added to continue through FFY 2010.

Some improvement activities are being revised or deleted to better reflect current practices. Improvement activities are being added to reflect current practices, address state level initiatives in post school and workforce readiness and to address data concerns.

The low response rate is a continuing concern. Lack of contact information, or outdated information was a major barrier to the CDE’s inability to obtain complete surveys. In an attempt to improve the completed survey rate to provide a more representative sample, ESLU will work with the National Post-school Outcomes Center and AU representatives to research and identify strategies to collect accurate contact data and conduct surveys.

The CDE has fully embraced the philosophy and implementation of the RtI model statewide. The Secondary Services Team will coordinate with the CDE’s internal RtI workgroup to develop materials and training options to assist secondary schools in RtI implementation including transition planning and services as an effective intervention.

In response to new legislation, the Governor has charged the Commissioner of the CDE and the State Board of Education with the task of reviewing and revising the State Content Standards. Efforts are underway to consider and include workplace readiness skills as well as academic skills with the intention of preparing youth for postsecondary education and the world of work. A member of the Secondary Services Team will work closely with the task force to influence the integration of workplace standards and align efforts across the CDE.

**Revised Improvement Activities/Timelines/Resources**

Activity	Action Steps	Timeline	Resources
<p>1. Include information about students exiting school or special education in the Special Education End of Year data collection.</p>	<p>Develop End of Year data definitions.</p> <p>Get approval from internal data review board.</p> <p>Train AUs on new data elements.</p>	<p>FFY 2006</p> <p>FFY 2007</p> <p>FFY 2008</p> <p>FFY 2009</p> <p>FFY 2010</p>	<p>Secondary Services staff</p> <p>Data and research staff</p> <p>Information Management Services</p>
<p>2. Provide AU Special Education Directors Indicator 14 data specific to their AU when sample size is too small to be publicly reported (N &lt; 30).</p>	<p>Develop report format.</p>	<p>FFY 2008</p>	<p>General Supervision team</p> <p>Secondary Services team</p> <p>OMNI Institute</p>
<p>3. The CDE will work with AUs to improve exit data, with particular focus on the collection of valid contact data.</p>	<p>In collaboration with the National Post-school Outcomes Center, research techniques used by other states.</p> <p>Convene a work group of AU representatives to identify and recommend strategies.</p> <p>Include technical assistance and training in Summer Transition Leadership Institute and Regional Cadre meetings.</p>	<p>March 2009</p> <p>March 2009</p> <p>June 2009</p>	<p>CDE Staff</p> <p>AU Transition Teams</p> <p>National Post-school Outcomes Center</p>
<p>4. Research options for data collection process.</p>	<p>Contact other States to identify strategies used for effective data collection .</p>	<p>March 2009</p>	<p>CDE Staff</p> <p>National Post-school Outcomes Center</p> <p>State Department Contacts</p>

Activity	Action Steps	Timeline	Resources
5. Include transition skills in a working curriculum for all students and infusing transition activities and education into the intervention toolbox associated with RtI for all secondary students .	Secondary Services team member will be assigned to RtI workgroup.  Team will review RtI materials and training opportunities.	March 2009 and ongoing	ESLU Staff CDE Staff from other Units Local Directors
6. Collaborate with Colorado Community College System (CCCS) and Career and Technical Education (CTE) of Colorado to maximize postsecondary education opportunities for youth with disabilities.	Secondary Services Team member will coordinate with the Governor appointed workgroup reviewing and recommending State Content Standards and accompanying assessments.	Dec. 2008 and ongoing	ESLU Staff CDE Staff from other Units
7. The CDE will consider adopting workplace readiness standards as part of the Colorado State Content Standards required for all Colorado Students.	The CDE has contracted with the SWRCC at WestEd to review and analyze the Colorado Model Content Standards including review of major definitions related to College Readiness, and Career/Postsecondary Readiness; Secondary Services team member will coordinate with the workgroup.	March 2008 and ongoing	ESLU Staff  CDE Staff from other units

**Sampling Plan**

The CDE intends to continue the use of sampling of AUs over the remaining period of Colorado’s FFY2005-2010 State Performance Plan. In fall 2006, the CDE developed a 5 year sampling plan for the remaining five years of Colorado’s SPP. All AUs that participated in the baseline data collection described above were re-entered into the 5 year sampling plan. Therefore, all of Colorado’s 57 Administrative Units will participate in the Parent Survey data collection between FFY2006 and FFY2010.

The sampling calculator developed by the National Post School Outcomes Center was used for the purpose of developing the 5 year sampling plan. AU characteristics that were factored into the process were as follows:

- Number of AUs
- AU region (urban/suburban vs. rural)
- AU size
- Percent of AU population disabled

- Percent of SPED population in 4 disability categories (LD, ED, MR and all other disabilities)
- Gender of SPED population
- Percent of SPED population that is non-white (total minority)
- Percent of SPED population that is Hispanic
- Percent of SPED population that is 15 years of age or older

The CDE drew approximately 35 separate plans using the sampling calculator and considered 20 of them. Serious consideration was given to the 6 best solutions. While all the solutions had difficulty containing year-to-year variation in the total minority and Hispanic variables within  $+3$  percentage points of the state percentage, the chosen plan maintained no more than  $\pm 3$  percentage points variation from the state for all the disability categories and provided the best solution in terms of the variation in race/ethnicity over the 5 years of the plan. This was especially true for the percent Hispanic variable, which is a key demographic variable in Colorado.

The comparison of each year's sample to the overall state percentages is shown in the table on the next page. The highlighted cells represent differences from the state percentage in excess of  $\pm 2$  percentage points. The specific AUs that will be sampled in each year of the 5 year plan are shown in a subsequent table.

The CDE intends to invite *all* parents of students with IEPs in the AUs from each year's sample to participate in the survey. As discussed earlier, the CDE is actively working on improving its response rates on the parent survey with the goal of exceeding 60% within 2 years. If return rates do not dramatically improve within the next two years, the CDE may move away from trying to survey all parents in the AUs sampled each year to drawing a parent sample from each AU in the plan and using the off-set in resources to conduct extensive follow-up procedures with these parents.

Finally, additional student demographic characteristics will also be collected to help assess the extent to which each year's respondents represent the state as a whole. Dependent on the outcome of this year-to-year assessment, the CDE may employ weighting techniques to help ensure comparability of the results over the 5 year period of the sampling plan.

*July 2007 Update:* Sampling plan was updated because the Post-School Outcomes sampling calculator did not properly bring in the AUs with an average daily membership of over 50,000 students. The yearly sample characteristics in the below tables does not reflect the four largest AUs that will be sampled **every** year of the sampling plan. About 20% of the parents from these large AUs will be randomly selected for participation in the survey per year. Additionally, the Colorado School for the Deaf and Blind will be included in the FFY2006 sample and Department of Youth Corrections will be included in the FFY2008 sample. This sampling plan is now identical to the plan for Indicators 13 and 14 (Part C to B transitions and Post School Outcomes, respectively) based on feedback from the Colorado's Educational Data Advisory Committee (EDAC).



	Sample					
	State	FFY2006	FFY2007	FFY2008	FFY2009	FFY2010
<b>Size</b>	521393	104724	104886	93094	111399	107560
<b>SPED</b>	57353	11590	11189	10105	11398	10540
<b>% LD</b>	37	38	37	36	39	36
<b>% ED</b>	10	9	9	9	10	11
<b>% MR</b>	4	5	4	5	3	4
<b>% AO</b>	49	47	50	52	48	49
<b>% Female</b>	32	33	32	32	32	32
<b>% Minority</b>	38	35	32	45	34	34
<b>% Hispanic</b>	26	27	23	27	29	25
<b>% 15 Years +</b>	23	24	23	23	23	23

In the table below, the highlighted cells indicate the school year an administrative unit (AU) or state operated program (SOP) is to submit demographic information in EOY reporting. \*\*Please note that this sampling plan has not changed for Indicators 14 and 8. Aus with total student enrollment of 50,000+ will be sampled annually.

	Indicator 8 and 14 Collection Year (demographic Information)	2006-07 from EOY 2005-06	2007-08 from EOY 2006-07	2008-09 from EOY 2007-08	2009-10 from EOY 2008-09	2010-11 from EOY 2009-10	2011-12 from EOY 2010-11
01010	Adams 1, Mapleton				X		
01020	Adams 12, Northglenn			X			
01030	Adams 14, Commerce City		X				
01040	Adams 27 J, Brighton					X	
01070	Adams 50, Westminster						X
03010	Arapahoe 1, Englewood			X			
03020	Arapahoe 2, Sheridan		X				
03030	Arapahoe 5, Cherry Creek		X	X	X	X	X
03040	Arapahoe 6, Littleton		X				
03060	Adams-Arapahoe 28J, Aurora				X		

**SPP Template – Part B (3)**

**Colorado**

	Indicator 8 and 14 <b>Collection Year</b> (demographic Information)	<b>2006-07</b> from EOY 2005-06	<b>2007-08</b> from EOY 2006-07	<b>2008-09</b> from EOY 2007-08	<b>2009-10</b> from EOY 2008-09	<b>2010-11</b> from EOY 2009-10	<b>2011-12</b> from EOY 2010-11
07010	Boulder RE-1J, St. Vrain						X
07020	Boulder RE-2, Boulder Valley					X	
15010	Delta 50J				X		
16010	Denver 1	X	X	X	X	X	X
18010	Douglas RE-1	X	X	X	X	X	X
21020	El Paso 2, Harrison						X
21030	El Paso 3, Widefield				X		
21040	El Paso 8, Fountain				X		
21050	El Paso 11, Colorado Springs			X			
21060	El Paso 12, Cheyenne Mountain			X			
21080	El Paso 20, Academy				X		
21085	El Paso 38, Lewis Palmer					X	
21090	El Paso 49, Falcon		X				
21490	Fort Lupton/Keenesburg			X			
22010	Fremont RE-1, Canon City		X				
26011	Gunnison RE-1J					X	
30011	Jefferson R-1		X	X	X	X	X
35020	Larimer R-2J, Loveland						X
35030	Larimer R-3, Estes Park						X
38010	Logan RE-1, Sterling			X			
39031	Mesa 51, Grand Junction		X				
41010	Moffat RE-1, Craig				X		
43010	Montrose RE-1J		X				
44020	Morgan RE-3, Fort Morgan					X	
51010	Pueblo 60, Urban		X				
51020	Pueblo 70, Rural		X				
62040	Weld RE-4, Windsor		X				

**SPP Template – Part B (3)**

**Colorado**

	Indicator 8 and 14 <b>Collection Year</b> (demographic Information)	<b>2006-07</b> from EOY 2005-06	<b>2007-08</b> from EOY 2006-07	<b>2008-09</b> from EOY 2007-08	<b>2009-10</b> from EOY 2008-09	<b>2010-11</b> from EOY 2009-10	<b>2011-12</b> from EOY 2010-11
62060	Weld 6, Greeley					X	
64203	Centennial BOCES						X
64043	East Central BOCES			X			
64053	Mount Evans BOCES				X		
64093	Mountain BOCES					X	
64103	Northeast BOCES						X
64123	Northwest BOCES					X	
64133	Pikes Peak BOCES			X			
64213	Rio Blanco BOCES						X
64143	San Juan BOCES					X	
64153	San Luis Valley BOCES		X				
64160	Santa Fe Trail BOCES				X		
64163	South Central BOCES			X			
64193	Southeastern BOCES					X	
64083	Southwest BOCS				X		
64200	Uncompahgre BOCS						X
64205	Ute Pass BOCES			X			
80010	Charter School Institute					X	
66050	CSDB		X				
66080	Division of Youth Corrections				X		

## Part B State Performance Plan (SPP) for 2005-2010

## 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:**

A. Percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification:

- a. # of findings of noncompliance made related to monitoring priority areas and indicators.
- 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.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

B. Percent of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification:

- a. # of findings of noncompliance made related to such areas.
- 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.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

C. Percent of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification:

- a. # of agencies in which noncompliance was identified through other mechanisms.
- b. # of findings of noncompliance made.
- c. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = c divided by b times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

**Overview of Issue/Description of System or Process**

The Continuous Improvement and Monitoring Process (CIMP) is carried out in 3 phases with Phases I and II typically lasting 1 school year. The current monitoring schedule was determined in 2000 and took into consideration the most recent monitoring activities of Administrative Units. All Administrative Units in Colorado will have gone through Phases I and II of CIMP by the end of the 2007-08 school year. Administrative Units have either 4000 students or 400 students identified with disabilities, or operate under a variance, or are a Board of Cooperative Educational Services (BOCES) where many districts have pooled their resources to provide special education services.

Phase I is a data gathering and self-assessment phase. During Phase I the special education director identifies a steering committee to guide the process. The steering committee is a representative sample of all the stakeholders from the administrative unit. Their job is to review the current status of special and gifted education services by collecting and analyzing data, identifying accomplishments and effective practice, and determining areas of need within the Administrative Unit. Data drives the Phase I process and includes:

- Staff Survey (conducted by CDE)
- Parent Survey (conducted by CDE)
- Dec. 1 count data (compiled by CDE)
- Suspension/Expulsion data
- Achievement data (compiled by CDE and the Administrative Unit)
- Student Record Review (conducted by CDE and Administrative Unit)

Phase I also requires the special education director and/or steering committee to complete a self-assessment that examines all aspects of special education services provided by the Administrative Unit. This self-assessment mirrors the Administrative Unit Checklist that is written at the completion of the verification visit that occurs in Phase II.

Phase II is the verification phase. The CDE verifies the issues identified by the steering committee which include identifying areas of commendation, areas that are acceptable and areas of non-compliance. Verification is done through interviews, focus groups, file reviews and observations. At the conclusion of this visit, the CDE team issues a report. It is important to note that this report is also copied to the superintendent/executive director and the relevant CDE Regional Managers. Any areas of no-compliance are cited. The Administrative Unit then has 90 days to provide the CDE with an Improvement Plan that targets all the areas of non-compliance. These areas are to be corrected within 1 year of the date the report is issued.

After the Improvement Plan has been developed and accepted by the CDE, the unit enters Phase III. In Phase III the Administrative Unit provides the CDE with evidence of change that ensures that all compliance issues are being addressed and will be corrected within 1 year. Phase III is the "continuous" part of the process. While an Administrative Unit may remain in Phase III for years, it is intended that the Units develop improvement plans that address recommendations that were made during Phase II. The CDE conducts Targeted Visits once a year to review and discuss the evidence documenting all compliance issues until every issue is addressed and corrected.

Targeted visits may occur more often than once a year, depending on the need as determined by the CDE.

In addition to monitoring corrective action and improvement plans, the CDE conducts a desk audit every year to review performance on selected targets that include the December 1 count and student outcome measures. Based on these factors, Administrative Units may continue in Phase III, have sanctions applied or re-enter Phase I.

There are four acknowledgements and four sanctions that the CDE can use in conjunction with the CIMP process. In addition, CIMP can be tied to district accreditation and compliance concerns can hinder a district from being accredited. The Exceptional Student Services Unit and the Regional Managers are working hard at making sure concerns related to exceptional students are brought into the discussion. The acknowledgements are:

1. Through the identification of exceptional commendations during CIMP, a letter of accomplishment could be signed by the Commissioner of Education and sent to the school board, superintendent/executive director and director of special education of the administrative unit, highlighting the specific commendable services.
2. Promising educational practices and evidence of promising outcomes identified during the CIMP or other reviews of administrative units and schools could be posted on the state website, especially those relating to increased achievement for students with disabilities.
3. Strengths identified during the CIMP and listed in the executive summary of the final CIMP report will continue to be issued to the school district/BOCES.
4. Strengths noted during the CIMP will be highlighted during the Accreditation Review Process.

The sanctions that CDE can impose are:

1. The executive summary/issues of any noncompliance and needed improvement will be included in the district accreditation report, listed in the final CIMP report and made available to the public through the CDE website. Any administrative unit not demonstrating progress towards a corrective action after one year's period of time could be at-risk of losing its accreditation through the accreditation review process.
2. The results of the CIMP include an improvement plan that administrative units will implement, identifying professional development and technical assistance strategies that helps to move the Administrative Unit in that direction. Within reasonable timelines, if noncompliance items are not remedied as agreed upon in an improvement plan, a letter of concern will be sent to the school board, superintendent and director of special education, and copied to the CDE regional manager. While CDE would only take this step if necessary, the potential to delay funding as a result of inaction is one option to ensure correction.
3. During a target visit, if determined that compliance is still not corrected, the administrative unit may be referred for follow up through CIMP to re-enter into the data collection and verification process. The Administrative Unit would be responsible for funding a team to oversee the continued data analysis and implementation of an improvement plan. Additionally, the Administrative Unit

would not be eligible for sliver grants awarded from the Exceptional Student Services Unit of the CDE.

4. If noncompliance continues to exist, and it is deemed that no action has been taken to implement the strategies, the Administrative Unit could be placed on probation for those items remaining in corrective action and CDE would delay or withhold funding as described in the Rules Section 7.05(6).

February 2007 Update (Refinement & Clarification of the of Continuous Improvement Monitoring Process (CIMP) -- In lieu of what was presented above in Colorado's FFY2005-2010 SPP (highlighted in gray) :

The CDE's General Supervision system includes monitoring, 618 data collection procedures, Federal Application process, dispute resolution and technical assistance. Each process is described below:

### **Monitoring**

The Continuous Improvement and Monitoring Process (CIMP) is carried out in 3 phases with Phases I and II typically lasting 1 school year. The current monitoring schedule was determined in 2000 and took into consideration the most recent monitoring activities of Administrative Units. All Administrative Units in Colorado will have gone through Phases I and II of CIMP by the end of the 2007-08 school year. Administrative Units have either 4000 students or 400 students identified with disabilities, or operate under a variance, or are a Board of Cooperative Educational Services (BOCES) where many districts have pooled their resources to provide special education services.

Phase I is a data gathering and self-assessment phase. During Phase I the special education director identifies a steering committee to guide the process. The steering committee is a representative sample of all the stakeholders from the administrative unit. Their job is to review the current status of special and gifted education services by collecting and analyzing data, identifying accomplishments and effective practice, and determining areas of need within the Administrative Unit. Data drives the Phase I process and includes:

- Staff Survey (conducted by CDE)
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- Dec. 1 count data (compiled by CDE)
- Suspension/Expulsion data
- Achievement data (compiled by CDE and the Administrative Unit)
- Student Record Review (conducted by CDE and Administrative Unit)

Phase I also requires the special education director and/or steering committee to complete a self-assessment that examines all aspects of special education services provided by the Administrative Unit. This self-assessment mirrors the Administrative Unit Checklist that is written at the completion of the verification visit that occurs in Phase II.

Phase II is the verification phase. The CDE verifies the issues identified by the steering committee which include identifying areas of commendation, areas that are acceptable and areas of non-compliance. Verification is done through interviews, focus groups, file reviews and observations. At the conclusion of this visit, the CDE team issues a report. It is important to note that this report is also copied to the superintendent/executive

director and the relevant CDE Regional Managers. Any areas of no-compliance are cited. The Administrative Unit then has 90 days to provide the CDE with an Improvement Plan that targets all the areas of non-compliance. These areas are to be corrected within 1 year of the date the report is issued.

After the Improvement Plan has been developed and accepted by the CDE, the unit enters Phase III. In Phase III the Administrative Unit provides the CDE with evidence of change that ensures that all compliance issues are being addressed and will be corrected within 1 year. Phase III is the “continuous” part of the process. While an Administrative Unit may remain in Phase III for years, it is intended that the Units develop improvement plans that address recommendations that were made during Phase II. The CDE conducts Targeted Visits once a year to review and discuss the evidence documenting all compliance issues until every issue is addressed and corrected. Targeted visits may occur more often than once a year, depending on the need as determined by the CDE.

In addition to monitoring corrective action and improvement plans, the CDE conducts a desk audit every year to review performance on selected targets that include the December 1 count and student outcome measures. Based on these factors, Administrative Units may continue in Phase III, have sanctions applied or re-enter Phase I.

### ***616 Data Collection***

For the 2005-06 school year, Colorado’s 618 data was collected in two ways. The annual student count and exit data, collected in December 1 was collected using custom software that ran on a DOS platform. LEAs were asked to provide exit data for students that were no longer enrolled in the LEA, update records for students that were still enrolled and add student records as appropriate. All data, after being verified at the LEA level, was uploaded to a CDE mainframe and data verification was done to assure an unduplicated count of students throughout the state. If duplication was suspected, the LEAs involved in the possibly duplication were contacted to gather additional information and a determination was made as to which LEA was eligible to count the student in question. The discipline data was collected at the end of the year using a Microsoft Excel application with an ACCESS database to store the data. The LEA submitted the data and then the data was reviewed and summarized by the CDE prior to submission to Westat.

### ***Dispute Resolution***

CDE has in effect procedures for resolving disputes consistent with 34 C.F.R. §§ 300.151 through 300.153 (state complaint procedures), 300.506 (mediation) and 300.507 through 300.515 (due process complaint procedures). The responsible dispute resolution consultant maintains a database for maintaining relevant and necessary information regarding mediation, state complaints (called “federal complaints” in Colorado), and due process complaints, including names of the parties, pertinent dates, issue identification, resolution data, and corrective action data, if applicable.

A description of the CDE’s dispute resolution process follows:

**Mediation:** Mediation is made available at no cost to parties who have disputes involving any matter under Part B. Mediation is a voluntary process on the part of the parties and is not used deny or delay any of the parent’s rights under Part B. If a mediation agreement is reached, it is reduced to writing in the form of a binding mediation agreement which is enforceable in any court of competent jurisdiction.



CDE has on contract four (4) trained mediators who are available for assignment to Part B mediations. The mediators are independent contractors who possess strong mediation skills and are trained in special education law. CDE provides annual training for the mediators and requires their mandatory attendance at Exceptional Student Services' Annual Special Education Legal Conference.

CDE actively and strongly encourages parties to consider resolving their disputes through mediation. Such encouragement is typically provided under the following circumstances: (1) when a parent contacts CDE to find out what his/her dispute resolution rights are, (2) when a state complaint (called a "federal complaint" in Colorado) is filed; or when a due process complaint is filed. When encouraging parties to consider mediation, the dispute resolution consultant makes clear that mediation may not be used to deny or delay any of the rights available under Part B; however, the parties may jointly request that a due process hearing or a federal complaint be held in abeyance for a reasonable period of time until the mediation is completed. When CDE receives a request for mediation, the responsible dispute resolution consultant confirms that both parties are voluntarily agreeing to mediation and then assigns a mediator to the case.

CDE is revising its mediation procedures to require that, if the parties requesting mediation wish that a federal complaint investigation or a due process complaint/hearing be stayed during the course of the mediation, the parties must jointly make the request in writing with an anticipated end date for the mediation. If the federal complaints officer (FCO) or impartial hearing officer (IHO) grants the requested stay, the order granting the stay must establish through an order: (1) a date certain for when the mediation must be completed, and (2) a new decision due date. If the parties resolve their disputes through a written and binding written mediation agreement or some other method, the parties notify the FCO (in the case of a federal complaint) or the IHO (in the case of a due process complaint) that the agreement has been reached and that the complaint is being withdrawn or should be dismissed. If no agreement or only partial agreement is reached, the complaint investigation or due process hearing procedures resume. CDE's FCO and other dispute resolution consultants, IHOs and mediators will be trained on revised procedures at the annual Impartial Hearing Officer & Mediators training scheduled for 02/07/07.

CDE does not identify compliance issues involved in disputes that are mediated and ultimately resolved due to the confidential nature of the mediation process. It is presumed that such issues are unique to each individual case and are not systemic in nature.

#### Federal Complaints Process

The federal complaints process is available to any party. When a federal complaint ("complaint") is filed, the FCO has up to ten (10) calendar days to review the complaint to determine whether (1) CDE has jurisdiction to investigate the complaint (*i.e.*, whether the complaint as alleged states a violation of the IDEA), (2) the complaint meets required content requirements, and (3) was filed within the applicable statute of limitations. The statute of limitations for the federal complaints reported in this State Performance Plan was one (1) year unless a claim for compensatory services was made and/or the IDEA violations were alleged to be continuing in nature, in which case the FCO ordered a reasonable look back period of as many as three years. If the complaint is rejected, the complainant must be notified within ten (10) calendar days following the decision to reject the complaint.

When a complaint is accepted for investigation, the regional liaison for the administrative unit (AU) and the CIMP coordinator are notified of the complaint, which is made available to both the regional liaison and CIMP coordinator.

The complaint must be resolved within sixty (60) calendar days of the date of its filing, unless the FCO extends the decision due date for exceptional circumstances unique that complaint. The pertinent AU is given the opportunity to respond in writing to the complaint, and the parent is given the opportunity to reply to the AU's written response.

Following the exchange of written information, the FCO may further investigate as necessary using a variety of investigative techniques including telephone interviews and on-site investigations. Upon completion of the investigation, the FCO issues a decision that must contain findings of fact and conclusions of law.

If the FCO finds the AU to be in violation of the IDEA, the FCO orders a remedy, which may include corrective action which may include compensatory services, the revision of policies and procedures, staff training, etc. The remedy establishes dates for when the remedy must be completed and documentation submitted demonstrating that corrective action has been taken. A copy of the decision is made available to the CDE/ESSU regional liaison for the AU and the CIMP coordinator. The decision is placed in the AU's monitoring file and serves as a data source for monitoring.

Follow-up for corrective action is currently the responsibility of the FCO. However, CDE is considering whether a change in follow-up responsibility for violations deemed to be systemic should be made from the FCO to the appropriate regional liaison.

CDE's FCO is a licensed attorney and one of ESSU's dispute resolution consultants. The FCO participates in the bi-monthly complaint investigator telephone conference calls provided by the Mountain Plains Regional Resource Center (MPRRC). The FCO also attends special education legal conferences such as LRP's National Institute on Legal Issues of Education Individuals with Disabilities.

#### Due Process Hearings

Per current state rules, the special education director for the AU is required to notify CDE immediately upon receipt of a due process hearing request and to fax a copy of the due process complaint to CDE. Per current state rules, the responsible dispute resolution consultant makes available to the AU and the parent a list of three (3) available IHOs from the IHO registry maintained by CDE. The parent strikes one name, the AU strikes one name and dispute resolution consultant assigns the remaining IHO to the case. In the case of an expedited hearing, the first available IHO on a rotating list is assigned to the case. For purposes of this State Performance Plan, due process hearings were required to be completed within 45 calendar days unless an extension of that timeline was requested by one of the parties. Colorado is a two-tier system and any party to a due process hearing may appeal to an administrative law judge who renders a decision on behalf of the Commissioner of Education/CDE.

When CDE is notified of a due process hearing request from the AU special education director, the responsible dispute resolution consultant notifies the CDE/ESSU regional liaison for the AU and the CIMP coordinator of the due process complaint and makes the due process complaint available to them. If the IHO finds the AU to be in violation, the hearing decision has also been made available to the AU regional liaison and CIMP coordinator. The hearing decision is placed in the AU's monitoring file and serves as a data source for monitoring.

In the past, CDE has not required the AU found to be in violation to take corrective action as it has long been assumed that due process hearings involve individual issues, not systemic issues. Based on recent conversations with CADRE, CDE will be revising its procedures to (1) develop criteria for determining whether a due process decision involves systemic violations, and (2) develop more uniformity state-wide regarding the forms and practice used by IHOs in granting extensions to the 45-day timeline when requested by one of the parties. These issues will be discussed at a day-long hearing officer and mediator training scheduled for 02/07/07.

CDE maintains a registry of IHOs who are available to conduct impartial due process hearings. The IHOs are required to be licensed attorneys. The IHOs are required to attend an annual special education law training day hosted by CDE as well as ESSU's Annual Legal Conference. In addition, the IHOs are encouraged to participate in the bi-monthly Hearing Officer Teleconference calls hosted by MPRRC.

### ***Enforcement Activities***

Our enforcement activities have changed since the submission of the 2004-05 State Performance Plan. In May 2006 our constituents approved the following enforcement actions and acknowledgements. Also, in addition to the actions listed below, any citation of significant disproportionality due to placement, identification or disciplinary actions will also trigger the use of early intervening funds to require the AU to use 15% of their allocations towards this focus.

### **ACTIONS**

All administrative unit Continuous Improvement and Monitoring Process (CIMP) executive summaries will be made available to the public through the CDE website. The executive summary includes areas of strength, noncompliance and needed corrective actions, and general recommendations. For all administrative units with noncompliance citations, issues of any noncompliance and needed improvement will be included in the district accreditation report. Areas of strength should also be included in the accreditation report where appropriate.

### **ACKNOWLEDGEMENTS**

Through the identification of exceptional performance during CIMP, a letter of accomplishment could be signed by the commissioner and sent to the school board, superintendent/executive director and director of special education of the administrative unit, highlighting the specific areas of strength.

### **SANCTIONS**

#### **SANCTION 1. Letter of Concern**

The results of the CIMP include an improvement plan that administrative units will develop and implement, identifying professional development and technical assistance strategies that assist the administrative unit in meeting the goals of its plan. If noncompliance items are not remedied within one year from the date of issuance of the CIMP Executive Summary and Report), a letter of concern will be sent to the school board, superintendent, and director of special education, and copied to the CDE regional manager.

SANCTION 2. Ineligible for Sliver Grants

If noncompliance persists beyond one year, the administrative unit will not be eligible for sliver grants awarded from the CDE ESSU.

SANCTION 3. Re-enter Data Collection or Verification at AU Expense

If non-compliance persists beyond one year, the administrative unit will be referred for follow up through CIMP to re-enter the data collection or verification process. The Administrative Unit would be responsible for funding a team to oversee the continued data analysis and implementation of an improvement plan.

SANCTION 4. Accreditation Watch

If noncompliance persists beyond one year, the administrative unit will be placed on accreditation watch through the CDE accreditation review process.

SANCTION 5. Withhold Funding and Accreditation Probation

If noncompliance persists beyond one year, CDE will delay or withhold funding as described in the ECEA Rules Section 7.05(6) and the administrative unit will be placed on accreditation probation.

The enforcement activities are closely tied to other units within the Colorado Department of Education. All general supervision findings that result in non-compliance are shared with the Regional Manager responsible for that Administrative Unit. This helps us coordinate our technical assistance efforts.

**Baseline Data for FFY 2003 (2003-2004)**

Data is from the 11 Administrative Units that were monitored during the 2003-04 school year.

15A. Federal Monitoring Priorities

Area of General Supervision:

**4 citations made** **1 corrected**

FAPE in the LRE (including Transition):

**15 citations made** **10 corrected**

Suspension/Expulsion:

**4 citations made** **0 corrected**

Child Find:

**3 citations** **0 corrected**

Total:

**26 citations** **11 corrected**

**42.3% corrected within 1 year of citation**

15B. Other areas the CDE monitored for:

Resource allocation:

**15 citations** **5 corrected**

Professional Development:

**3 citations** **0 corrected**

Hearing/Vision Screening:

**2 citations** **1 corrected**

Eligibility/IEP Process

**10 citations** **4 corrected**

Confidentiality

**1 citation** **1 corrected**

Total

**31 citations** **11 corrected**

**35.5% corrected within 1 year of citation**

15C. 2004 Due Process

**1 citation** **1 corrected**

**100.0% corrected within 1 year of citation**

2003 and 2004 Federal Complaints

**21 citations** **21 corrected**

**100.0% corrected within 1 year of citation**

**Discussion of Baseline Data**

The CDE recognizes that it needs to improve upon follow-up procedures after an Administrative Unit is cited for non-compliance. The CDE is committed to adjusting its Monitoring Process so that non-compliance is corrected within the one-year timeline. Historically, follow-up procedures have been limited due to lack of dedicated staff, but CDE is currently addressing the issue to bolster the overall Monitoring system. While follow-up is clearly an area for improvement, the strength of the current CIMP system is that it thoroughly addresses issues of non-compliance using multiple indicators and multiple methods of data collection.

The system in Colorado for Complaints and Due Process is such that when a decision is made which favors the family, corrective action is required from the school district. These action plans are reviewed and followed-up on frequently by CDE's team of consultants who work specifically with Due Process and Federal Complaints, leading to 100% correction within 1 year of citation.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

For each AU for which compliance is cited, the CDE:

- Completes a targeted visit at the AU within one year from the date the report was issued to (a) confirm all targets are met with no outstanding compliance issues; (b) confirm that the AU is on target with improvement and (c) consider sanctions (as indicated in the State Performance Plan).
- Provide written documentation of the targeted visit to the AU.
- Continues to make targeted visits until all areas of compliance are successfully addressed. (At a minimum 1 targeted visit per year should be documented in writing for the central files).
- When applicable, issues a letter to the AU stating that all compliance issues have been corrected.

For all AUs in Colorado, the CDE:

- Reviews the AU's Annual Performance Profile, CSAP data, any Federal Complaint decisions and any Due Process decisions annually. With regard to this review, CDE investigates all areas that are outside of the typical range.

Local Comprehensive Plans

Every AU has on file a local comprehensive plan with the CDE. CDE has reviewed all local comprehensive plans to ensure consistency with IDEA 1997 and Colorado's Exceptional Children's Education Act (ECEA) and its implementing rules. Further, each AU has been required to submit a letter of assurance that it will comply with IDEA 2004 until the ECEA

Rules are aligned with IDEA 2004 and its regulations, at which time the local comprehensive plans must be revised consistent with the amended ECEA Rules.

#### Compliance Determinations

Since July 2006, CDE has developed standards for determining what constitutes “compliance” following a citation of noncompliance to an AU. Fundamental to these standards is acknowledging the reality that it takes time for data to accurately reflect whether corrective action results in a change of practice. The standards utilized by CDE to make compliance determinations are:

- Has the AU developed, adopted and implemented policies and procedures that are intended to and are also likely to remedy the noncompliance?
- Has the AU taken immediate, demonstrable steps to implement such policies and procedures?
- Is the AU effectively beginning to address the noncompliance?
- Do the policies and procedures have future sustainability to continue ensuring compliance should staff or administration change?

If all of these standards are met, then CDE clears the outstanding noncompliance.

Starting July 15, 2005 the Exceptional Student Services Unit of the Colorado Department of Education made a commitment to carry out the following plan:

- Complete a targeted visit at the administrative unit within one year from the date the report was issued to (a) confirm all targets are met with no outstanding compliance issues; (b) confirm Administrative Unit is on target with improvement and (c) consider sanctions (see above).
- Provide written documentation of the targeted visit to the Administrative Unit.
- Continue to make targeted visits until all areas of compliance are successfully addressed. (At a minimum 1 targeted visit per year should be documented in writing for the central files).
- Issue a letter to the Administrative Unit stating that all compliance issues have been corrected when applicable.
- Review Annual Performance Profile, CSAP data, Federal Complaints and Due Process annually. Investigate all areas that are outside of typical range.

In addition, every Administrative Unit has submitted a comprehensive plan to our office to come into compliance with IDEA 1997. All Administrative Units are required to also submit a letter of assurance that they will comply with IDEA 2004 until we have national regulations and state rules and regulations. At that time the comprehensive plans will be revised to make changes to come into compliance.

For the 2006-07 school year, Colorado's 618 data will be collected using Colorado's Automated Data Exchange (ADE) process which allows the LEA to create a file, in a specified format, and submit that file through a secure website. Edits and warnings are provided to the LEA based on established business rules to assist the LEA in the verification of their data. After all edits are passed the LEA will approve their data and submit a form signed by the Special Education Director certifying the accuracy of the data. Once all LEAs have approved their data verification will be done to assure an unduplicated count of students throughout the state. If duplication is suspected the LEAs involved will be notified and the

LEA that submitted the record in error will be asked to resubmit their data file without the duplicated record. Colorado’s exit data for the 2006-07 school year will be submitted through a new End-of-Year student system that is being developed. This discipline data will be collected at the end of the year using a new version of the Microsoft Excel application that was used for the 2005-06 school year which will incorporate the new reporting requirements.

Additionally, the Exceptional Student Services Unit at the Colorado Department of Education will be re-designing our monitoring, and more globally, our entire General Supervision system to more closely align with the SPP/APR requirements. A task force representing our staff, local special education directors and parents will meet to determine what is in place, what is needed, and how we can develop a system that ensures compliance within a timely manner while still focusing on outcomes of students.

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status *			
			O	C	R	D
1. Revise the CIMP process to more closely align with the Indicators and Related Requirements as well as the determinations process.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	Monitoring materials were revised and approved by the Education Data Advisory Committee (EDAC). In addition to initial implementation, the process is being evaluated and refined.	O			
2. Create work teams to address each of the indicators. Teams analyze data, evaluate AU policies, procedures, and practices impacting each indicator, and identify technical assistance to support AUs to enhance practices to improve performance.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	Work teams established; evaluation procedures developed and implemented; technical assistance and professional development projects/activities aligned with SPP indicators are developed and implemented.	O			



Activity	Timeline	Results or Progress	Status *			
			O	C	R	D
3. Develop strategies to evaluate performance related to each indicator.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	Evaluation strategies reviewed, revised and implemented.	O			
4. Increase training of CDE Consultants to improve: (1) service to AUs and (2) attention to identification of noncompliance and verification of corrective actions using valid and reliable strategies to collect and analyze quantitative and qualitative data.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	Consultants participate in monthly topical training during staff meetings and regional liaison meetings.	O			
5. Revise local Comprehensive Plans that reflect the changes in the ECEA Rules.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	CDE staff are reviewing and revising templates and models.	O			
6. General supervision system includes notification to the AU/District of the requirement for correction within one year of notification of the noncompliance; establishment of strategies to verify correction of noncompliance; and adherence to timelines for verification activities.	FFY 2007 FFY 2008 FFY 2009 FFY 2010	CDE staff and AU Directors have been trained regarding requirements.	O			

Activity	Timeline	Results or Progress	Status *			
			O	C	R	D
7. Revise Continuous Improvement and Monitoring Process Acknowledgements and Sanctions as General Supervision Process Acknowledgements and Enforcement Actions.	FFY 2008	Following public participation, the revised Enforcement Actions were adopted.		C		

**Resources Used to Support Activities**

- CDE Personnel from ESLU
- Data and Research Unit
- Prevention Initiatives Unit
- Contractors/vendors
- ESLU receives individual AU data and presents indicator specific information at statewide Directors’ meetings.

**Revisions for FFY 2008**

Improvement activities are being added to reflect current practice and to continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

<b>Activity</b>	<b>Action Steps</b>	<b>Timeline</b>	<b>Resources</b>
<p>1. Re-align ESLU resources to provide local regional contacts to verify implementation of corrective action plans and correction of findings of noncompliance are timely corrected.</p>	<p>Identify local regional contacts to serve as Special Education Regional Consultants.</p> <p>Provide training for Special Education Regional Consultants.</p> <p>Special Education Regional Consultants develop working relationships with AU Special Education Directors.</p> <p>Special Education Regional Consultants verify timely implementation of corrective action plans and assist with timely correction of noncompliance.</p>	<p>FFY 2009 FFY 2010</p>	<p>Special Education Regional Consultants</p> <p>General Supervision Team</p>
<p>2. Revise monitoring materials to align with current requirements and focused monitoring system.</p>	<p>Revise Administrative Unit checklist that provides platform for monitoring.</p> <p>Revise manual describing the Continuous Improvement and Monitoring Prociess.</p> <p>Implement focused monitoring system as CIMP.</p>	<p>FFY 2009 FFY 2010</p>	<p>General Supervision Team</p>

**Part B State Performance Plan (SPP) for 2005-2010**

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

For FFY 2008 the language for Indicator 16 was changed. The Indicator now reads:

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

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

**Measurement:** Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

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

**Overview of Issue/Description of System or Process**

The Exceptional Student Services Unit (ESSU), Colorado Department of Education (CDE) employs two Federal Complaints Officers. Complaints are assigned on a rotating basis between the two complaints officers. Once a complaint is received within this office, the complaints officer has 10 days within which to either accept or reject the complaint. If a complaints officer finds exceptional circumstances, an extension beyond the 60 day timeline may be granted, for a reasonable period of time. Examples of circumstances that are exceptional include a complaint involving an extraordinarily large volume of documentation or a key witness/party is unavailable.

**Baseline Data for FFY 2004 (2004-2005)**

100% of complaints were completed within 60 days or the extended timeline in FFY2004

**Discussion of Baseline Data**

Colorado does not receive a large number of complaints and meeting the required timelines is typically not an issue. Each officer takes about half of the complaints received on a rotating basis.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%

FFY	Measurable and Rigorous Target
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Track corrective action plans as required in the Complaints Officer's findings.	FFY 2005	The CDE continues to track information and refine the internal policy to sustain consistency with submission/response timelines.	O			
	FFY 2006					
	FFY 2007					
	FFY 2008					
	FFY 2009					
	FFY 2010					

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
2. Research a software system that will allow for coordination of calendaring, tracking and data/document management of dispute resolution cases in order to improve systems administration.	FFY 2008 FFY 2009	This improvement activity is ongoing. CDE staff have reviewed four software systems. However, the systems reviewed were either inappropriate given CDE's needs or unaffordable. CDE continues to explore efficient and affordable systems.	O			

**Resources Used to Support Activities**

- Data Management of Dispute Resolution Access Database
- Outlook Calendaring
- Dispute Resolution Team

## Part B State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development

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

The language for Indicator 17 has changed. The indicator now reads:

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

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

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

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

### Overview of Issue/Description of System or Process

The CDE operates under a 2-tiered due process system. The first level is conducted by the impartial hearing officer. Hearing officers are assigned on a two-strike system. Once a request is received in this office, three hearing officers are placed on a list, based on rotation and availability. From this list the parties each strike one name, and the remaining name from the list of three is the hearing officer assigned to the case. There are currently 13 hearing officers on our rotation list. All hearing officers are attorneys who are knowledgeable about IDEA and attend a yearly training conducted by ESSU.

An appeal of a hearing officer decision is sent to the State Division of Administrative Hearings and assigned on a rotating basis from a pool of Administrative Law Judges.

### Baseline Data for FFY 2004 (2004-2005)

100% within timelines for FFY2004

**Discussion of Baseline Data**

The 45 day timeline within which to render a decision is now being more closely monitored by ESSU in order to comply with IDEA requirements and OSEP findings. Meeting the timelines is typically not a problem in Colorado.

<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>2005 (2005-2006)</b>	<b>100%</b>
<b>2006 (2006-2007)</b>	<b>100%</b>
<b>2007 (2007-2008)</b>	<b>100%</b>
<b>2008 (2008-2009)</b>	<b>100%</b>
<b>2009 (2009-2010)</b>	<b>100%</b>
<b>2010 (2010-2011)</b>	<b>100%</b>



**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Implement a "tickler" system of notification; a software project is in development for future use .	FFY 2008	Staff continues to monitor timelines through the use of an access database. This activity will continue to sustain compliance until a software system is procured and implemented. See Improvement Activity # 3 below.		C		
2. The Department continues to provide training to due process hearing officers, including special education legal requirements, decision timelines and decision drafting.	Quarterly	Hearing officers remain up to date on legal requirements and timelines for decisions. Hearing officers have submitted timely decisions or proper extensions. Colorado has met the target of 100% and will continue training to sustain 100% compliance.	O			
3. The Department is researching a software system that will allow for coordination of calendaring, tracking and data/document management of dispute resolution cases in order to improve systems administration.	FFY 2008 FFY 2009	This improvement activity is ongoing. As of this date CDE staff have reviewed four software systems. However, the systems reviewed were either inappropriate given CDE's needs or unaffordable. CDE continues to explore efficient and affordable systems.	O			

**Resources Used to Support Activities**

- Data Management of Dispute Resolution Access Database
- Outlook Calendaring
- Dispute Resolution Team

**Revisions for FFY 2007**

The CDE is revising and/or adding improvement activities to better reflect current practices. Improvement activities are being added to continue through FFY 2010.

The CDE has implemented a Resolution Meeting form that both parties must sign. This form allows the CDE to track occurrence and outcome of resolution meetings. For Indicator 17, it allows for the tracking of any change to timelines (*e.g.*, parties' waiver of the resolution meeting) in order to inform the Hearing Officers of any modification of decision dates. This form was implemented January 1, 2008.

**Revised Improvement Activities/Timelines/Resources**

<b>Activity</b>	<b>Action Steps</b>	<b>Timeline</b>	<b>Resources</b>
1. The Department is researching a software system that will allow for coordination of calendaring, tracking and data/document management of dispute resolution cases in order to improve systems administration.	IT staff research. Trial use. Determination of effectiveness. Purchase and training.	FFY 2008 FFY 2009	CDE IT staff CDE General Supervision team

Part B State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development

**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.

**Measurement:**

100% = 7 divided by 7 times 100.

Overview of Issue/Description of System or Process

ESSU has a tracking system to record timelines and resolution outcomes.

Baseline Data for FFY 2005 (2005-2006)

100%

Discussion of Baseline Data

Although Colorado reached 100% for resolution sessions that were resolved through resolution session settlement agreements in FFY 2005, the CDE feels that 80% is a realistic expectation for high performance on this Indicator across the life of the SPP.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	
2006 (2006-2007)	80%
2007 (2007-2008)	80%

FFY	Measurable and Rigorous Target
2008 (2008-2009)	80%
2009 (2009-2010)	80%
2010 (2010-2011)	80%

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Modify ESLU dispute resolution database to include IDEA 2004 required information.	Began Fall 2005	ESLU staff continue to track all required timelines and related documentation.		C		
2. Continue the provision of case management and data tracking.	FFY 2007 FFY 2008 FFY 2009	Integrating dispute resolution with monitoring systems for coordinated tracking.	O			
3. Incorporate this indicator into software development /integration of proprietary software to help staff more easily monitor and notify hearing officers.	FFY 2007 FFY 2008 FFY 2009	This improvement activity is ongoing. As of this date CDE staff has reviewed four software systems. However, the systems reviewed were either inappropriate given CDE’s needs or unaffordable. CDE continues to search for an efficient and affordable system.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
4. Develop and implement strategies for identifying the factors that result in failed resolution sessions, including follow-up with the parties.	FFY 2007 FFY 2008 FFY 2009	The CDE has researched nationwide resolution meeting data and is continuing to research factors that impact resolution meeting outcomes. Based on a random sample of 9 states (2006 APR data), the CDE found that the average percentage for resolution meetings resulting in an agreement was 52% - a percentage that is comparable to a CADRE study of 22 states (2005) with an average of 59%. Follow-up with the parties is an ongoing activity and indicates that either the 30-day resolution period is too short for parties to resolve disagreements and/or agreements are being reached but not reduced to writing.	O			
5. Development and implementation of a process for obtaining accurate data regarding resolution session outcomes, including number of resolution sessions resulting in resolution session agreements and identification of whether resolution session timelines have been met.	FFY 2008 FFY 2009 FFY 2010	A Resolution Meeting Verification Form has been developed and implemented as of 1/1/08. The form is completed by the parties. It reports the outcome of the resolution meeting and is submitted to the CDE.	O			

**Resources Used to Support Activities**

- Data Management of Dispute Resolution Access Database
- Outlook Calendaring
- ESLU Dispute Resolution Team

Part B State Performance Plan (SPP) for 2005-2010

**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.

**Overview of Issue/Description of System or Process**

Colorado has a system that allows for mediation of special education related disputes between parents and education agencies. Mediators are available statewide and have been trained on both mediation strategies and IDEA requirements. ESSU utilizes the services of 4 contract Mediators. Mediations are assigned on a rotating basis and on availability of the Mediator. Mediators are, by virtue of their respective careers, trained in mediation techniques and knowledgeable about IDEA and attend a yearly training conducted by ESSU.

**Baseline Data for FFY 2004 (2004-2005)**

60% of mediation requests resulted in a mediation agreement

**Discussion of Baseline Data**

Because mediation sessions are confidential, it is unclear what factors lead to 60% of mediations resulting in a mediation agreement. Colorado does not feel that tracking the mediation process in greater detail is appropriate since the confidential nature of the sessions is what drives a greater level of candor and is a major reason why this avenue is often more appealing to the parties involved.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	63%
2006 (2006-2007)	66%
2007 (2007-2008)	69%

FFY	Measurable and Rigorous Target
2008 (2008-2009)	72%
2009 (2009-2010)	75%
2010 (2010-2011)	78%

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Utilize an anonymous post-mediation evaluation form for all parties involved.	FFY 2006 FFY 2007 FFY 2008 FFY 2009	The Dispute Resolution Team assesses results at least yearly to drive future planning and systems modifications.	O			
2. Conduct annual trainings for mediators on special education legal requirements.	FFY 2005 FFY 2006 FFY 2007 FFY 2008 FFY 2009	Two trainings conducted (one annual and one supplemental).	O			



Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
3. Identify funding sources to pay for mediator trainings and/or sending mediators to national conferences, such as the Annual Legal Conference and the LRP Special Education conferences.	Deleted	The CDE is providing training to the mediators. They access MPRRC Mediation teleconferences and are attending the Annual Special Education Legal Conferences.				D
4. Conduct a panel discussion at the 2008 Special Education Legal Conference regarding the benefits of mediation and the process involved.	Completed	The CDE showed a 15% increase in requests for mediation from calendar year 2007 to 2008.		C		
5. Contact mediators to determine factors resulting in lack of written agreements.	FFY 2007 FFY 2008 FFY 2009	Data collected from mediators and synthesized by staff.	O			

**Resources Used to Support Activities**

- Data Management of Dispute Resolution Access Database
- Outlook Calendaring
- Dispute Resolution Team

**Revisions for FFY 2008**

Improvement activities are being added to continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

<b>Activity</b>	<b>Action Steps</b>	<b>Timeline</b>	<b>Resources</b>
1. Contact mediators to determine factors resulting in lack of written mediation agreements.	Review Mediator close-out letters. Contact mediator by telephone or email. Synthesize data.	FFY 2009 FFY 2010	CDE Dispute Resolution Team and Mediators

## Part B State Performance Plan (SPP) for 2005-2010

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

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

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

### Measurement

State reported data, including 618 data and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, placement; November 1 for exiting, discipline, personnel; and February 1 for Annual Performance Reports); and
- b. Accurate (describe mechanisms for ensuring accuracy).

### Overview of Issue/Description of System or Process

Colorado utilizes two mechanisms for Administrative Units to submit required data on special education students. First, a diskette system is utilized for reporting of December 1 Child Count, LRE data, and December 1 Exit and Personnel Data. Second, an extract to diskette system is posted to CDE's Website that facilitates the collection of discipline data at the end of each school year. Both systems have the following resources in place to ensure accurate and timely submissions:

- Hard-copy instruction packets and detailed data definitions
- Web-based instructions and detailed data definitions available on the CDE's website
- Availability of telephone technical assistance
- Regular trainings for all Administrative Unit data managers
- Data submission trainings for SPED directors.

Data verification is done using numerous edits and reports built into the data collection system. For student data, once data is received from an Administrative Unit, the CDE does manual checks to ensure unduplicated counts. For staff data, qualifications of all staff are manually checked against a caseload and licensure database. While these verification checks have generally been adequate in the past, a task force being created to develop additional verification procedures for inclusion in the web-based submission system currently under development.

To ensure timely submissions of the state's Annual Performance Reports, the CDE has hired dedicated staff to conduct ongoing assessments of data collection systems and to convene internal teams to manage, analyze and report on indicators on an ongoing basis to meet the timelines imposed by OSEP.

**Baseline Data for FFY 2004 (2004-2005)**

On-time submissions for state reported data: 100%

**Discussion of Baseline Data**

In FFY, all state reported data will be collected using an on-line reporting data collection system instead of the current diskette system utilized for most of the collection. This will help ensure timeliness and help improve data verification systems. The CDE will fold edit check requirements provided by WESTAT into the development of this Web-based data submission system.

Due dates for the next fiscal year are as follows:

December 1 Student Data	December 1, 2006
December 1 Staff Data	December 1, 2006
End-of-Year Exit Data	End-of-Year 2006/2007
Discipline Data	End-of-Year 2006/2007

<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>2005 (2005-2006)</b>	<b>100%</b>
<b>2006 (2006-2007)</b>	<b>100%</b>
<b>2007 (2007-2008)</b>	<b>100%</b>
<b>2008 (2008-2009)</b>	<b>100%</b>
<b>2009 (2009-2010)</b>	<b>100%</b>
<b>2010 (2010-2011)</b>	<b>100%</b>

**Improvement Activities/Timelines/Resources**

In the original SPP dated December 2005 Improvement activities were suggested to continue throughout FFY 2010. Below is an update of the progress and results of those activities.

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
1. Create task force to assess efficacy of current verification systems.	FFY 2005	Verification systems needed to be updated.		C		
2. Continue to gather stakeholder input through public participation on development of web based data submission system.	FFY 2005	Two web based systems were developed.		C		
3. Develop architecture to support web based system.	FFY 2006	Systems were developed and are updated annually.		C		
4. Develop Technical Assistance material and media for web based system.	FFY 2006	Available on CDE's website at <a href="http://www.cde.state.co.us/cde/spedfin/Index_SEFD.htm">http://www.cde.state.co.us/cde/spedfin/Index_SEFD.htm</a> .		C		
5. Launch web based system.	FFY 2006	Two systems were launched.		C		
6. Provide technical assistance and trainings on new system.	FFY 2006	Regional training and individual technical assistance provided.		C		
7. Critical appraisal of new system and modify as needed.	FFY 2006 FFY 2007 FFY 2008 FFY 2009 FFY 2010	Systems continue to be modified by refining edits, data elements and definitions.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
8. Realignment within ESLU to enhance CDE's level of influence.	FFY 2006 FFY 2007	618 data collection team and the SPP/APR team is now one team under General Supervision.		C		
9. Provide regional trainings on student data elements, definitions and how to submit count 10. <b>Revised</b> , see p.175, Improvement Activity # 2.	FFY 2008	9 trainings were held throughout the state on the Special Education End of Year collection. Audience for training included Child Find Coordinators, Special Education Directors and Data Managers.			R	
11. Reorganize the CDE to bring data collection under Data and Research Unit.	FFY 2008	The Data and Research Unit (now named Data Services Unit (DSU)) and the Exceptional Student Leadership Unit (ESLU) work collaboratively to implement three data collections ( <i>i.e.</i> , End of Year, December count/Child count, Discipline). The DSU, with the assistance of Information Management Services (IMS), handles the technical aspects of the collection ( <i>e.g.</i> , file submission, programming) while the ESLU handles the content and provides technical assistance to the AUs.		C		
12. Develop reports embedded in collection to ensure accountability and accuracy of data.	FFY 2008 FFY 2009	Reports specific to each indicator are in relevant collections. Reports continue to be refined for increased accuracy. Reports are added every year to assist the CDE and AUs in monitoring and in validating data.	O			

Activity	Timeline	Results or Progress	Status*			
			O	C	R	D
13. Develop data warehouse to access special education data.	FFY 2008 FFY 2009	Programmer for special education was hired.	O			
14. Coordinate EDEN submission.	FFY 2008	EDEN coordinator and programmers were hired. CDE is now 'EDEN only' for several of the special education collections.		C		

**Resources Used to Support Activities**

- ESLU General Supervision Team
- Southwest Regional Comprehensive Center
- Data Services Unit
- Information Management Services Unit
- Special Education Directors
- AU data managers

**Revisions for FFY 2008**

The CDE is revising and/or adding improvement activities to better reflect current practices. Improvement activities are being added to continue through FFY 2010.

**Revised Improvement Activities/Timelines/Resources**

<b>Activity</b>	<b>Action Steps</b>	<b>Timeline</b>	<b>Resources</b>
1. Reprogram data collections to enhance functionality and improve ease of use for AUs.	Devise project plan. Allocate resources for development and programming. Reprogram collections.	FFY 2009 FFY 2010	Information Management Services Unit ESLU General Supervision Team Data Services Unit
2. Enhance training of all data collections to address technical needs along with count content needs.	Evaluate content of past trainings. Develop training content. Develop training schedule. Conduct trainings.	FFY 2009 FFY 2010	ESLU General Supervision Team Data Services Unit
3. Conduct webinars to provide content to enhance data validity.	Evaluate content of past trainings. Develop training content. Conduct trainings.	FFY 2009	ESLU General Supervision Team
4. Add consultant to General Supervision Team to increase ability to provide TA to AUs.	Post position. Hire position. Train consultant.	FFY 2009	ESLU General Supervision Team



<b>Activity</b>	<b>Action Steps</b>	<b>Timeline</b>	<b>Resources</b>
5. Provide individualized training to meet the needs of specific audiences ( <i>e.g.</i> , child find coordinators).	Determine need. Evaluation previous training content. Develop training materials. Conduct training.	FFY 2009 FFY 2010	ESLU General Supervision Team  CDE Early Childhood Initiatives Team
6. Require AUs to submit plans to address concerns regarding ability to submit valid and timely data to the CDE.	Determine areas of concern. Develop rubric for data plan. Require AUs to submit plans. Review plans and provide feedback.	FFY 2009 FFY 2010	ESLU General Supervision Team