

NM Part B

FFY2015 State Performance Plan / Annual Performance Report

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR) Introduction to the State Performance Plan (SPP)/Annual Performance Report (APR)

On June 28, 2016 the Office of Special Education and Rehabilitation services (OSEP) notified New Mexico that we received a determination of needs assistance for the third consecutive year in implementing the requirements of Part B of the IDEA. According to the New Mexico Part B results-driven accountability matrix for the state's determination, New Mexico missed the following elements;

- Percentage of 4th grade children with disabilities scoring at basic or above on the National Assessment of Educational Progress in math and reading.
- Percentage of 8th grade children with disabilities scoring at basic or above on the National Assessment of Educational Progress in math and reading.
- Percentage of children with disabilities who dropped out.
- Percentage of children with a disability who graduated with a regular high school diploma.

New Mexico missed the following Part B compliance indicators:

Indicator 4B, 11, 12, and 13;

The State took specific actions against the LEAs identified with long-standing noncompliance on Indicators 11, 12 and 13 for FFY 2010, FFY 2011, FFY 2012 and FFY 2013 to assure that each LEA is correctly implementing all elements of the IDEA Part B. The State reviewed updated data subsequently collected through on-site monitoring or the state data system to make sure each LEA had developed and implemented the IEP unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP memo 09-02.

The LEAs had to complete an updated root cause analyses to determine the causes of the continued noncompliance. The LEAs were placed on corrective action plans (CAP) with specific strategies to address areas found in the root cause analyses. The length of time the problem existed along with the LEA's response to the issue was considered in each of the LEA's annual determination. As part of the LEA's corrective action plan, technical assistance was determined based on the indicators missed and the length of time the problem existed. The LEAs received technical assistance from the SEB, the National Technical Assistance Center (NTACT) (formerly known as the National Secondary Transition Technical Assistance Center (NSTTAC) and the Technical Assistance for Excellence in Special Education (TAESE) in order to address their individual needs. The LEAs were monitored through desk audits and onsite visits by the Special Education Bureau (SEB) staff in order to provide each LEA with technical assistance and professional development

In addition, New Mexico sought technical assistance to address the state's determination as Needs Assistance for the second consecutive year from NTACT and TAESE. NTACT provided direct support to each LEA that missed Indicator 13 during the Special Education Directors' Academy in September of 2016. Additionally, in August-September 2016, OSEP, in conjunction with NTACT and NDTAC, conducted an on-site, differential monitoring and technical assistance visit with the Special Education Bureau and selected stakeholders. The State Director of Special Education, also has a monthly phone appointment with Marion Morton Crayton, Ed.D., Education Program Specialist, U.S. Department of Education; Office of Special Education Programs.

NTACT is providing direct support to the SEB and LEAs as needed. TAESE is providing technical assistance for each LEA that was placed on a CAP due to their annual determination. The length of time the problem existed along with the LEA's response to the issue was considered in the LEA's annual determination. LEAs continue to be monitored by SEB staff to provide them with technical assistance and professional development as needed. In addition, SEB staff conducted on-site visits for audit compliance as determined by each LEA's data.

The primary focus of the State's monitoring activities under 34 CFR § 300.600(b) must be on:

Results

- Improving educational results and functional outcomes for all students with disabilities; and

Compliance

- Ensuring that public agencies meet the program requirements under Part B of the Act, with particular emphasis on those requirements that are most closely related to improving the educational results for students with disabilities.

New Mexico focuses on student performance outcomes and the compliance requirements of the IDEA. In addition, New Mexico takes into account the eight components of general supervision. New Mexico utilizes the ISEAS as an Accountability System Manual designed to provide the structure for the State and LEAs in the area of General Supervision. The ISEAS is the system that provides the assurances to OSEP that the State is carrying out its responsibilities, using quantifiable indicators in each of the priority areas listed below, and using such qualitative indicators as are needed to adequately measure performance and compliance in those areas which are listed below.

1. Provision of Free Appropriate Public Education (FAPE) in the Least Restrictive Environment (LRE).
2. State exercise of General Supervision including, but not limited to: 1. child find; effective monitoring; the use of resolution meetings mediation; and using these qualitative indicators to measure performance.
3. Disproportionate representation of racial and ethnic groups in special education and related services, to the extent that the representation is the result of inappropriate identification.

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In order to ensure consistent data across indicators, provide the number of districts in this field and the data will be loaded into the applicable indicator data tables.

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General Supervision System:

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

The State has a comprehensive guide on the provision of general supervision in accordance with the Individuals with Disabilities Education Act (IDEA). The State's system is entitled the Integrated Special Education Accountability System (ISEAS) and can be viewed at

<http://ped.state.nm.us/ped/SEBdocuments/technical/ISEAS%20October%202016.pdf>

The State's general supervision system consists of eight components:

1. State Performance Plan
2. Policies, Procedures, and the Effective Implementation
3. Data on Processes and Results
4. Targeted Technical Assistance and Professional Development
5. Effective Dispute Resolution
6. Integrated Monitoring Activities
7. Improvement, Corrections, Incentives and Sanctions
8. integrated Fiscal Accountability

The ISEAS describes in detail how the state implements the general supervision system that includes the eight components listed above.

According to the State's Integrated Special Education Accountability System (ISEAS), every LEA is monitored annually. All LEAs are desktop monitored through the Student Teacher Accountability Reporting System (STARS) data warehouse on the SPP indicators. The LEAs submit data on the second Wednesdays of October, December and February and at the end of year. Procedures on how to validate State Performance Plan (SPP) indicators are described in detail in the ISEAS appendices. Desktop monitoring also occurs for noncompliance identified through formal complaints and due process hearings. Staff follows up on mediation agreements and due process hearing resolution sessions are tracked and reviewed. SPP self-assessment tools are also used when monitoring LEAs.

SPP Indicator 13, secondary transition, requires additional student file data pertaining to the student's Individualized Education Program (IEP) to be reviewed by SEB staff utilizing the National Technical Assistance Center on Transition (NTACT) checklist. Initial indicator data are submitted into STARS and data are validated through a random selection of a reasonable sample of IEPs, for each LEA.

On-site monitoring occurs for LEAs assigned the determination of Needs Intervention. The State also completes on-site visits and monitoring when issues brought to the State's attention warrant it. LEAs' compliance were tracked and monitored through improvement plans or a Corrective Action Plan.

The Levels of Intervention are applied to LEAs based upon the annual determination assigned in accordance with 34 CFR Sec. 300.604. **The Levels of Intervention Matrix is attached to this section.**

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Technical Assistance System:

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

Targeted Technical Assistance

Compliance Data

The Integrated Monitoring Activities section of the ISEAS highlights the various data systems and activities used for monitoring of the LEAs. Those data systems and activities are used in the following manner:

- Improvement of program and systems operations
- Improved/Sustained compliance and improved performance
- Inform technical assistance and new initiatives

The data gathered through the various systems (monitoring, self-assessment, STARS, due process hearings and State complaints) are used to improve programs at the State level and the LEA level. Data are examined over time in order to have an understanding of what is happening and to determine if there are isolated problems or systemic issues. Correlations are drawn with multiple data points at the State level and LEA level.

The data from the data systems are used to ensure improved and sustained compliance. This is done through the correction of the individual cases of noncompliance (prong one) the review of updated data and information to ensure the LEA is implementing the specific regulatory requirements (prong two). The LEAs participation in the Root Cause Analysis identifies issues at the systems level that are addressed through strategies in the improvement plan or CAP in order to sustain performance.

Data from the State's data system is used to inform targeted technical assistance and professional development at the State level and at the LEA level. Section 618 data, SPP indicator data, dispute and alternative dispute data are used to provide the large scale professional development for the LEAs at the Directors' academies and the monthly webinars. This information is also used to develop technical assistance manuals or guidance documents.

LEA level data is examined by SEB staff to determine what type of targeted technical assistance is needed. The data examined includes the indicator data, self-assessments, root cause analysis and rubrics. The SEB staff works directly with the LEA on how to use data to inform decision-making and the development of improvement strategies to be included in the EPSS improvement plans or CAP. The level of collaboration and prescription depends on the LEAs annual determination.

Tiers of Interventions and Tiers of Sanctions are applied as part of the Targeted Technical Assistance system. **The Tiers are attached to this section.**

Although the majority of the targeted technical assistance focuses on compliance and the improvement of the State's and LEAs determination, the improvement of educational results and functional outcomes for all children with disabilities is also addressed.

Results Data

Graduation, drop-out, and post-school outcomes

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If LEAs miss the targets for these indicators, they must include strategies in their EPSS improvement plan or CAP. Targeted technical assistance can be provided through the Special Education Bureau, Regional Education Cooperative and the Utah State University Technical Assistance for Excellence in Special Education center. LEAs are referred to the National Technical Assistance Center on Transition (NTACT) and the National Post School Outcomes Center (NPSO).

Least Restrictive Environment (students aged 6 – 21)

If the LEA misses the target for the LRE indicator for students aged 6 – 21, they must include it in their improvement plan or CAP. The LEA examines its data to determine why the target was missed. Data is reviewed by grade level, school, disability, and race and ethnicity. The LEA also reviews individual IEPs to glean what is written in the LRE statements.

The state recommends an IEP form to address the LRE consideration. The following three questions must be answered when considering the LRE continuum:

1. Explain why supplementary aids and services are not adequate to meet the student's needs in the general education class [34 CFR §300.320 (a)(4), and 34 CFR §300.114 (a)(2)(ii)]:
2. Explain how placement in a special education setting will be more advantageous in meeting student's needs [34 CFR §300.320 (a)(4)(iii)]:
3. Explain why placement in a general education setting is reduced or limited and what is being done to reintegrate the student back to a general education setting [34 CFR §300.320 (a)(5)]:

Preschool Least Restrictive Environment (students aged 3 – 5)

Preschool data is also reviewed annually. LEAs are encouraged to increase the number of typically developing peers in the regular preschool settings. If the LEA has one of the State funded Pre-Kindergarten programs, LEAs are encouraged to consider four-year-olds with disabilities when enrolling students in their programs. The LEAs must answer the three questions above when considering the preschool LRE environment. This area is also addressed in the EPSS or CAP.

Preschool outcome data are collected on every student through a census data collection. The data is used to write IEP goals. The data is entered into STARS by the students' unique identification number, and can be accessed by the LEA for future use and planning.

LEAs are referred to the National Early Childhood Technical Assistance Center (NECTAC) for promising and evidence based practices.

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Professional Development System:

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

Data from the State's data system are used to inform targeted technical assistance and professional development at the State level and at the LEA level. Section 618 data, SPP indicator data, dispute and alternative dispute data are used to provide the large-scale professional development for the LEAs at the Directors' academies and the monthly webinars. This information is also used to development technical assistance manuals or guidance documents.

Each year the LEA special education directors and coordinators are surveyed and asked to identify their professional development needs. Data from these surveys along with data from the State's monitoring system are utilized to develop the State's professional development system. Mandatory webinars or trainings are provided when updates are provided to federal and state laws. Two face-to-face and one virtual academy are provided annually with the assistance and support of the Regional Education Cooperative (REC) and the New Mexico Coalition of Administrators of Special Education (NMCASE). The special education bureau staff with the support of the REC presents monthly webinars. All webinars are archived for further use at the State or LEA level. On-line modules for teachers and principals that are funded by the state are provided on the REC's website. The Special Education Bureau provides financial support to NMCASE to assist them with the mentoring program for new special education directors. Funding for professional development and technical assistance is provided in accordance with 34 CFR Sec. 300.704(b)(4)(ii). Full inclusion seminar for preschool staff was provided in December of 2015 to provide direct technical assistance to schools in order to assure that inclusion services are being offered. In addition the special education bureau has contracted with the University of New Mexico to provide coaching to schools throughout the state to provide direct support and mentor ship to teachers and administrators.

Individual LEAs can be provided additional professional development as needed in accordance with the Levels of Intervention, Tiers of Intervention and Tiers of Sanctions. This is determined by district's data from the indicators, root cause analysis, self-assessments, review of policies, procedures and practices, dispute resolution and alternative dispute resolution.

Section 616(a)(2) of the IDEA requires that the primary focus of IDEA monitoring be on improving educational results and functional outcomes for children with disabilities, and ensuring that States meet the IDEA program requirements.

Many of the indicators in the State Performance Plan (SPP) focus on compliance with the IDEA. Indicators 4B, 9, 10, 11, 12 and 13 measure the State's and LEAs compliance with specific IDEA regulations. As part of the Results Driven Accountability (RDA) Framework, Indicator 17, State Systemic Improvement Plan (SSIP) is related to SPP Indicator 3 and focuses on improving reading growth rates of students with disabilities in grades K-3. Detailed information and results about SSIP will be located under Indicator 17 of this report which is required to be submitted no later than April 1, 2017.

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Stakeholder Involvement: apply this to all Part B results indicators

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

On December 8 and 9, 2016 State Performance Plan and Annual Performance Report indicator data were presented to the State's Individuals with Disabilities Education Act State Advisory Panel. The panel members had the opportunity to review FFY 15 (July 1, 2015 – June 30, 2016) data and the State's progress or slippage by each indicator. After the FFY 15 data was reviewed, the advisory panel provided input and maintain target.

At the State's IDEA Advisory Panel on December 8 and 9, 2016, the panel gave input on the State Systemic Improvement Plan (SSIP) indicator 17. Further detail will be submitted with indicator 17 on April 1, 2017. The IDEA Panel again adopted "Improving Reading Growth Rates" as one of its goals for the 2016-2017 school year and required an annual report on the New Mexico Real Results program.

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Reporting to the Public:

How and where the State reported to the public on the FFY 2014 performance of each LEA located in the State on the targets in the SPP/APR as soon as practicable, but no later than 120 days following the State's submission of its FFY 2014 APR, as required by 34 CFR §300.602(b)(1)(i)(A); and a description of where, on its Web site, a complete copy of the State's SPP, including any revision if the State has revised the SPP that it submitted with its FFY 2014 APR in 2016, is available.

A copy of the PDF version of the FFY 2015 State Performance Plan (SPP) and Annual Performance Report (APR) downloaded from the GRADS 360 site will be posted on the Special Education Bureau's homepage at <http://ped.state.nm.us/SEB/index.html>.

The individual LEA reports (DPRs) are at the following link: http://ped.state.nm.us/ped/SEB_data.html under the heading of "District Profile Report for Students with Disabilities".

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Actions required in FFY 2014 response

OSEP Response

OSEP notes that part of New Mexico's FFY 2014 exiting data that is used in the RDA Matrix was suppressed, based on Department-approved privacy protection methodology. Therefore, the "Percentage of Children with Disabilities who Graduated with a Regular High School Diploma" was scored as "N/A" on the Matrix.

Required Actions

The State's IDEA Part B determination for both 2016 and 2017 is Needs Assistance. In the State's 2017 determination letter, the Department advised the State of available sources of technical assistance, including OSEP-funded technical assistance centers, and required the State to work with appropriate entities. The Department directed the State to determine the results elements and/or compliance indicators, and improvement strategies, on which it will focus its use of available technical assistance, in order to improve its performance. The State must report, with its FFY 2016 SPP/APR submission, due February 1, 2018, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance.

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 1: Graduation**

Monitoring Priority: FAPE in the LRE

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

Historical Data

Baseline Data: 2011

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			70.00%	78.00%		57.00%	67.00%	69.00%	71.80%	71.80%	73.70%
Data		58.00%	52.10%	53.60%	53.10%	57.60%	36.40%	50.50%	56.00%	60.08%	56.49%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≥	75.60%	77.40%	79.30%	81.20%

Key:

Targets: Description of Stakeholder Input

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017. The targets utilized through FFY 2014 are aligned with the Elementary and Secondary Education Act (ESEA) targets and cannot be changed.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	10/4/2016	Number of youth with IEPs graduating with a regular diploma	1,915	
SY 2014-15 Cohorts for Regulatory Adjusted-Cohort Graduation Rate (EDFacts file spec C151; Data group 696)	10/4/2016	Number of youth with IEPs eligible to graduate	3,228	null
SY 2014-15 Regulatory Adjusted Cohort Graduation Rate (EDFacts file spec C150; Data group 695)	10/4/2016	2014-15 Regulatory four-year adjusted-cohort graduation rate table	59.32%	Calculate <input type="checkbox"/>

FFY 2015 SPP/APR Data

Number of youth with IEPs in the current year's adjusted cohort graduating with a regular diploma	Number of youth with IEPs in the current year's adjusted cohort eligible to graduate	FFY 2014 Data	FFY 2015 Target	FFY 2015 Data
1,915	3,228	56.49%	75.60%	59.32%

Graduation Conditions Field

Provide the four-year graduation cohort rate. The four-year graduation rate follows a cohort, or a group of students, who begin as first-time 9th graders in a particular school year and who graduate with a regular high school diploma in four years or less. An extended-year graduation rate follows the same cohort of students for an additional year or years. The cohort is "adjusted" by adding any students transferring into the cohort and by subtracting any students who transfer out, emigrate to another country, or die during the years covered by the rate.

Under 34 C.F.R. §200.19(b)(1)(iv), a "regular high school diploma" means the standard high school diploma awarded to students in a State that is fully aligned with the State's academic content standards and does not include a GED credential, certificate of attendance, or any alternative award. The term "regular high school diploma" also includes a "higher diploma" that is awarded to students who complete requirements above and beyond what is required for a regular diploma.

The four-year graduation rate follows a cohort, or a group of students, who begin as first-time 9th graders in a particular school year and who graduate with a regular high school diploma in four years or less. An extended-year graduation rate follows the same cohort of students for an additional year or years. The cohort is "adjusted" by adding any students transferring into the cohort and by subtracting any students who transfer out, immigrate to another country, or die during the years covered by the rate.

Graduation requirements 23-13-1.1 NMSA 1978 (standard option) are:

A. At the end of grades eight through eleven, each student shall prepare an interim next-step plan that sets forth the coursework for the grades remaining until high school graduation. Each year's plan shall explain any differences from previous interim next-step plans shall be filed with the principal of the student's high school and shall be signed by the student, the student's parent and the student's guidance counselor or other school official charged with coursework planning for the student.

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B. Each student must complete a final next-step plan during the senior year and prior to graduation. The plan shall be filed with the principal of the student's high school and shall be signed by the student, the student's parent and the student's guidance counselor or other school official charged with coursework planning for the student.

C. An individualized education program that meets the requirements of Subsections A and B of this section and that meets all applicable transition and procedural requirements of the federal Individuals with Disabilities Education Act for a student with a disability shall satisfy the next-step plan requirements of this section for that student.

D. Local school board shall ensure that each high school student has the opportunity to develop a next-step plan based on reports of college and workplace readiness assessments, as available, and other factors and is reasonably informed about curricular and course options, including honors or advanced placement courses, dual-credit courses, distance learning courses, career clusters, pre-apprenticeship programs or remediation programs that the college and workplace readiness assessments indicate to be appropriate;

(1) opportunities available that lead to different post-high-school options; and

(2) alternative opportunities available if the student does not finish a planned curriculum.

E. The secretary shall:

(1) establish specific accountability standards for administrators, counselors, teachers and school district staff to ensure that every student has the opportunity to develop a next-step plan;

(2) promulgate rules for accredited private schools in order to ensure substantial compliance with the provisions of this section;

(3) monitor compliance with the requirements of this section; and

(4) compile such information as is necessary to evaluate the success of next-step plans and report annually, by December 15, to the legislative education study committee and the governor.

F. Once a student has entered ninth grade, the graduation requirements shall not be changed for that student from the requirements specified in the law at the time the student entered ninth grade.

G. Successful completion of a minimum of twenty-four units aligned to the state academic content and performance standards shall be required for graduation. These units shall be as follows:

(1) four units in English, with major emphasis on grammar and literature;

(2) three units in mathematics, at least one of which is equivalent to the algebra 1 level or higher;

(3) three units in science, two of which shall have a laboratory component;

(4) three units in social science, which shall include United States history and geography, world history and geography and government and economics;

(5) one unit in physical education;

(6) one unit in a career cluster course; workplace readiness or a language other than English;

(7) one-half unit in New Mexico history for students entering the ninth grade beginning in the 2005-2006 school year; and

(8) nine elective units and seven and one-half elective units for students entering the ninth grade in the 2005-2006 school year that meet department content and performance standards. Student service learning shall be offered as an elective. Financial literacy shall be offered as an elective. Pre-apprenticeship programs may be offered as electives. Media literacy may be offered as an elective.

H. For students entering the ninth grade beginning in the 2009-2010 school year, at least one of the units required for graduation shall be earned as an advanced placement or honors course, a dual-credit course offered in cooperation with an institution of higher education or a distance learning course.

I. The department shall establish a procedure for students to be awarded credit through completion of specified career technical education courses for certain graduation requirements.

J. Successful completion of the requirements of the New Mexico diploma of excellence shall be required for graduation for students entering the ninth grade beginning in the 2009-2010 school year. Successful completion of a minimum of twenty-four units aligned to the state academic content and performance standards shall be required to earn a New Mexico diploma of excellence. These units shall be as follows:

(1) four units in English, with major emphasis on grammar, nonfiction writing and literature;

(2) four units in mathematics, of which one shall be the equivalent to or higher than the level of algebra 2, unless the parent submitted written, signed permission for the student to complete a lesser mathematics unit; and provided that a financial literacy course that meets state mathematics academic content and performance standards shall qualify as one of the four required mathematics units;

(3) three units in science, two of which shall have a laboratory component;

(4) three and one-half units in social science, which shall include United States history and geography, world history and geography, government and economics and one-half unit of New Mexico history;

(5) one unit in physical education, as determined by each school district, which may include a physical education program that meets state content and performance standards or participation in marching band, junior reserve officers' training corps or interscholastic sports sanctioned by the New Mexico activities association or any other co-curricular physical activity;

(6) one unit in one of the following: a career cluster course, workplace readiness or a language other than English; and

(7) seven and one-half elective units that meet department content and performance standards. Student service learning shall be offered as an elective. Financial literacy shall be offered as an elective. Pre-apprenticeship programs may be offered as electives. Media literacy may be offered as an elective.

K. For students entering the eighth grade in the 2012-2013 school year, a course in health education is required prior to graduation. Health education may be required in either middle school or high school, as determined by the school district. Each school district shall submit to the department by the beginning of the 2011-2012 school year a health education implementation plan for the 2012-2013 and subsequent school years, including in which grade health education will be required and how the course aligns with department content and performance standards. Health education shall include age appropriate sexual abuse and assault awareness and prevention training that meet department standards developed in consultation with the federal centers for disease control and prevention that are based on evidence-based methods that have proven to be effective.

L. Final examinations shall be administered to all students in all classes offered for credit.

M. Until July 1, 2010, a student who has not passed a state graduation examination in the subject areas of reading, English, mathematics, writing, science and social science shall not receive a high school diploma. The state graduation examination on social science shall include a section on the constitution of the United States and the constitution of New Mexico. If a student exits from the school system at the end of grade twelve without having passed a state graduation examination, the student shall receive an appropriate state certificate indicating the number of credits earned and the grade completed. If within five years after a student exits from the school system the student takes and passes the state graduation examination, the student may receive a high school diploma. Any student passing the state graduation examination and completing all other requirements within five years of entering ninth grade, including a final summer session if completed by August 1, may be counted by the school system in which the student is enrolled as a high school graduate for the year in which completion and examination occur.

N. Beginning with the 2010-2011 school year, a student shall not receive a New Mexico diploma of excellence if the student has not demonstrated competence in the subject areas of mathematics, reading and language arts, writing, social studies and science, including a section on the constitution of the United States and the constitution of New Mexico, based on a standards-based assessment or assessments or a portfolio of standards-based indicators established by the department by rule. The standards-based assessments required in Section 22-2C-4 NMSA 1978 may also serve as the assessment required for high school graduation. If a student exits from the school system at the end of grade twelve without having satisfied the requirements of this subsection, the student shall receive an appropriate state certificate indicating the number of credits earned and the grade completed. If within five years after a student exits from the school system the student satisfies the requirement of this subsection, the student may receive a New Mexico diploma of excellence. Any student satisfying the requirements of this subsection and completing all other requirements within five years of entering ninth grade, including a final summer session if completed by August 1, may be counted by the school system in which the student is enrolled as a high school graduate for the year in which all requirements are satisfied.

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O. As used in this section:

(1) "final next-step plan" means a next-step plan that shows that the student has committed or intends to commit in the near future to a four-year college or university, a two-year college, a trade or vocational program, an internship or apprenticeship, military service or a job;

(2) "interim next-step plan" means an annual next-step plan in which the student specifies post-high school goals and sets forth the coursework that will allow the student to achieve those goals; and

(3) "next-step plan" means an annual personal written plan of studies developed by a student in a public school or other state supported school or institution in consultation with the student's parent and school counselor or other school official charged with coursework planning for the student that includes one or more of the following:

(a) advanced placement or honors courses;

(b) dual-credit courses offered in cooperation with an institution of higher education;

(c) distance learning courses;

(d) career-technical courses; and

(e) pre-apprenticeship programs.

P. The secretary may establish a policy to provide for administrative interpretations to clarify curricular and testing provisions of the Public School Code. Graduation Requirements under Subsection J(13) 6.29.1.9 NMAC (career and ability options) are:

Graduation requirements for issuance of a conditional certificate of transition for students with an IEP. The development of a program of study and the granting of a diploma, or use of a conditional certificate of transition in the form of a continuing or transition individualized educational program (IEP) for students receiving special education services, includes the following governing principles:

(a) The IEP team is responsible for determining whether the student has completed a planned program of study based on the student's strengths, interests, preferences, identified educational and functional needs and long-term educational or occupational goals, making the student eligible to receive either a diploma or a conditional certificate of transition. A conditional certificate of transition allows the student to participate in graduation activities. If a student receives a conditional certificate of transition, the student shall then return to the program specified in the IEP to complete the student's secondary program and meet the requirements for a diploma. In addition, all IEPs shall provide a description of how the student's progress toward meeting annual goals and graduation requirements will be measured, and at what intervals progress will be reported to parents or guardians. A student shall be awarded a diploma upon completion of a planned program of study that meets the requirements of paragraph (b).

(b) A student may be awarded a diploma (Section 22-13-1.1 NMSA 1978) using any of the following programs of study described in (i) through (iii). All IEP team discussion points and decisions identified herein, including the identification of the student's program of study and any student or parent proposals accepted or rejected by the IEP team (if the student has not reached the age of majority), shall be documented on the student's IEP and in the prior written notice (PWN) of proposed action.

(i) A standard program of study is based upon meeting or exceeding all requirements for graduation based on the New Mexico standards for excellence (Subsection J of 6.29.1.9 NMAC) with or without reasonable accommodations of delivery and assessment methods. In addition, a student shall pass all sections of the current state graduation examination(s) administered pursuant to Section 22-13-1.1(i) NMSA 1978 under standard administration or the state-approved accommodations, and shall meet all other standard graduation requirements of the district.

(ii) A career readiness alternative program of study is developed to provide relevance and is based on a student's career interest as it relates to one of the career clusters, with or without reasonable accommodations of delivery and assessment methods. In addition, a student shall take the current state graduation examination(s) administered pursuant to Section 22-13-1.1(K) NMSA 1978, under standard administration or with state-approved accommodations, and achieve a level of competency pre-determined by the student's IEP team; the student shall earn at least the minimum number of credits required by the district or charter school for graduation through standard or alternative courses that address the employability and career development standards with benchmarks and performance standards, as determined by the IEP team. Course work shall include a minimum of four units of career development opportunities and learning experiences that may include any of the following: career readiness and vocational course work, work experience, community-based instruction, student service learning, job shadowing, mentoring or entrepreneurship related to the student's occupational choices. Credits for work experience shall be related to the program of study that the school offers and specific to the district's ability to offer work experience or community-based instruction credits. The student shall achieve competency in all areas of the employability and career development standards with benchmarks and performance standards, as determined by the IEP team and the student's interest as it relates to the career clusters. The program of study shall address the New Mexico content standards with benchmarks and performance standards in other subject areas as appropriate.

(iii) An ability program of study was developed for students who have a significant cognitive disability or severe mental health issues. The IEP goals and functional curriculum course work shall be based on the New Mexico standards with benchmarks and performance standards and employability and career development standards with benchmarks and performance standards. Students in this program of study shall earn the minimum number of credits or be provided equivalent educational opportunities required by the district or charter school, with course work individualized to meet the unique needs of the student through support of the IEP. In addition, a student shall take either the current state graduation examination(s) administered pursuant to Section 22-13-1.1(K) NMSA 1978, under standard administration or with state-approved accommodations, or the state-approved alternate assessment. The student shall achieve a level of competency pre-determined by the student's IEP team on the current graduation examination or the state-approved alternate assessment, and meet all other graduation requirements established by the IEP team.

(c) The new requirements for the career readiness and ability pathways become effective beginning with students graduating in 2009.

(d) By the end of the eighth grade, each student's IEP shall contain a proposed individual program of study for grades nine through twelve. The program of study shall identify by name all course options the student may take and shall align with the student's long-range measurable post-secondary goals and transition services to facilitate a smooth transition to high school and beyond. This program of study shall be reviewed on an annual basis and adjusted to address the student's strengths, interests, preferences and areas of identified educational and functional needs. The IEP team shall document on the IEP the student's progress toward earning required graduation credits and passing the current graduation examination.

(e) A district or charter school shall provide each student, who has an IEP and who graduates or reaches the maximum age for special education services, a summary of the student's academic achievement and functional performance, which shall include recommendations on how to assist the student in meeting post-secondary goals.

(f) Students graduating on the standard program of study shall meet the state's minimum requirements on all sections of the graduation examination. IEP teams shall document a plan of action on the IEP and the PWN to be carried out by both the student and the district or charter school, to ensure that the student will pass all sections of the graduation examination.

(g) To establish a level of proficiency on the current graduation examination or the state-approved alternate assessment for students on a career readiness program of study or ability program of study, IEP teams shall review the student's performance on the first attempt, and establish a targeted proficiency on all sections that are below the state's minimum requirement. For those students who meet participation criteria for the New Mexico alternate assessment, IEP teams shall set targeted levels of proficiency based upon previous performance on the test. If the student has previously been administered the New Mexico alternate assessment and has achieved an advanced level of overall performance, the IEP team shall arrange for the student to participate in the general graduation examination, and shall identify appropriate accommodations that the student may require. IEP teams shall document the targeted levels of proficiency on the IEP and the PWN, outlining the plan of action to be taken by both the student and the district or charter school to ensure that the student will meet the targeted levels of proficiency. Districts or charter schools may submit a written request for a waiver to the secretary in cases where a student has FFY 2013 Part B State Performance Plan (SPP)/Annual Performance Report (APR) 4/17/2015 Page 11 of 72 medical or mental health issues that may result in regression or that negatively influence the student's ability to achieve targeted levels of proficiency. The written request shall be signed by the superintendent or charter school administrator and shall include documentation of the medical or mental health issues.

(h) Changes in programs of study.

(i) Departures from the standard program of study for students receiving special education services and supports shall be considered in the order of the options listed in Subparagraph (b) of Paragraph (13) of Subsection J of 6.29.1.9 NMAC. Any modified program of study may depart from a standard program of study only so far as is necessary to meet an individual student's educational needs as determined by the IEP team. Districts and charter schools are obligated to meet the requirements of IDEA to provide students with IEPs on any one of the three programs of study, and access to the general curriculum in the least restrictive environment. When an alternative program of study is developed, a building administrator or designee who has knowledge about the student shall be a member of the IEP team.

(ii) Districts and charter schools shall document changes from the standard program of study on the PWN. IEP teams shall identify the reasons for changing the student's program of study, shall provide parents with clear concise explanations of the career readiness or ability programs of study, shall notify parents and students of the potential consequences that may limit the student's post-secondary options, and shall make required changes to the IEP and course of study, to ensure that the student meets the requirements of that program of study.

(iii) The IEP team shall not change the program of study for a student entering the final year of high school from the standard program of study to the career readiness program of study, nor from the career readiness program of study to the ability program of study, after the 20th school day of the final year of high school. IEP teams may change a student's program of study from the ability program of study to the career readiness program of study, or from the career readiness program of study to the standard program of study, if the student meets the graduation requirements of that program of study and if the change is made and documented appropriately in a revised IEP

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
and PWN by a properly constituted IEP team in a properly convened meeting.

(iv) Beginning with students entering the 10th grade, districts and charter schools shall maintain an accurate accounting of graduation programs of study for students with IEPs.

Districts and charter schools shall ensure that 80% or more of students with IEPs are in the standard program of study, no more than 10 - 15% of students with IEPs shall graduate in the career readiness program of study, and no more than 1- 3% of students with IEPs shall graduate in the ability program of study. Districts or charter schools exceeding the above maximum percentages shall submit a request for a waiver regarding each student affected. The request for waiver shall include the district name, the high school name, a list of all students on the alternate program of study exceeding the maximum percentage (including student demographics, unique student identifiers and the justification for changing each student's program of study). The waiver request shall be signed and submitted by the superintendent or charter school administrator to the secretary.

(i) A student who receives special education services may be granted a conditional certificate of transition in the form of a continuing or transition IEP when:(i) the IEP team provides sufficient documentation and justification that the issuance of a conditional certificate of transition for an individual student is warranted;

(ii) prior to the student's projected graduation date, the IEP team provides a PWN stating that the student will receive a conditional certificate of transition;

(iii) the district or charter school ensures that a conditional certificate of transition is not a program of study and does not end the student's right to a FAPE;

(iv) the district or charter school ensures that a conditional certificate of transition entitles a student who has attended four years or more of high school to participate in graduation activities, and requires that the student continue receiving special education supports and services needed to obtain the high school diploma; (v) the district or charter school ensures that, prior to receiving a conditional certificate of transition, the student has a continuing or transition IEP; (vi) the student's continuing or transition IEP outlines measures, resources and specific responsibilities for both the student and the district or charter school to ensure that the student receives a diploma.

(j) A student who does not return to complete the program of study as outlined in the continuing or transition IEP will be FFY 2013 Part B State Performance Plan (SPP)/Annual Performance Report (APR) 4/17/2015 Page 12 of 72 considered as a dropout.

(k) A student who receives a conditional certificate of transition is eligible to continue receiving special education services until receipt of a diploma or until the end of the academic year in which the student becomes 22 years of age.

(l) graduation plans shall be a part of all IEPs:

(i) by the end of eighth grade, or by the time the student turns 14 years of age, and concurrent with the development of the student's transition plan in accordance with federal regulations at 34 CFR 300.320;

(ii) when a student returns to a school after an extended absence, and if an IEP program of study may have been developed but needs to be reviewed; or (iii) when evaluations warrant the need for a modified program of study at any time after development of an initial graduation plan.

(m) Graduation plans shall be a part of all of all IEPs and annual reviews, and shall follow the student in all educational settings. Receiving institutions that fall under the department's jurisdiction will recognize these graduation plans, subject to revision by new IEP teams, if appropriate to meet a student's changing needs.

(n) At the exit IEP meeting, the team shall review the student's transition plan, and shall confirm and document that all state and district requirements for graduation under the final IEP have been satisfied. A building administrator who has knowledge about the student shall be a member of this team, and shall sign specifically to verify and accept completed graduation plans, goals and objectives pursuant to (i) - (iii) of Subparagraph (b) of Paragraph (13) of Subsection J of 6.29.1.9 NMAC, or plans for a conditional certificate of transition with a continuing or transition IEP, pursuant to Subparagraph (i) of Paragraph (13) of Subsection J of 6.29.1.9 NMAC. The IEP team shall ensure that the student has current and relevant evaluations, reports or other documentation necessary to support a smooth and effective transition to post-secondary services for a student who will graduate on one of the three programs of study. The school shall arrange for any necessary information to be provided at no cost to the students or parents. The school shall submit a list of students who will receive the diploma through a career readiness or ability program of study to the local superintendent or charter school administrator, using the students' identification numbers. This list shall be totaled and submitted to the local school board or governing body of a charter school. This information shall be treated as confidential in accordance with the FERPA.

(o) Students eligible for special education services are entitled to a FAPE through age 21. If a student turns 22 during the school year, the student shall be allowed to complete the school year. If a student becomes 22 prior to the first day of the school year, the student is no longer eligible to receive special education services

Provide additional information about this indicator (optional)

The State did not meet the target for FFY 15, but did demonstrate an increase of 2.83% from FFY 14 (56.49%) to FFY 15 (59.32%) for Indicator 1.

Over the last six years, the State has invested more in education than ever before, including investments to keep students in school and on track to graduate. For example, teachers and principals have received improved support and professional development through mentorship programs and other resources, and dropout coaches and social workers are in more schools to keep students on track to graduate. Additionally, reading coaches have been added to improve students' foundational skills in earlier grades as an investment in improving graduation rates in the future.

Differentiated monitoring will support and implement Results Driven Accountability (RDA) at targeted middle-school sites. RDA provides technical assistance, instructional support and student intervention in Math and ELA, along with Positive Behavior Intervention Supports (PBIS). By focusing these activities at the middle-school level, the State will review data following the implementation.

Actions required in FFY 2014 response

none

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 2: Drop Out**

Monitoring Priority: FAPE in the LRE

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

Historical Data

Baseline Data: 2013

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≤			0.68%	0.68%	0.77%	0.76%	6.15%	6.13%	6.11%	24.75%	23.72%
Data		0.69%	0.90%	0.87%	6.98%	6.15%	7.51%	6.51%	5.70%	24.75%	23.73%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≤	23.22%	22.97%	22.72%	22.47%

Key:

Targets: Description of Stakeholder Input

The State used the baseline measurement established in the FFY 2013 APR for measurement of Percent of youth with IEPs dropping out of high school, in accordance with regulatory requirement (20 U.S.C. 1416 (a)(3)(A)). The state adopted Option 1. Option 1 uses the same data as used for reporting to the Department under IDEA section 618.

In the FFY 2014 APR, data was provided for those students who dropped out of school using Option 1. In FFY 2014, using 13-14 data, 23.73% of students with IEPs dropped out of school; In FFY 2015, using 14-15 data, 26.30% of students with IEPs (excluding gifted education). Comparing these two rates, the State experienced slippage as the dropout rate decreased by 2.57% and did not meet the target for FFY 15 at 23.22%.

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2014-15 Exiting Data Groups (EDFacts file spec C009; Data Group 85)	6/7/2016	Number of youth with IEPs (ages 14-21) who exited special education by graduating with a regular high school diploma (a)	1,909	null
SY 2014-15 Exiting Data Groups (EDFacts file spec C009; Data Group 85)	6/7/2016	Number of youth with IEPs (ages 14-21) who exited special education by receiving a certificate (b)	n	null
SY 2014-15 Exiting Data Groups (EDFacts file spec C009; Data Group 85)	6/7/2016	Number of youth with IEPs (ages 14-21) who exited special education by reaching maximum age (c)	33	null
SY 2014-15 Exiting Data Groups (EDFacts file spec C009; Data Group 85)	6/7/2016	Number of youth with IEPs (ages 14-21) who exited special education due to dropping out (d)	697	null
SY 2014-15 Exiting Data Groups (EDFacts file spec C009; Data Group 85)	6/7/2016	Number of youth with IEPs (ages 14-21) who exited special education as a result of death (e)	11	null

FFY 2015 SPP/APR Data

Number of youth with IEPs who exited special education due to dropping out	Total number of high school students with IEPs	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
697	2,650	23.73%	23.22%	26.30%

Explanation of Slippage

In the FFY 2014 APR, data was provided for those students who dropped out of school using Option 1. In FFY 2014, using 13-14 data, 23.73% of students with IEPs (excluding gifted education) dropped out of school; In FFY 2015, using 14-15 data, 26.30% of students with IEPs (excluding gifted education) dropped out of school. Comparing these two rates, the State experienced slippage as the dropout rate decreased by 2.57%. The State did not meet its target of 23.22%.

To improve State performance on this indicator, the State will provide differentiated monitoring and technical assistance.

Additionally, the State has hired dropout prevention coaches and truancy coaches to work with students at risk. In the future, we intend to provide more supports and alternative options in order to keep students in school through graduation.

Actions required in FFY 2014 response

none

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3A: Districts Meeting AYP/AMO for Disability Subgroup**

Monitoring Priority: FAPE in the LRE

Results indicator: 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/AMO 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))

Historical Data

Baseline Data: 2012

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥						50.00%	55.50%			60.50%	3.00%
Data					44.40%	1.69%	0%	1.64%	0.92%	0.95%	

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≥	5.00%	8.00%	12.00%	20.00%

Key:

Targets: Description of Stakeholder Input

With the reauthorization of the Elementary and Secondary Education Act (ESEA) also known as the Every Student Succeeds Act (ESSA), states are not required to report on this indicator for FFY 2015.

FFY 2015 SPP/APR Data

Does your State have an ESEA Flexibility Waiver of determining AYP?

Yes No

Are you reporting AYP or AMO?

AYP AMO

Number of districts in the State	Number of districts that met the minimum "n" size	Number of districts that meet the minimum "n" size AND met AMO	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
151	null	null		5.00%	

Actions required in FFY 2014 response

none

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3B: Participation for Students with IEPs**

Monitoring Priority: FAPE in the LRE

Results indicator: 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/AMO 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))

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Reading	A Overall	2014	Target ≥			95.00%	95.10%		95.00%	95.00%	95.00%	95.00%	98.40%	95.00%
			Data		98.00%	99.90%	97.74%	97.80%	98.79%	98.90%	98.83%	98.60%	98.71%	97.75%
Math	A Overall	2014	Target ≥			95.20%	95.30%		95.00%	95.00%	95.00%	95.00%	98.20%	95.00%
			Data		98.00%	99.90%	97.86%	97.70%	98.77%	98.90%	98.89%	98.50%	98.53%	97.82%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

	FFY	2015	2016	2017	2018
Reading	A ≥ Overall	95.00%	95.00%	95.00%	95.00%
Math	A ≥ Overall	95.00%	95.00%	95.00%	95.00%

Key:

Targets: Description of Stakeholder Input

During FFY 2015 (July 1, 2015 through June 30, 2016) the State administered the Partnership for Assessment of Readiness for College and Careers (PARCC) in reading/language arts and math. A new baseline was established for this indicator using FFY 2014 data. The states data can be accessed on the link below.

http://ped.state.nm.us/ped/SEB_data.html

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017.

FFY 2015 SPP/APR Data: Reading Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
A Overall	33,319	31,911	97.75%	95.00%	95.77%

FFY 2015 SPP/APR Data: Math Assessment

Group Name	Number of Children with IEPs	Number of Children with IEPs Participating	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
A Overall	33,241	31,716	97.82%	95.00%	95.41%

Public Reporting Information

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

The FFY 2015 performance data along with data from previous years can be viewed at

http://ped.state.nm.us/ped/SEB_data.html

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

The IDEA at 34 CFR 300.160(f) requires States to report assessment data, for participation rates of students with disabilities and the proficiency rates of students with disabilities at the State, district and/or school level:

<http://ped.state.nm.us/SEB/data/index.html>.

Actions required in FFY 2014 response

none

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 3C: Proficiency for Students with IEPs**

Monitoring Priority: FAPE in the LRE

Results indicator: 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/AMO 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))

Historical Data

	Group Name	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Reading	A Overall	2014	Target ≥			24.00%	28.00%		64.00%	75.00%	75.00%	56.70%	56.70%	5.13%
			Data		17.00%	18.00%	18.42%	20.10%	19.85%	17.80%	25.11%	16.60%	16.33%	5.13%
Math	A Overall	2014	Target ≥			17.00%	22.00%		52.00%	66.00%	66.00%	50.00%	50.00%	5.66%
			Data		10.00%	12.10%	12.84%	15.50%	16.33%	15.47%	15.31%	13.70%	13.48%	5.66%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

	FFY	2015	2016	2017	2018
Reading	A ≥ Overall	65.30%	65.30%	69.70%	74.00%
Math	A ≥ Overall	60.00%	60.00%	65.00%	70.50%

Key:

Targets: Description of Stakeholder Input

During FFY 2015 (July 1, 2015 through June 30, 2016) the State administered the Partnership for Assessment of Readiness for College and Careers (PARCC) in reading/language arts and math. A new baseline was established for this indicator using FFY 2014 data. The states data can be accessed on the link below.

http://ped.state.nm.us/ped/SEB_data.html

A waiver application for ESSA is pending submission by the State. Targets will be revised upon review and approval of the waiver application by the Department of Education.

FFY 2015 SPP/APR Data: Reading Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
A Overall	30,702	1,967	5.13%	65.30%	6.41%

FFY 2015 SPP/APR Data: Math Assessment

Group Name	Children with IEPs who received a valid score and a proficiency was assigned	Number of Children with IEPs Proficient	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
A Overall	30,399	2,095	5.66%	60.00%	6.89%

Public Reporting Information

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

The FFY 2015 performance data along with data from previous years can be viewed at <http://www.ped.state.nm.us/SEB/data/index.html>.

The IDEA at 34 CFR 300.160(f) requires States to report assessment data, for participation rates of students with disabilities and the proficiency rates of students with disabilities at the State, district and/or school level. New Mexico's data is available at 7/19/2017

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

<http://ped.state.nm.us/SEB/data/index.html>. At the bottom of the webpage, click on 2015-2016 New Mexico Standards Based Assessment and Alternate Reports."

Provide additional information about this indicator (optional)

A new state plan application for ESSA is pending submission by the State. Targets will be revised upon review and approval of the state plan application by the Department of Education.

Actions required in FFY 2014 response

none

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4A: Suspension/Expulsion**

Monitoring Priority: FAPE in the LRE

Results indicator: Rates of suspension and expulsion:

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≤			6.20%	2.20%	2.20%	0%	1.96%	1.96%	1.96%	1.96%	1.93%
Data		5.60%	4.50%	0%	0%	0%	1.96%	0%	0%	0%	1.37%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≤	1.90%	1.87%	1.84%	1.81%

Key:

Targets: Description of Stakeholder Input

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017. Both groups had the opportunity to provide input on the measurable improvement activities.

FFY 2015 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts that have a significant discrepancy	Number of districts in the State	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
1	146	1.37%	1.90%	0.68%

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

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

State's definition of "significant discrepancy" and methodology

Data on the suspensions and expulsions of children with disabilities was derived from the IDEA Section 618 data submitted by the LEAs via the STARS data warehouse as part of the annual End-of-Year data collection. The information was submitted by the student's unique identification number. The data was verified through the checks and balances of STARS and validated by SEB staff.

This data was used to populate the Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) for the school year 2014-2015 due in November 2015. Information Collection 1820-0621 (Report of Children with Disabilities Unilaterally Removed or Suspended/Expelled for More than 10 Days) was used to determine significant discrepancy. The State defines a significant discrepancy in the rates of suspension and expulsions of greater than 10 days in a school year for students with IEPs (disabilities) among LEAs in the State if the following criteria are met:

The LEA must have an "n" size of greater than 10 suspensions and expulsions of students with disabilities greater than 10 days in a school year; and

The rate of suspensions/expulsions for students with IEPs is more than 1% higher than the average rate of suspensions and expulsions greater than 10 days among LEAs in the State.

The rates of suspensions and expulsions of greater than 10 days in a school year for students with IEPs were compared among LEAs in the State. If the LEA had an "n" size of greater than 10 students with disabilities suspended or expelled greater than 10 days and a long term suspension and expulsion rate for students with IEPs that was 1% or higher than the State average (1.2% or above), they were considered to have a significant discrepancy in the rates of suspensions and expulsions.

Out of 146 LEAs, 144 were excluded from the calculation because the district did not meet the minimum "n" size.

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Actions required in FFY 2014 response

none

Note: Any actions required in last year's response that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2014 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2015 using 2014-2015 data)

Description of review

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

Two LEAs out of 146 met the "n" size of greater than 10 suspensions and expulsions of students with disabilities for greater than 10 days in a school year. One hundred forty-four LEAs did not meet the "n" size of greater than 10 suspensions and expulsions of students with disabilities for greater than 10 days in a school year.

During FFY 2015 (using 2014-2015 data), one LEA in the State was considered to have a significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year of students with IEPs in which the policies, procedures, or practices contributed to the significant discrepancy.

The IEPs were reviewed for all students who were suspended or expelled for greater than 10 days through a desk audit completed by Special Education Bureau. The IEP checklist is attached to this indicator.

Based upon the review of the policies, procedures, and practices along with the student's IEPs, the State determined the one LEA was not meeting the requirements of 34 CFR §170(b). The one LEA was notified in writing of the non-compliance in accordance with the Integrated Special Education Accountability System (ISEAS).

One LEA was found noncompliant. The LEA's policies, procedures and practices were reviewed in the fall of 2015.

Prior to the State considering a LEA compliant with this indicator, the State completes a subsequent review of an updated set of data in accordance with the OSEP 09-02 Memorandum (dated October 17, 2008). Based upon this review of data and the correction of the LEA's practices, it would be determined that the LEA is correctly implementing the specific regulatory requirements.

- The State DID NOT identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b)
- The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b). If YES, select one of the following:
 - The State DID ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Based upon the review of the policies, procedures, and practices along with the student's IEPs, the State determined one LEA was not meeting the requirements of 34 CFR §300.170(b). The one LEA was notified in writing of the non-compliance in accordance with the Integrated Special Education Accountability System (ISEAS).

The one LEA was required to revise policies, procedures, and practices. The one LEA was required to review all areas of noncompliance including the development of IEPs, implementation of IEPs, use of positive behavioral interventions and supports, procedural safeguards, and adequate data submission that were identified through the self-assessment and were verified by the State through a review of the policies, procedures and practices. In addition, the IEPs were reviewed by the State for all students who were suspended or expelled for greater than 10 days. The LEA also had an on-site review of the IEPs for all students who were suspended or expelled for greater than 10 days, led by the former State Director of Special Education Bureau. The on-site IEP review also included a review of the updated FFY 16 data. In addition, the former State Director of Special Education Bureau conducted training sessions with all special education teams from the LEA's middle school on correct procedures for implementing disciplinary actions.

The one LEA was placed on corrective action plans developed by the State, which included technical assistance in each area identified by the self-assessment, policies, procedures and practices reviews, IEP reviews and on-site review.

- The State did NOT ensure that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Correction of Findings of Noncompliance Identified in FFY 2014

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	2	null	0

FFY 2014 Findings of Noncompliance Verified as Corrected

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

On page 38 of last year's FFY 2014 APR, the state reported that two LEAs missed the indicator in FFY 2014 (initial findings).

The two LEAs were found to be non-compliant with Part B requirements. Each LEA was required to complete a self-assessment. All areas of non-compliance were reviewed including the development of IEPs, implementation of IEPs, use of positive behavioral interventions and supports, procedural safeguards, and adequate data submission. The self-assessment was reviewed by the SEB through an examination of the policies, procedures and practices. In addition, the State Special Education Director conducted an on-site review of student IEP's identified with more than 10 days of suspension to include a review of the FFY16 data. In each case the LEAs were required by the SEB to develop a corrective action plan that included technical assistance in each area identified. Lastly, the SEB has identified that technical assistance is needed in this area and is in the process of developing training modules including data collection, development of functional behavioral assessments, implementation of behavior intervention plans, and progress monitoring of behavior plans.

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

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

The State completed a subsequent review of the end-of-the-year data for FFY 2016 (discipline data from the 2015-2016 school year submitted June 2016), consistent with the OSEP 09-02 memo, for the two LEAs identified with non-compliance. Based on the subsequent review of data submitted by the LEAs for FFY 2016, it was determined that both of the LEAs did not have a finding having corrected the non-compliance. In addition to the subsequent data review, the SEB has reviewed all IEP's that exceeded 10 days of suspension to determine if policies, procedures and practices were corrected. It was determined that both LEAs met the target with 100%.

OSEP Response

The State must report, in the FFY 2016 SPP/APR, on the correction of noncompliance that the State identified in FFY 2015 as a result of the review it conducted pursuant to 34 CFR §300.170(b). When reporting on the correction of this noncompliance, the State must report that it has verified that each district with noncompliance identified by the State: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2016 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 4B: Suspension/Expulsion**

Monitoring Priority: FAPE in the LRE

Compliance indicator: Rates of suspension and expulsion:

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

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

Historical Data

Baseline Data: 2009

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data						0%	0%	0%	0%	0%	1.37%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target	0%	0%	0%	0%

FFY 2015 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts that have a significant discrepancy, by race or ethnicity	Number of those districts that have policies, procedures, or practices that contribute to the significant discrepancy and do not comply with requirements	Number of districts in the State	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
2	1	146	1.37%	0%	0.68%

All races and ethnicities were included in the review

State's definition of "significant discrepancy" and methodology

Data for Indicator 4B were gathered from the Information Collection 1820-0621 (Report of Children with Disabilities Subject to Disciplinary Removal) submitted to OSEP in November 2015 (discipline data from the 2014-2015 school year). The LEAs were required to submit their discipline data during the End-Of-Year (EOY) data collection period, which was submitted to the State on June 30, 2015. The suspension and expulsion data was disaggregated by LEA and race and ethnicity to determine if the LEA had a significant discrepancy, by race and ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs.

In order for a LEA to be flagged for possible significant discrepancy, by race and ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEP's, the LEA must meet the following criteria:

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

This represents the first stage (flagging) in the significant discrepancy determination process. In order to determine if the LEA had significant discrepancy by race and ethnicity in the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs, and to determine if the LEAs policies, procedures, or practices contributed to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, use of positive behavioral interventions and supports, and procedural safeguards, the LEA is required to complete the Indicator 4 self-assessment attached to this indicator. The State reviews the self-assessment along with the LEAs policies, procedures and practices, including student data. After that review, it is determined if the deficient or noncompliant policies, procedures, and practices contributed to the significant discrepancy in the rates of suspension and expulsions by race and ethnicity for children with IEPs.

The state has established a minimum "n" size of greater than 10 students with IEPs in any of the race or ethnicity categories who have suspensions and expulsions of greater than 10 days in a school year.

If the LEA had an "n" size of greater than 10 students with disabilities with suspensions or expulsions greater than 10 days and a long term suspension and expulsion rate for students with IEPs that was 1% or higher than the State average, they were considered to have a significant discrepancy in the rates of suspensions and expulsions.

Two LEAs out of 146 met the "n" size of greater than 10 suspensions and expulsions in any of the race or ethnicity categories of greater than 10 days in a school year. One hundred forty-four LEAs did not meet the "n" size of greater than 10 suspensions and expulsions of students in the race or ethnicity categories of greater than 10 days in a school year.

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Actions required in FFY 2014 response

none

Note: Any actions required in last year's response that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

FFY 2014 Identification of Noncompliance

Review of Policies, Procedures, and Practices (completed in FFY 2015 using 2014-2015 data)

Description of review

During FFY 2015 (using 2014-2015 data), two of the LEAs in the State were considered to have a significant discrepancy by race and ethnicity in the rates of suspensions and expulsions of greater than 10 days in a school year of students with IEPs in which the policies, procedures, or practices contributed to the significant discrepancy. The two LEAs identified were required to complete the Indicator 4 self-assessment located in Appendix. The self-assessment includes the LEAs use of positive behavioral interventions and supports and the implementation of the procedural safeguards. The State also used the self-assessment to review the LEAs policies, procedures, and practices relating to the development and implementation of IEPs. In addition, the IEPs were reviewed by the State for all students who were suspended or expelled for greater than 10 days. In addition, one of the LEAs also had an on-site review of the IEPs by the Special Education Bureau. The IEP checklist is attached to this indicator.

Based upon the review of the policies, procedures, and practices along with the student's IEPs, the State determined the two LEAs were not meeting the requirements of 34 CFR §300.170(b). The two LEAs were notified in writing of the non-compliance in accordance with the Integrated Special Education Accountability System (ISEAS).

Two LEAs were found noncompliant. The LEAs policies, procedures and practices were reviewed in the fall of 2016.

The State completed a subsequent review of the end-of-the-year data for FFY 2016 (discipline data from the 2015-2016 school year submitted June 2016), consistent with the OSEP 09-02 memo, for the two LEAs identified with non-compliance. Based on the subsequent review of data submitted by the LEAs for FFY 2016, it was determined that one of the LEAs did not have a finding having corrected the non-compliance. In addition to the subsequent data review, the SEB has reviewed all IEPs that exceeded 10 days of suspension to determine if policies, procedures and practices were corrected. It was determined that the LEA has met the target with 100%.

One LEA was identified to have a continued finding of non-compliance according to the LEA's STARS data. In addition to the subsequent data review, the SEB has requested all IEPs that exceeded 10 days of suspension to determine if policies, procedures and practices are consistent with the initial finding. An additional subsequent data review, consistent with the OSEP 09-02 memo, will be completed with a review of the LEA's data for the 2016-2017 school year for all students with IEPs having over 10 days of suspension from the first day of school until the 120th day. The State will update the status on the one LEA with remaining non-compliance during the open submission of the Annual Performance Report in April 2017.

When reporting on the correction of noncompliance, the State must report, in its FFY 2015 APR, that it has verified that each LEA with noncompliance identified in FFY 2014 for this indicator: (1) is correctly implementing 34 CFR §300.124(b) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has developed and implemented the IEP, although late, for any child for whom implementation of the IEP was not timely, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2015 APR, the State must describe the specific actions that were taken to verify the correction.

One LEA was identified with continuing noncompliance. When the State identifies noncompliance with Part B requirements, the LEA is required to revise policies, procedures, and practices. The revision includes any areas of noncompliance (development of IEPs, implementation of IEPs, use of positive behavioral interventions and supports, procedural safeguards), which are identified through the self-assessment and are verified by the State through a review of the policies, procedures, and practices. Based upon the self-assessment, an LEA is required to develop a corrective action plan. The corrective action plan is monitored by the Special Education Bureau (SEB). The LEA must meet all the conditions of the corrective action plan in a timely manner. All individual cases of noncompliance must be corrected.

The one LEA was notified in writing of the non-compliance in accordance with the Integrated Special Education Accountability System (ISEAS).

Prior to the State considering an LEA compliant with this indicator, the State completes a subsequent review of an updated set of data. Based upon this review of data and the correction of the LEAs practices, it would be determined that the LEA is correctly implementing the specific regulatory requirements.

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

The State DID identify noncompliance with Part B requirements as a result of the review required by 34 CFR §300.170(b).

Describe how the State ensured that such policies, procedures, and practices were revised to comply with applicable requirements consistent with OSEP Memorandum 09-02, dated October 17, 2008.

Two LEAs were found to be non-compliant with Part B requirements. Each LEA was required to complete a self-assessment. All areas of non-compliance were reviewed including the development of IEPs, implementation of IEPs, use of positive behavioral interventions and supports, procedural safeguards, and adequate data submission. The self-assessment was reviewed by the SEB through an examination of the policies, procedures and practices. In addition, the State Special Education Director conducted an on-site review of student IEPs identified with more than 10 days of suspension to include a review of the FFY16 data. In each case the LEAs were required by the SEB to develop a corrective action plan that included technical assistance in each area identified. Lastly, the SEB has identified that technical assistance is needed in this area and is in the process of developing training modules including data collection, development of functional behavioral assessments, implementation of behavior intervention plans, and progress monitoring of behavior plans.

The State provided/will provide the following technical assistance to the non-compliant LEA:

1. On-site support to the LEA including consultation services to support behavior strategies. The on-site support included observations, recommendations, consultations, and follow up. Behavior coaches were hired to support the LEA to implement the behavior strategies by assisting teachers and other service providers. LEA-wide professional development and delivering training was provided to assist the LEA in implementing appropriate behavior support skills including analyzing of behavioral data.
2. Online behavior modules are in production. These behavior modules focus on student behavior strategies, in alignment with the SEB document "Addressing Student Behavior: A guide for educators". This asynchronous training will be made available to all LEAs statewide including the one non-compliant LEA.
3. The LEA received a technical support visit from the State Director of Special Education.

The State completed a subsequent review of the end-of-the-year data for FFY 2016 (discipline data from the 2015-2016 school year submitted June 2016), consistent with the OSEP 09-02 memo, for the two LEAs identified with non-compliance. Based on the subsequent review of data submitted by the LEAs for FFY 2016, it was determined that one of the LEAs did not have a finding having corrected the non-compliance. In addition to the subsequent data review, the SEB has reviewed all IEPs that exceeded 10 days of suspension to determine if policies, procedures and practices were corrected. It was determined that the LEA has met the target with 100%.

Based on the subsequent data review, consistent with OSEP Memo 09-02, one LEA was identified to have a continued finding of non-compliance according to the LEA's STARS data. In addition to the subsequent data review, the SEB has requested all IEPs that exceeded 10 days of suspension to determine if policies, procedures and practices are consistent with the initial finding. The State determined that the one LEA was not meeting the requirements of 34 CFR §300.124(b) (i.e., achieved 100% compliance), the one non-compliant LEA was placed on a corrective action plan.

An additional subsequent data review, consistent with the OSEP 09-02 memo, will be completed with a review of the LEA's data for the 2015-2016 school year for all students with IEPs having over 10 days of suspension from the first day of school until the 120th day. The State will update the status on the one LEA with remaining non-compliance during the open submission of the Annual Performance Report in April 2017.

When reporting on the correction of noncompliance, the State must report, in its FFY 2015 APR, that it has verified that each LEA with noncompliance identified in FFY 2014 for this indicator: (1) is correctly implementing 34 CFR §300.124(b) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has developed and

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implemented the IEP, although late, for any child for whom implementation of the IEP was not timely, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2015 APR, the State must describe the specific actions that were taken to verify the correction.

Correction of Findings of Noncompliance Identified in FFY 2014

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
2	1	0	1

FFY 2014 Findings of Noncompliance Verified as Corrected

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

On page 42 of last year's FFY 2013 APR, the state reported that two LEAs missed the indicator in FFY 2013 (initial findings).

The two LEAs were found to be non-compliant with Part B requirements. Each LEA was required to complete a self-assessment. All areas of non-compliance were reviewed including the development of IEPs, implementation of IEPs, use of positive behavioral interventions and supports, procedural safeguards, and adequate data submission. The self-assessment was reviewed by the SEB through an examination of the policies, procedures and practices. In addition, the State Special Education Director conducted an on-site review of student IEP's identified with more than 10 days of suspension to include a review of the FFY16 data. In each case the LEAs were required by the SEB to develop a corrective action plan that included technical assistance in each area identified. Lastly, the SEB has identified that technical assistance is needed in this area and is in the process of developing training modules including data collection, development of functional behavioral assessments, implementation of behavior intervention plans, and progress monitoring of behavior plans.

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

The State completed a subsequent review of the end-of-the-year data for FFY 2016 (discipline data from the 2015-2016 school year submitted June 2016), consistent with the OSEP 09-02 memo, for the two LEAs identified with non-compliance. Based on the subsequent review of data submitted by the LEAs for FFY 2016, it was determined that one of the LEAs did not have a finding having corrected the non-compliance. In addition to the subsequent data review, the SEB has reviewed all IEP's that exceeded 10 days of suspension to determine if policies, procedures and practices were corrected. It was determined that the LEA has met the target with 100%.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

For the one non-compliant LEA, in addition to the above-described procedures, additional data points were reviewed to assist with the validation. The STARS templates built by the State allowed the LEAs to monitor their progress throughout the year. In addition, the noncompliant LEA was required to complete a Root Cause Analysis to assist with determining the cause of the continued noncompliance. The LEA was placed on corrective action plan. The LEA is being monitored by SEB staff.

OSEP Response

Because the State reported less than 100% compliance (greater than 0% actual target data for this indicator) for FFY 2015, the State must report on the status of correction of noncompliance identified in FFY 2015 for this indicator. The State must demonstrate, in the FFY 2016 SPP/APR, that the districts identified with noncompliance in FFY 2015 have corrected the noncompliance, including that the State verified that each district with noncompliance: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data, such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2016 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2015, although its FFY 2015 data reflect less than 100% compliance (greater than 0% actual target data for this indicator), provide an explanation of why the State did not identify any findings of noncompliance in FFY 2015.

The State reported that noncompliance identified in FFY 2014 as a result of the review it conducted pursuant to 34 CFR §300.170(b) was partially corrected. When reporting on the correction of noncompliance, the State must demonstrate, in the FFY 2016 APR, that it has verified that each district with remaining noncompliance identified in FFY 2014: (1) is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02. In the FFY 2016 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 5: Education Environments (children 6-21)**

Monitoring Priority: FAPE in the LRE

Results indicator: 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))

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2005	Target ≥			54.00%	58.00%	62.00%	66.00%	60.00%	60.00%	60.00%	60.00%	50.00%
		Data		50.00%	51.00%	52.48%	53.10%	54.89%	53.84%	52.35%	50.40%	49.74%	50.61%
B	2005	Target ≤			18.50%	17.00%	15.50%	14.00%	15.00%	17.00%	11.00%	11.00%	20.00%
		Data		19.00%	19.00%	18.80%	19.50%	20.19%	20.26%	20.63%	20.60%	20.68%	19.64%
C	2005	Target ≤			2.01%	2.00%	1.99%	1.98%	1.97%	1.96%	1.95%	1.95%	1.95%
		Data		1.60%	2.02%	1.34%	1.50%	1.36%	1.15%	1.10%	1.09%	0.93%	0.91%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target A ≥	50.00%	53.00%	57.00%	60.00%
Target B ≤	19.00%	18.00%	17.00%	15.00%
Target C ≤	1.90%	1.85%	1.80%	1.75%

Key:

Targets: Description of Stakeholder Input

Actual Target Data for FFY 2015:

Indicator 5 A - Target Not Met. The State did not meet its target of 50% of students with IEPs aged 6 – 21 served inside the regular class 80% or more of the day. Actual data for FFY 2015 was 49.80%.

Indicator 5 B - Target Not Met. The State did not meet its target of 19% of students with IEPs aged 6 – 21 served inside the regular class less than 40% of the day. Actual data for FFY 2015 was 19.19%.

Indicator 5 C- Target Met. The State exceeded its target of 1.9% of students with IEPs aged 6 – 21 served in separate schools, residential facilities, or homebound/hospital placements. Actual data for FFY 2015 was 0.92%.

The State did not meet its target for Indicator 5A by 0.2% and showed a decrease from FFY14 of 0.81%. The State did not meet its target for Indicator 5B 0.19% and showed a decrease from FFY14 of 0.45%. The State exceeded its target for 5C.

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/14/2016	Total number of children with IEPs aged 6 through 21	45,422	null
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/14/2016	A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	22,620	null
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/14/2016	B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	8,718	null
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/14/2016	c1. Number of children with IEPs aged 6 through 21 in separate schools	241	null

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Source	Date	Description	Data	Overwrite Data
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/14/2016	c2. Number of children with IEPs aged 6 through 21 in residential facilities	101	null
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C002; Data group 74)	7/14/2016	c3. Number of children with IEPs aged 6 through 21 in homebound/hospital placements	74	null

FFY 2015 SPP/APR Data

	Number of children with IEPs aged 6 through 21 served	Total number of children with IEPs aged 6 through 21	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
A. Number of children with IEPs aged 6 through 21 inside the regular class 80% or more of the day	22,620	45,422	50.61%	50.00%	49.80%
B. Number of children with IEPs aged 6 through 21 inside the regular class less than 40% of the day	8,718	45,422	19.64%	19.00%	19.19%
C. Number of children with IEPs aged 6 through 21 inside separate schools, residential facilities, or homebound/hospital placements [c1+c2+c3]	416	45,422	0.91%	1.90%	0.92%

Actions required in FFY 2014 response

none

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 6: Preschool Environments**

Monitoring Priority: FAPE in the LRE

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2011	Target ≥									48.80%	48.80%	50.00%
		Data								47.70%	44.70%	43.20%	44.90%
B	2011	Target ≤									32.00%	32.00%	30.00%
		Data								33.50%	36.90%	40.30%	41.73%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target A ≥	50.00%	52.00%	55.00%	60.00%
Target B ≤	28.00%	26.00%	25.00%	25.00%

Key:

Targets: Description of Stakeholder Input

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/14/2016	Total number of children with IEPs aged 3 through 5	4,245	null
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/14/2016	a1. Number of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	1,862	null
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/14/2016	b1. Number of children attending separate special education class	1,500	null
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/14/2016	b2. Number of children attending separate school	294	null
SY 2015-16 Child Count/Educational Environment Data Groups (EDFacts file spec C089; Data group 613)	7/14/2016	b3. Number of children attending residential facility	n	null

FFY 2015 SPP/APR Data

	Number of children with IEPs aged 3 through 5 attending	Total number of children with IEPs aged 3 through 5	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
A. A regular early childhood program and receiving the majority of special education and related services in the regular early childhood program	1,862	4,245	44.90%	50.00%	43.86%
B. Separate special education class, separate school or residential facility	1,794	4,245	41.73%	28.00%	42.26%

Explanation of A Slippage

The State did not meet its target for Indicator 6 A. The State showed 1.04% slippage in Indicator 6 A from FFY 2014. The overall number of students enrolled in preschool decreased from FFY 2014 to FFY 2015 (-40 students) therefore having an impact on the indicator calculations due to a lesser denominator.

7/19/2017

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

The State has provided substantial professional development at a statewide level to support this indicator:

1. The State's Pre-K Bureau has conducted professional development in order to increase supports for children with disabilities in the Least Restrictive Environment including effective strategies for constructing an inclusive environment for preschoolers.
2. The State has provided webinar-based professional development for all LEAs to support appropriate inclusionary practices for preschool students including training on IEP development and implementation, addressing barriers to inclusion (OSEP's webinar by Dr. Strain), awareness of the benefits of inclusion. Training was also provided specifically for administrators and eleven LEAs focusing on problem-solving strategies to support inclusion. In addition, the State has PreK consultants and FOCUS consultants that work with 55 LEAs throughout the state to promote and implement inclusive environments in the preschool setting.
3. In December 2015, the State's Pre-K Bureau conducted a "Full Participation Institute" during which OSEP's policy statement "Inclusion of Children with Disabilities in Early Childhood Programs" of September 14, 2015 was introduced. Training was provided to administrators and teachers and included a review of the OSEP policy statement. Information was shared regarding funding options to support inclusive practices, how to accommodate children with disabilities in an inclusive environment, and tutoring strategies. Resource CARA kits were provided to all institute participants.

Provide additional information about this indicator (optional)

The State did not meet its target for Indicator 6B. The State showed an increase in FFY 15 of 0.53% in indicator 6B from the FFY 14.

Actions required in FFY 2014 response

none

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 7: Preschool Outcomes**

Monitoring Priority: FAPE in the LRE

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A1	2008	Target ≥						74.90%	75.00%	75.00%	75.20%	75.20%	73.00%
		Data					74.70%	71.40%	78.30%	76.50%	74.00%	72.58%	77.73%
A2	2008	Target ≥						66.10%	66.20%	66.20%	66.40%	66.40%	45.00%
		Data					64.90%	59.60%	68.20%	37.10%	58.30%	44.34%	54.43%
B1	2008	Target ≥						74.70%	74.80%	74.80%	75.00%	75.00%	73.00%
		Data					74.60%	73.00%	75.60%	77.50%	76.00%	72.77%	76.49%
B2	2008	Target ≥						62.80%	62.90%	62.90%	63.10%	63.10%	50.00%
		Data					62.70%	62.10%	61.70%	34.20%	54.00%	49.30%	50.31%
C1	2008	Target ≥						74.40%	74.50%	74.50%	74.70%	74.70%	72.00%
		Data					74.30%	73.40%	76.30%	76.60%	75.70%	71.30%	76.85%
C2	2008	Target ≥						71.90%	72.00%	72.00%	72.20%	72.20%	60.00%
		Data					71.70%	71.00%	71.90%	46.00%	65.20%	58.01%	62.15%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target A1 ≥	73.00%	74.00%	74.00%	75.00%
Target A2 ≥	45.00%	46.00%	47.00%	50.00%
Target B1 ≥	73.00%	74.00%	74.00%	75.00%
Target B2 ≥	52.00%	54.00%	56.00%	58.00%
Target C1 ≥	72.00%	73.00%	74.00%	75.00%
Target C2 ≥	62.00%	64.00%	66.00%	68.00%

Key:

Targets: Description of Stakeholder Input

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017.

FFY 2015 SPP/APR Data

Number of preschool children aged 3 through 5 with IEPs assessed	3716.00
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Outcome A: Positive social-emotional skills (including social relationships)

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	40.00	1.10%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	551.00	14.83%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1106.00	29.76%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1040.00	27.99%

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

	Number of Children	Percentage of Children
e. Preschool children who maintained functioning at a level comparable to same-aged peers	979.00	26.35%

	Numerator	Denominator	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
A1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. (c+d)/(a+b+c+d)	2146.00	2737.00	77.73%	73.00%	78.41%
A2. The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program. (d+e)/(a+b+c+d+e)	2019.00	3716.00	54.43%	45.00%	54.33%

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

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	49.00	1.32%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	600.00	16.15%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	1213.00	32.64%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	1046.00	28.15%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	808.00	21.74%

	Numerator	Denominator	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
B1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. (c+d)/(a+b+c+d)	2259.00	2908.00	76.49%	73.00%	77.68%
B2. The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program. (d+e)/(a+b+c+d+e)	1854.00	3716.00	50.31%	52.00%	49.89%

Outcome C: Use of appropriate behaviors to meet their needs

	Number of Children	Percentage of Children
a. Preschool children who did not improve functioning	43.00	1.16%
b. Preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	471.00	12.67%
c. Preschool children who improved functioning to a level nearer to same-aged peers but did not reach it	886.00	23.84%
d. Preschool children who improved functioning to reach a level comparable to same-aged peers	976.00	26.26%
e. Preschool children who maintained functioning at a level comparable to same-aged peers	1340.00	36.06%

	Numerator	Denominator	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
C1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program. (c+d)/(a+b+c+d)	1862.00	2376.00	76.85%	72.00%	78.37%
C2. The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program. (d+e)/(a+b+c+d+e)	2316.00	3716.00	62.15%	62.00%	62.33%

Was sampling used? No

Did you use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COSF)? Yes

Actions required in FFY 2014 response

none

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 8: Parent involvement**

Monitoring Priority: FAPE in the LRE

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

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

Do you use a separate data collection methodology for preschool children? No

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target ≥			86.50%	87.00%	87.50%	88.00%	80.80%	81.30%	81.80%	81.80%	82.00%
Data		86.00%	89.50%	75.30%	83.90%	80.30%	80.20%	84.70%	82.90%	84.81%	82.69%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target ≥	83.00%	84.00%	85.00%	86.00%

Key:

Explanation of Changes

Targets for FFY18 were corrected to reflect the revised targets set by the State's Individuals With Disabilities Education Act Advisory Panel on December 3rd and 4th, 2015.

Targets: Description of Stakeholder Input

In FFY 2015, a stratified random sample of 14,828 parents was generated from all parents who had students age 3-21 receiving special education services during the 2015-16 school year. These parents were mailed a survey. A total of 1,373 were returned for a response rate of 9.3%.

To determine the state's Overall Parental Involvement Percentage, the percentage of parents who agreed, strongly agreed, or very strongly agreed to the question "The school facilitated parent involvement as a means of improving services for my child(ren)" was calculated. (Twenty-eight parents did not answer the survey question used to calculate parent involvement; thus the parent involvement percentage is based on 1,345 parents.)

The Parental Involvement Percentage increased 3.48 percentage points from 2014-15 to 2015-16 (from 82.69% to 86.17%). New Mexico met the target of 82.0%.

Display 8-1: Percent of Parents Who Report that the School Facilitated Their Involvement, Results Over Time

	FFY 2006	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012	FFY 2013	FFY 2014	FFY 2015
Total number of Parent respondents	598	914	1243	1284	1278	1140	1784	1501	1259	1373
Number who reported school facilitated their involvement	535	688	1043	1031	1025	966	1479	1273	1236	1345
Percentage who reported school facilitated their involvement	89.5%	75.3%	83.9%	80.3%	80.2%	84.7%	82.9%	84.8%	82.7%	86.2%

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February

FFY 2015 SPP/APR Data

Number of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities	Total number of respondent parents of children with disabilities	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
1159.00	1345.00	82.69%	83.00%	86.17%

Since the State did not report preschool children separately, discuss the procedures used to combine data from school age and preschool surveys in a manner that is valid and reliable.

Parents of all students with disabilities, including preschool students with disabilities, are given an opportunity to complete the survey. Parents of students at all grade levels, including preschool, received and responded to the survey.

In FFY 2015, the survey was distributed to a stratified, representative number of 14,828 parents of children receiving special education services, including parents of preschool children. A total of 1,373 surveys were returned for a response rate of 9.3%. The representativeness of the surveys was assessed by examining the demographic characteristics of the children of the parents who responded to the survey to the demographic characteristics of all special education students. This comparison indicates the results are representative (1) by geographic region where the child attends school and (2) by the grade level of the child. Preschool children are identified as a target group in the survey (See attached Parent Survey for demographic questions that include preschool as a reporting option). Data are analyzed specific to grade level. Preschool parents represented 8% of the total respondents, with 102 parents responding.

Describe how the State has ensured that any response data are valid and reliable, including how the data represent the demographics of the State.

The representativeness of the surveys was assessed by examining the demographic characteristics of the children of the parents who responded to the survey to the demographic characteristics of all special education students. This comparison indicates the results are generally representative (1) by geographic region where the child attends school; (2) by the grade level of the child; and (3) by primary disability of the child. Please note that parent respondents self-report ethnicity and primary disability.

Was sampling used? No

Was a collection tool used? Yes

Is it a new or revised collection tool? No

Yes, the data accurately represent the demographics of the State

No, the data does not accurately represent the demographics of the State

Actions required in FFY 2014 response

none

OSEP Response

The State revised its FFY 2018 target for this indicator, and OSEP accepts this target.

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 9: Disproportionate Representation**

Monitoring Priority: Disproportionate Representation

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data		7.90%	0%	0%	0%	0%	0%	0%	0%	0%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target	0%	0%	0%	0%

FFY 2015 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts with disproportionate representation of racial and ethnic groups in special education and related services	Number of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification	Number of districts in the State	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
4	0	151	0%	0%	0%

All races and ethnicities were included in the review

Define “disproportionate representation” and describe the method(s) used to calculate disproportionate representation

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

- . An “n” size of greater than 10 students or more in the racial and ethnic groups; and
- . Risk Ratio (RR) and Weighted Risk Ratio (WRR) of 3.0 or above (over-representation) for students aged 6 – 21; and
- . Deficient policies, procedures, and/or practices.

Out of 151 LEAs, 25 were excluded from the calculation because the LEA did not meet the minimum “n” size. In other words, the LEA did not have greater than 10 students in any of the seven racial/ethnic categories.

Using the criteria established above, the State determined that four LEAs were flagged for possible disproportionate representation. In other words, the LEA had a “n” size of greater than 10 and a risk ratio and weighted risk ratio of 3.0 or above (over-representation).

The LEAs were notified in writing of the possible disproportionate representation and were required to complete the Indicator 9 self- assessment. The purpose of the self-assessment is to determine if the LEA has deficient policies, procedures, and practices. The SEB examined the self-assessment to determine if the policies, procedures, and practices are deficient and contributed to the inappropriate identification. The SEB then contacted the Special Education Director and interviewed him/her based upon the self-assessment information, which includes the policies, procedures, and practices. Upon conclusion of this process, it was determined that none of the 4 LEAs were non-compliant for this Indicator.

Actions required in FFY 2014 response

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

none

Note: Any actions required in last year's response that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2014

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

OSEP Response

Required Actions

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 10: Disproportionate Representation in Specific Disability Categories

Monitoring Priority: Disproportionate Representation

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			0%	0%	0%	0%	0%	0%	0%	0%	0%
Data		7.90%	5.60%	3.30%	5.37%	3.92%	3.28%	0.78%	0.71%	0%	0%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target	0%	0%	0%	0%

FFY 2015 SPP/APR Data

Please indicate the type of denominator provided

- Number of districts in the State
- Number of districts that met the State's minimum n-size

Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories	Number of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification	Number of districts in the State	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
3	0	151	0%	0%	0%

All races and ethnicities were included in the review

Define “disproportionate representation” and describe the method(s) used to calculate disproportionate representation

In order that a LEA be considered to have disproportionate representation of racial and ethnic groups in a specific disability category that was the result of inappropriate identification, the following criteria must be met:

- An “n” size of greater than 10 students or more in the racial and ethnic groups and the specific disability category; and
- A risk ratio (RR) and weighted risk ratio (WRR) of 3.0 or above (over representation) for students aged 6 – 21; and
- Deficient policies, procedures, and/or practices.

Using the criteria established above, the State identified 3 LEAs with 3 flags for possible disproportionate representation out of the 152 LEAs. In other words, the LEAs had an “n” size of greater than 10 and a risk ratio and weighted risk ratio of 3.0 or above. The 3 LEAs flagged for possible occurrences of over representation and were required to complete a self-assessment. The completed self-assessment was submitted to the SEB for review. The SEB also reviewed the LEAs policies, procedures, and practices. Desk audits were completed of the self-assessments, policies, procedures, and practices.

Based upon the findings obtained through the process described above, no LEAs were found to have disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification. The 3 LEAs were found to be correctly implementing the regulatory requirements.

- 34 CFR § 300.111 (Child Find)
- 34 CFR § 300.300 (Parental Consent)
- 34 CFR § 300.131 (Child Find for Parentally Placed Private School Children With Disabilities)
- 34 CFR § 300.321 (IEP Team)
- 34 CFR § 300.304(b)(4) (Use of a Variety of Assessment Tools and Strategies)
- 34 CFR § 300.304(c) (Assessments are not Discriminatory and Administered in the Child’s Native Language)
- 34 CFR § 300.301 through 300.306(b)(iii) (Initial Evaluations - Limited English Proficiency)

None of the 3 LEAs were considered to have disproportionate representation due to inappropriate identification.

Actions required in FFY 2014 response

none

Note: Any actions required in last year's response that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2014

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

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 11: Child Find**

Monitoring Priority: Effective General Supervision Part B / Child Find

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		80.00%	37.10%	97.10%	98.90%	99.30%	99.20%	98.20%	98.10%	98.77%	99.34%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target	100%	100%	100%	100%

FFY 2015 SPP/APR Data

(a) Number of children for whom parental consent to evaluate was received	(b) Number of children whose evaluations were completed within 60 days (or State-established timeline)	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
7,027	6,985	99.34%	100%	99.40%

Number of children included in (a), but not included in (b) [a-b]	42
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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.

Forty-two (42) student evaluations from 15 LEAs went beyond the 60 day timeline. However, all of the students had their evaluations completed 1-142 days beyond the 60-day timeline. All of the individual cases on noncompliance identified in FFY 2015 have been corrected and the prong one criteria has been met. This was validated through the review of the forty-two (42) students' files in STARS (state database) and included review of the consent dates, evaluation dates, eligibility determination and IEP information for those students who qualified for special education and related services. Nine out of the 15 LEAs had initial findings with six LEAs having continued non-compliance.

Indicate the evaluation timeline used

- The State used the 60 day timeframe within which the evaluation must be conducted.
- The State established a timeline within which the evaluation must be conducted.

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

- State monitoring
- State database that includes data for the entire reporting year

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

LEAs were required to submit data on initial evaluations for special education and related services, each reporting period, into STARS (state database). In FFY 2015 the reporting periods were the second Wednesdays in October, December and February and the end-of-year. In addition to the student's demographic data and information, LEAs were required to enter the date of parental consent and the date the evaluation was completed. STARS then automatically calculated the number of days between parental consent, and the initial evaluation. If the number of days was beyond 60, the individual file was "red flagged" and the LEA was required to enter a code indicating the reason for the delay in the completion of the evaluation. The only reasons for delay that were considered compliant with the IDEA were those included in 34 CFR § 300.301(d): the parent repeatedly fails or refuses to produce the child for the evaluation or the child enrolls in a school of another LEA after the timeframe for the initial evaluation has begun. Any other reason for a delay was considered noncompliance with 34 CFR § 300.301 (c)(1)(i).

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Actions required in FFY 2014 response

none

Note: Any actions required in last year's response that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2014

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
10	4	0	6

FFY 2014 Findings of Noncompliance Verified as Corrected

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

On page 77 of last year's FFY 2014 APR, the state reported that ten LEAs missed the indicator in FFY 2014.

Based on the State's review of updated data such as data from subsequent on-site monitoring or data collected through the State's data system, four out of the ten LEAs from FFY 2014 were found to be correctly implementing the following specific regulatory requirements:

- 34 CFR § 300.300
- 34 CFR § 300.301
- 34 CFR § 300.304
- 34 CFR § 300.305
- 34 CFR § 300.307
- 34 CFR § 300.309
- 34 CFR § 300.310

Four of the 10 LEAs corrected the noncompliance as soon as possible and in no case later than one year after the State's identification.

Additional data points were reviewed to assist with the validation. These included following up with STARS to determine if the LEAs membership count report increased to account for the new students. The students' initial IEP dates were also verified.

The STARS templates built by the State allowed the LEAs to monitor their progress throughout the year in addition to the continuous monitoring by SEB staff. LEAs were required to submit data on initial evaluations for special education and related services each reporting period into STARS. In FFY 2014 and FFY 2015, the reporting periods were the second Wednesdays in October, December and February and the end-of-year. In addition to the student's demographic data and information, LEAs were required to enter the date of parental consent and the date the evaluation was completed. STARS then automatically calculated the number of days between parental consent and the initial evaluation. If the number of days was beyond 60, the individual file was "red flagged" and the LEA was required to enter a code indicating the reason for the delay in the completion of the evaluation. The only reasons for delay that were considered compliant with the IDEA were those included in 34 CFR § 300.301(d): the parent repeatedly fails or refuses to produce the child for the evaluation or the child enrolls in a school of another LEA after the timeframe for the initial evaluation has begun. Any other reason for delay was considered noncompliance with 34 CFR § 300.301 (c)(1)(i).

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

Forty-two student evaluations from 10 LEAs went beyond the 60 day timeline. However, all of the students had their evaluations completed 1-138 days beyond the 60-day timeline. All of the individual cases on noncompliance identified in FFY 2014 have been corrected and the prong one criteria has been met. This was validated through the review of the forty-two students' files in STARS (state database) and included review of the consent dates, evaluation dates, eligibility determination and IEP information for those students who qualified for special education and related services.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

For the six non-compliant LEAs, in addition to the above described procedures, additional data points were reviewed to assist with the validation. These included following up with STARS to determine if the LEAs membership count report increased to account for the new students. The students' initial IEP dates were also verified. The STARS templates built by the State allowed the LEAs to monitor their progress throughout the year. In addition, the noncompliant LEAs were required to complete a Root Cause Analysis to assist with determining the cause of the continued noncompliance. The LEA was placed on corrective action plans. All six LEAs are being monitored by SEB staff.

Explanation of Alternate Data

In the FFY 2013 APR (page 50 of 72), one LEA from FFY 2012 did not correct the non-compliance in FFY 2013. In the FFY 2014 APR (page 81 of 111) a subsequent correction was reported. However, upon further review it was determined that the LEA had not met the Indicator and demonstrated continued non-compliance.

FFY 2013 Findings of Noncompliance Verified as Corrected

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

The two noncompliant LEAs were required to complete a Root Cause Analysis to assist with determining the cause of the continued noncompliance. The LEAs are being monitored by SEB staff and is being provided with technical assistance and professional development for Indicator 11. In addition, the two remaining LEAs were placed on a corrective action plan with specific strategies to address areas found in the root cause analyses, is receiving on-site monitoring, and were placed on a corrective action plan. The continued and longstanding noncompliance was considered in the LEA's annual determination.

A subsequent review of data was conducted from the 40th day reporting period (October 2015) to the 80th (December 2015) day reporting. The State reviewed 100% of the LEA's files to determine the percentage of children who were evaluated within 60 days of receiving parental consent for an initial evaluation. Based upon that review, it was determined that 100.00% of the students received a timely evaluation. Therefore, the LEAs subsequently corrected consistent with the 09-02 memo.

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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

The State completed a subsequent review of data, or 100% of the files, in STARS of those students who parents consented for an initial evaluation for special education and related services and included review of the consent dates, evaluation dates, eligibility determination and IEP information for those students who qualified for special education and related services. All of the individual cases on noncompliance have been corrected and the prong one criteria has been met. Through that review, it was determined that the LEAs corrected the noncompliance and met the target with 100%.

A subsequent review of data was conducted from the 40th day reporting period (October 2015) to the 80th (December 2015) day reporting. The State reviewed 100% of the LEA's files to determine the percentage of children who were evaluated within 60 days of receiving parental consent for an initial evaluation. Based upon that review, it was determined that 100.00% of the students received a timely evaluation. Therefore, this LEA subsequently corrected consistent with the 09-02 memo.

FFY 2013 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The two noncompliant LEAs were required to complete a Root Cause Analysis to assist with determining the cause of the continued noncompliance. The LEAs are being monitored by SEB staff and is being provided with technical assistance and professional development for Indicator 11. In addition, the two remaining LEAs were placed on a corrective action plan with specific strategies to address areas found in the root cause analyses, is receiving on-site monitoring, and was assigned a Special Education Technical Assistance Team through TAESE. The continued and longstanding noncompliance was considered in the LEA's annual determination.

A subsequent review of data was conducted from the 80 day (December 2015) reporting period. 100% of the LEAs files were reviewed to determine the percentage of children who were evaluated within 60 days of receiving parental consent for an initial evaluation. Based upon that review, it was determined that 98.79% of the students received a timely evaluation. Another review of subsequent data will be conducted during the State's next counting and reporting period to determine if the LEAs are meeting the specific regulatory requirements.

The LEAs were placed on corrective action plan and is being monitored by SEB staff.

OSEP Response

Because the State reported less than 100% compliance for FFY 2015, the State must report on the status of correction of noncompliance identified in FFY 2015 for this indicator. In addition, the State must demonstrate, in the FFY 2016 SPP/APR, that the remaining six findings identified in FFY 2014 and the two findings identified in FFY 2013 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2016 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2013, FFY 2014, and FFY 2015 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2016 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2015, although its FFY 2015 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2015.

Required Actions

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FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 12: Early Childhood Transition

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data		94.40%	97.20%	95.20%	99.10%	99.30%	97.70%	98.50%	83.20%	94.29%	97.90%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target	100%	100%	100%	100%

FFY 2015 SPP/APR Data

a. Number of children who have been served in Part C and referred to Part B for Part B eligibility determination.	1,083
b. Number of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday.	55
c. Number of those found eligible who have an IEP developed and implemented by their third birthdays.	770
d. Number for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	121
e. Number of children who were referred to Part C less than 90 days before their third birthdays.	111

	Numerator (c)	Denominator (a-b-d-e)	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
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. $[c/(a-b-d-e)] \times 100$	770	796	97.90%	100%	96.73%

Number of children who have been served in Part C and referred to Part B for eligibility determination that are not included in b, c, d, e	26
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Explanation of Slippage

The State did not meet the target for Indicator 12. The State experienced slippage of 1.17% from FFY 14 to FFY 15. A total of six LEAs missed the indicator and four LEAs had initial findings. This showed improvement from FFY 14 (9 initial findings). One LEA (initial finding) implemented procedural changes at the district level that resulted in a breakdown in the reporting process to the State. Although the State requested supporting documentation, the State was unable to verify that 18 students had eligibility determined, an IEP developed and implemented by their third birthday. This has negatively impacted this indicator, resulting in slippage.

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

Twenty-six students did not have their eligibility determined, IEP developed and implemented by their third birthday. The range of days beyond the students' third birthday were 1-235. This was due to the LEA missing timelines.

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

- State monitoring
- State database that includes data for the entire reporting year

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

Provide additional information about this indicator (optional)

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

The State did not meet the target. The FFY 2015 percentage was 96.73% resulting in a decrease of 1.17% from FFY 2014 to FFY 2015. Four LEAs missed the target for the first time (initial findings).

Actions required in FFY 2014 response

none

Note: Any actions required in last year's response that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2014

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
9	7	0	2

FFY 2014 Findings of Noncompliance Verified as Corrected

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

In FFY 2014, 9 LEAs missed the indicator for the first time. Seven LEAs with initial findings in FFY 2014 met the target of 100% for FFY 2015. In order to determine if the LEA's corrected previous findings a review of data occurred in FFY 2015 of every preschool student served in Part C and referred for Part B eligibility determinations that were submitted into the STARS data warehouse by LEA. Each LEA is monitored on this indicator every year. Students who did not qualify were entered into the Student Template of STARS, and students who did qualify were entered into the Special Education Template of STARS. As part of additional data validation other important information about the students were required to be entered into the Special Education Template. This included the date of the transition conference, date of parental consent, evaluation completion date, date of eligibility determination and the date of the initial IEP. Indicator 11 and 12 were correlated to determine the accuracy of the data. All fields must be completed. If data were missing, the LEA was required to correct the data within the specified period of time. The LEA was required to enter compliance or noncompliance codes pertaining to the eligibility determination and IEP development if it went beyond the student's third birthday. The STARS template automatically calculated the number of days beyond the student's birthday, using the student's birth date.

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

The State conducted Prong I and Prong II reviews with subsequent data. In other words, the State verified that the LEAs are: 1) correctly implementing the specific regulatory requirements for 34 CFR §300.124(b) (i.e., achieved 100% compliance) based on a review of updated data subsequently collected through the State data system (STARS); and, 2) have corrected each individual case of noncompliance consistent with OSEP 09-02 memo, unless the child is no longer within the jurisdiction of the LEA. This was validated through IEP implementation date data in STARS.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

The two LEAs with continued noncompliance had a subsequent review of data in November 2016. Through that on-site monitoring review, it was determined that the LEAs continue to be out of compliance. The LEAs that missed Indicator 12 in FFY 2014 and FFY 2015 completed a root cause analysis to determine the cause of the continuing noncompliance. The length of time the problem existed along with LEAs response to the issue was considered in the LEAs annual determination.

In addition to the above, the two LEAs received on-site monitoring and were assigned a Special Education Technical Assistance Team through TAESE.

The two LEAs that demonstrated continuing non-compliance will be placed on a corrective action plan. Training for C to B transition procedures has been provided to every LEA in the State. Targeted technical assistance will be provided to the 2 LEAs with continuing non-compliance. The non-compliant cases will be reviewed to ensure that IEPs have been implemented subsequently and compensatory services provided, if applicable.

OSEP Response

Because the State reported less than 100% compliance for FFY 2015, the State must report on the status of correction of noncompliance identified in FFY 2015 for this indicator. In addition, the State must demonstrate, in the FFY 2016 SPP/APR, that the remaining two findings identified in FFY 2014 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2016 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2014 and FFY 2015 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2016 SPP/APR, the State must describe the specific actions that were taken to verify the correction.

If the State did not identify any findings of noncompliance in FFY 2015, although its FFY 2015 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2015.

Required Actions

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 13: Secondary Transition

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Historical Data

Baseline Data: 2009

FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Target			100%	100%	100%	100%	100%	100%	100%	100%	100%
Data						98.45%	95.48%	96.86%	91.56%	94.04%	96.36%

Key: Gray – Data Prior to Baseline Yellow – Baseline

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target	100%	100%	100%	100%

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

FFY 2015 SPP/APR Data

Number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition	Number of youth with IEPs aged 16 and above	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
1,070	1,225	96.36%	100%	87.35%

Explanation of Slippage

In the FFY 2014 APR, data was provided for the number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition. In FFY 2014, based on a random sample of IEPs of youth of aged 16 and above, 96.36% of the sampled IEPs contained all of the required transition elements that are a part of the checklist prepared by the National Technical Assistance Center on Transition (NTACT). In FFY 2015, based on a random sample of IEPs of youth of aged 16 and above, 87.35% of the sampled IEPs contained all of the required transition elements that are a part of the checklist prepared by the National Technical Assistance Center on Transition (NTACT). Comparing these two rates, the State experienced slippage of 9.01% and did not meet the compliance target of 100%.

In FFY 2014, Indicator 13 data was reported after Prong I correction, whereas in FFY 2015, Indicator 13 data is being reported after the annual review only. Additionally, the State tightened the confidence level and confidence intervals for the sample, pertaining to the larger districts, thus allowing for a more representative sample for the State on this Indicator. As a result, the sample size is 25% larger than that for FFY 2014. The tightening of the confidence level and confidence intervals for the sample impacted the sample size, resulting in slippage for FFY 2015

The State is providing targeted technical support for all LEAs not at 100%.

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

- State monitoring
- State database that includes data for the entire reporting year

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

The State experienced slippage with this indicator from FFY 2014 to FFY 2015. The indicator percentage decreased 9.01% from 92.72% in FFY 2014 to 87.35% in FFY 2015. A total of 1225 LEAs submitted IEP data for youth aged 16 or above into STARS. A random sample of students from the 124 LEAs was selected via the STARS database. A total of 1225 IEPs were reviewed and 155 IEPs were considered noncompliant. All 155 IEPs have been reviewed and considered corrected and the individual cases of noncompliance have been corrected. A total of 10 LEAs were considered noncompliant with Indicator 13 in FFY 2015, which demonstrated an improvement from 22 LEAs in FFY 2014.

Seven (7) LEAs missed the indicator for the first time in FFY 2015.

One (1) LEA had continued noncompliance identified in FFY 2014.

Two (2) LEAs had continued noncompliance identified in FFY 2013.

Provide additional information about this indicator (optional)

The State worked extensively with all non-compliant LEAs from FFY 2014 per the 09-02 memo as well as procedures explained in the ISEAS manual.

Actions required in FFY 2014 response

none

Note: Any actions required in last year's response that are related to correction of findings should be responded to on the "Correction of Previous Findings of Noncompliance" page of this indicator. If your State's only actions required in last year's response are related to findings of noncompliance, a text field will not be displayed on this page.

Correction of Findings of Noncompliance Identified in FFY 2014

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
16	15	null	1

FFY 2014 Findings of Noncompliance Verified as Corrected

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

On page 80 of last year's FFY 2014 APR, the state reported that the number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition was 954 and the number of youth with IEPs aged 16 and above was 990, resulting in 96.36%. There was an error in the data. The corrected data is the state reported that the number of youth aged 16 and above with IEPs that contain each of the required components for secondary transition was 954 and the number of youth with IEPs aged 16 and above was 990, resulting in 96.36%.

In order to ensure that full correction was made and that the LEAs were correctly implementing the specific regulatory requirements, an updated reasonable sample of IEPs were reviewed using the NTACT checklist. The reasonable samples of students aged 16 or above were selected from STARS. The SEB staff requested the IEPs from the LEAs for review. Based upon those subsequent reviews, it was determined that 15 out of the 16 LEAs that missed the indicator for the first time in FFY 2014 were in compliance with 34 CFR §§ 300.320(b) and 300.321(b) in FFY 2014. In other words, the State verified that the LEAs are correctly implementing the specific regulatory requirements for 34 CFR §§ 300.320(b) and 300.321(b) (i.e., achieved 100% compliance) based on a review of updated data subsequently collected through the State data system (STARS) and have corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA.

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

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

In FFY 2014, a total of 124 LEAs submitted IEP data for youth aged 16 or above into STARS. The STARS data included all of the required transition elements that are a part of the checklist prepared by the National Technical Assistance Center (NTACT). A random sample of students from the 124 LEAs was selected. A total of 990 IEPs were reviewed and 36 IEPs were considered noncompliant. All 36 IEPs have been reviewed and considered corrected and the individual cases of noncompliance have been corrected. Sixteen LEAs missed the indicator for the first time in FFY 2014. In FFY 2015, 15 of the 16 non-compliant LEAs met the target of 100% for Indicator 13.

FFY 2014 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

One of the 16 non-complaint LEAs for FFY 2014 had continuing noncompliance in FFY 2015. Based upon the findings obtained through the process described above, the State took specific actions against the one LEA identified as noncompliant with Indicator 13 in FFY 2014. The LEA had to complete updated root cause analyses to determine the causes of the continued noncompliance. The LEA was placed on a corrective action plan with specific strategies to address areas found in the root cause analyses. The length of time the problem existed along with the LEA's response to the issue was considered in the LEA's annual determination. The LEA will continue to be monitored by SEB staff to provide them with technical assistance and professional development.

Explanation of Alternate Data

On page 90 of the FFY 2014 APR, it states that in FFY 2013, a total of 124 LEAs submitted IEP data for youth aged 16 or above into STARS. The STARS data included all of the required transition elements that are a part of the checklist prepared by the National Technical Assistance Center (NTACT). A random sample of students from the 124 LEAs was selected. A total of 939 IEPs were reviewed FFY 2013 Part B State Performance Plan (SPP)/Annual Performance Report (APR) and 56 IEPs were considered non compliant. All 56 IEPs were reviewed and considered corrected. Seventeen LEAs missed the indicator for the first time in FFY 2013. In FFY 2014, 13 of the 17 non-compliant LEAs met the target of 100% for Indicator 13.

Four LEAs had continued non-compliance.

FFY 2013 Findings of Noncompliance Verified as Corrected

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

Two of the four LEAs that had continuing noncompliance from FFY 2013 met the target at 100%. This was determined through the review of the corrected and updated IEPs. In order to ensure that full correction was made and that the LEAs were correctly implementing the specific regulatory requirements, an updated reasonable sample of IEPs were reviewed using the NTACT checklist. The reasonable sample of students aged 16 or above was selected from the STARS. The SEB staff member requested the IEPs from the LEAs for review. Based upon those subsequent reviews, it was determined that the LEAs were in compliance with 34 CFR §§ 300.320(b) and 300.321(b) and meeting the specific regulatory requirements. In other words, the State verified that the LEAs were correctly implementing the specific regulatory requirements for 34 CFR §§ 300.320(b) and 300.321(b) (i.e., achieved 100% compliance) based on a review of updated data subsequently collected through the State data system (STARS) and have corrected each individual case of noncompliance unless the child is no longer within the jurisdiction of the LEA.

Two (2) LEAs were determined to have continuing noncompliance from FFY 2013. This was determined through the review of the corrected and updated IEPs. In order to ensure that full correction was made and that each LEA was correctly implementing the specific regulatory requirements, an updated reasonable sample of IEPs were reviewed using the NTACT checklist. The reasonable sample of students aged 16 or above was selected from the STARS. The SEB staff member requested the IEPs from each LEA for review. Based upon those subsequent reviews, it was determined that the LEAs were in not in compliance with 34 CFR §§ 300.320(b) and 300.321(b) and not meeting the specific regulatory requirements.

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

All of the individual cases of noncompliance were corrected. This was determined through the review of the corrected and updated IEPs as described above.

FFY 2013 Findings Not Yet Verified as Corrected

Actions taken if noncompliance not corrected

Two (2) LEAs were identified as continuing non-compliant from FFY 2013. The State took specific actions against the two LEAs identified as noncompliant with Indicator 13 in FFY 2014 and repeated the noncompliance in FFY 2015. The LEAs had to complete updated root cause analyses to determine the causes of the continued noncompliance. The LEAs were placed on a corrective action plan with specific strategies to address areas found in the root cause analyses. The LEAs has also been provided with technical assistance through TA/ESE. The length of time the problem existed along with the LEA's response to the issue was considered in the LEA's annual determination. The LEA was monitored by SEB staff to provide them with technical assistance and professional development.

OSEP Response

Because the State reported less than 100% compliance for FFY 2015, the State must report on the status of correction of noncompliance identified in FFY 2015 for this indicator. In addition, the State must demonstrate, in the FFY 2016 SPP/APR, that the remaining one finding identified in FFY 2014 and the remaining two findings identified in FFY 2013 were corrected. When reporting on the correction of noncompliance, the State must report, in the FFY 2016 SPP/APR, that it has verified that each LEA with noncompliance identified in FFY 2013, FFY 2014, and FFY 2015 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2016 SPP/APR, the State must describe the specific actions that were taken to verify the correction. If the State did not identify any findings of noncompliance in FFY 2015, although its FFY 2015 data reflect less than 100% compliance, provide an explanation of why the State did not identify any findings of noncompliance in FFY 2015.

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 14: Post-School Outcomes**

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

Historical Data

	Baseline Year	FFY	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
A	2009	Target ≥							48.50%	48.50%	49.00%	49.00%	49.00%
		Data						48.00%	47.30%	47.30%	40.80%	43.83%	43.26%
B	2009	Target ≥							75.50%	75.50%	76.00%	76.00%	76.00%
		Data						75.00%	71.50%	74.30%	71.50%	74.92%	76.10%
C	2009	Target ≥							79.50%	79.50%	80.00%	80.00%	80.00%
		Data						79.00%	75.20%	81.30%	79.00%	81.17%	80.71%

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015	2016	2017	2018
Target A ≥	49.00%	49.00%	49.00%	49.00%
Target B ≥	76.00%	76.00%	76.00%	76.00%
Target C ≥	80.00%	80.00%	80.00%	80.00%

Key:

Targets: Description of Stakeholder Input

The chart below represents the three measurable categories. The current year is (in black), the previous year (in blue), and the target for the current year (in red).

A. Enrolled in higher education (%)	B. Enrolled in higher education or competitively employed (%)	C. Enrolled in higher education competitively employed or in some other training or employment (%)
42.85%	75.34%	81.37%
43.26%	76.10%	80.71%
49.00%	76.00%	80.00%

Continuing a trend from last year, there was a slight decrease (0.41%) in students reporting enrollment in higher education. The target was not met for Indicator 14A. There was also a decrease (0.76%) in students reporting enrollment in higher education or competitive employment. The target for Indicator 14B was not met. There was an increase (0.66%) in students reporting enrollment in higher education or competitive employment or some other postsecondary education/training or other employment. The target for Indicator 14C was met for FFY 2015.

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017.

FFY 2015 SPP/APR Data

Number of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	1342.00
1. Number of respondent youth who enrolled in higher education within one year of leaving high school	575.00
2. Number of respondent youth who competitively employed within one year of leaving high school	436.00
3. Number of respondent youth enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed)	36.00
4. Number of respondent youth who are in some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	45.00

	Number of	Number of	FFY 2014	FFY 2015	FFY 2015
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FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

	respondent youth	respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school	Data*	Target*	Data
A. Enrolled in higher education (1)	575.00	1342.00	43.26%	49.00%	42.85%
B. Enrolled in higher education or competitively employed within one year of leaving high school (1 +2)	1011.00	1342.00	76.10%	76.00%	75.34%
C. Enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment (1+2+3+4)	1092.00	1342.00	80.71%	80.00%	81.37%

Was sampling used? No

Provide additional information about this indicator (optional)

The New Mexico post-school outcomes census data collection was designed as a census of former students with disabilities who received special education services and exited high school in the 2014-2015 school year, including graduates and those who dropped out in grades 9-12. The current data collection method is designed to efficiently collect the data as specified by OSEP requirements for FFY 2015. New Mexico utilized the definitions of employment, post-secondary education and other employment, other post-secondary education or training specified in the OSEP definition (May 2010). The data collection is assembled, conducted and analyzed through a contract with the Northeast Regional Education Cooperative. Students who received special education services under the Individuals with Disabilities Education Act, (IDEA), had exited in 2014-2015 and had been out of high school for a minimum of one year were interviewed beginning in May 2016 and September 2015. Schools were instructed to appoint a coordinator for the data collection efforts to assume responsibility for accurate completion of the data collection and reporting. Staff assigned by the schools conducted phone and in-person FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR) interviews of former students or family members and entered responses on the online form; which were then downloaded to a database. Survey data were submitted electronically via an online site for compilation and analysis.

Actions required in FFY 2014 response

none

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 15: Resolution Sessions**

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Historical Data

Baseline Data: 2005

FFY	2004	2005			2006			2007			2008		
Target			-			-			-			-	
Data		100%						0%			100%		

FFY	2009			2010			2011			2012			2013		
Target		-			-		75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%
Data	100%			100%			100%			42.31%			59.09%		

FFY	2014		
Target	55.00%	-	70.00%
Data	100%		

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015			2016			2017			2018		
Target	55.00%	-	70.00%	55.00%	-	70.00%	55.00%	-	70.00%	55.00%	-	70.00%

Key:

Targets: Description of Stakeholder Input

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017.

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2015-16 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/2/2016	3.1(a) Number resolution sessions resolved through settlement agreements	n	null
SY 2015-16 EMAPS IDEA Part B Dispute Resolution Survey; Section C: Due Process Complaints	11/2/2016	3.1 Number of resolution sessions	n	null

FFY 2015 SPP/APR Data

3.1(a) Number resolution sessions resolved through settlement agreements	3.1 Number of resolution sessions	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
1	1	100%	55.00% - 70.00%	100%

Actions required in FFY 2014 response

none

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 16: Mediation**

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Historical Data

Baseline Data: 2005

FFY	2004			2005			2006			2007			2008		
Target				-				-		63.00%	-	70.00%	70.00%	-	75.00%
Data				61.30%			63.14%						89.20%		

FFY	2009			2010			2011			2012			2013		
Target	70.00%	-	75.00%	75.00%	-	80.00%	75.00%	-	80.00%	80.00%	-	85.00%	80.00%	-	85.00%
Data	80.65%			78.13%			86.96%			100%			75.68%		

FFY	2014		
Target	75.00%	-	85.00%
Data	75.86%		

Key: Gray – Data Prior to Baseline Yellow – Baseline Blue – Data Update

FFY 2015 - FFY 2018 Targets

FFY	2015			2016			2017			2018		
Target	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%	75.00%	-	85.00%

Key:

Targets: Description of Stakeholder Input

The indicator data were presented to the State's IDEA Advisory Panel on December 8-9, 2016. The information will also be presented to the Local Education Agency, State Charter Schools and Regional Education Cooperative Directors at the statewide meeting on February 2, 2017.

FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)

Prepopulated Data

Source	Date	Description	Data	Overwrite Data
SY 2015-16 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/2/2016	2.1.a.i Mediations agreements related to due process complaints	16	null
SY 2015-16 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/2/2016	2.1.b.i Mediations agreements not related to due process complaints	13	null
SY 2015-16 EMAPS IDEA Part B Dispute Resolution Survey; Section B: Mediation Requests	11/2/2016	2.1 Mediations held	40	null

FFY 2015 SPP/APR Data

2.1.a.i Mediations agreements related to due process complaints	2.1.b.i Mediations agreements not related to due process complaints	2.1 Mediations held	FFY 2014 Data*	FFY 2015 Target*	FFY 2015 Data
16	13	40	75.86%	75.00% - 85.00%	72.50%

Explanation of Slippage

In the FFY 2014 APR, data was provided for percent of mediations that resulted in mediation agreements. In FFY 2014, 75.86% of mediations resulted in mediation agreements. In FFY 2015, 72.50% of mediations resulted in mediation agreements. Comparing these two rates, the State experienced slippage of 3.36% and did not meet the ESEA target of 72.50%. The percentage of mediations which resulted in agreements declined slightly, likely due to an increase in third party involvement in filing the initial complaints. Additionally, there was one case where the parents/guardians filed twice. Both of these situations are less likely to result in successful mediation.

Provide additional information about this indicator (optional)

The State has a continuum of Dispute Resolution Options for parents and LEAs. Third-party assisted intervention and mediation is provided by State-approved and funded mediators. LEAs and parents are encouraged to participate in a Facilitated Individualized Education Program (FIEP), at LEA expense, when concerns or dispute arises. A FIEP can be provided, at State expense, to assist both parties in resolving formal complaints or due process complaints. See the "Continuum of Dispute Resolution Options in Special Education" document for further explanation.

Actions required in FFY 2014 response

none

OSEP Response

Required Actions

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Indicator 17: State Systemic Improvement Plan**

Monitoring Priority: General Supervision

Results indicator: The State's SPP/APR includes a State Systemic Improvement Plan (SSIP) that meets the requirements set forth for this indicator.

Reported Data

Baseline Data: 2013

FFY	2013	2014	2015
Target ≥		34.50%	36.50%
Data	32.50%	33.00%	33.80%

Key: Gray – Data Prior to Baseline Yellow – Baseline
Blue – Data Update

FFY 2016 - FFY 2018 Targets

FFY	2016	2017	2018
Target ≥	38.50%	40.50%	42.50%

Key:

Explanation of Changes

New Mexico's SIMR has been updated to reflect changes in baseline data and a change of the state's accountability assessment for reading. By federal fiscal year (FFY) 2018, 42.5% of students with disabilities in Results Driven Accountability schools will score benchmark on the End of Year reading accountability assessment. The SIMR reflects a two percentage point growth per year for students with disabilities.

Description of Measure

Targets: Description of Stakeholder Input

Overview

Data Analysis

A description of how the State identified and analyzed key data, including data from SPP/APR indicators, 618 data collections, and other available data as applicable, to: (1) select the State-identified Measurable Result(s) for Children with Disabilities, and (2) identify root causes contributing to low performance. The description must include information about how the data were disaggregated by multiple variables (e.g., LEA, region, race/ethnicity, gender, disability category, placement, etc.). As part of its data analysis, the State should also consider compliance data and whether those data present potential barriers to improvement. In addition, if the State identifies any concerns about the quality of the data, the description must include how the State will address these concerns. Finally, if additional data are needed, the description should include the methods and timelines to collect and analyze the additional data.

Analysis of State Infrastructure to Support Improvement and Build Capacity

A description of how the State analyzed the capacity of its current infrastructure to support improvement and build capacity in LEAs to implement, scale up, and sustain the use of evidence-based practices to improve results for children with disabilities. State systems that make up its infrastructure include, at a minimum: governance, fiscal, quality standards, professional development, data, technical assistance, and accountability/monitoring. The description must include current strengths of the systems, the extent the systems are coordinated, and areas for improvement of functioning within and across the systems. The State must also identify current State-level improvement plans and initiatives, including special and general education improvement plans and initiatives, and describe the extent that these initiatives are aligned, and how they are, or could be, integrated with, the SSIP. Finally, the State should identify representatives (e.g., offices, agencies, positions, individuals, and other stakeholders) that were involved in developing Phase I of the SSIP and that will be involved in developing and implementing Phase II of the SSIP.

State-identified Measurable Result(s) for Children with Disabilities

A statement of the result(s) the State intends to achieve through the implementation of the SSIP. The State-identified result(s) must be aligned to an SPP/APR indicator or a component of an SPP/APR indicator. The State-identified result(s) must be clearly based on the Data and State Infrastructure Analyses and must be a child-level outcome in contrast to a process outcome. The State may select a single result (e.g., increasing the graduation rate for children with disabilities) or a cluster of related results (e.g., increasing the graduation rate and decreasing the dropout rate for children with disabilities).

Statement

Description

Selection of Coherent Improvement Strategies

An explanation of how the improvement strategies were selected, and why they are sound, logical and aligned, and will lead to a measurable improvement in the State-identified result(s). The improvement strategies should include the strategies, identified through the Data and State Infrastructure Analyses, that are needed to improve the State infrastructure and to support LEA implementation of evidence-based practices to improve the State-identified Measurable Result(s) for Children with Disabilities. The State must describe how implementation of the improvement strategies will address identified root causes for low performance and ultimately build LEA capacity to achieve the State-identified Measurable Result(s) for Children with Disabilities.

Theory of Action

A graphic illustration that shows the rationale of how implementing the coherent set of improvement strategies selected will increase the State's capacity to lead meaningful change in LEAs, and achieve improvement in the State-identified Measurable Result(s) for Children with Disabilities.

Submitted Theory of Action: No Theory of Action Submitted

Provide a description of the provided graphic illustration (optional)

Infrastructure Development

- (a) Specify improvements that will be made to the State infrastructure to better support EIS programs and providers to implement and scale up EBPs to improve results for infants and toddlers with disabilities and their families.
- (b) Identify the steps the State will take to further align and leverage current improvement plans and other early learning initiatives and programs in the State, including Race to the Top-Early Learning Challenge, Home Visiting Program, Early Head Start and others which impact infants and toddlers with disabilities and their families.
- (c) Identify who will be in charge of implementing the changes to infrastructure, resources needed, expected outcomes, and timelines for completing improvement efforts.
- (d) Specify how the State will involve multiple offices within the State Lead Agency, as well as other State agencies and stakeholders in the improvement of its infrastructure.

Support for EIS programs and providers Implementation of Evidence-Based Practices

- (a) Specify how the State will support EIS providers in implementing the evidence-based practices that will result in changes in Lead Agency, EIS program, and EIS provider practices to achieve the SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Identify steps and specific activities needed to implement the coherent improvement strategies, including communication strategies and stakeholder involvement; how identified barriers will be addressed; who will be in charge of implementing; how the activities will be implemented with fidelity; the resources that will be used to implement them; and timelines for completion.
- (c) Specify how the State will involve multiple offices within the Lead Agency (and other State agencies such as the SEA) to support EIS providers in scaling up and sustaining the implementation of the evidence-based practices once they have been implemented with fidelity.

Evaluation

- (a) Specify how the evaluation is aligned to the theory of action and other components of the SSIP and the extent to which it includes short-term and long-term objectives to measure implementation of the SSIP and its impact on achieving measurable improvement in SIMR(s) for infants and toddlers with disabilities and their families.
- (b) Specify how the evaluation includes stakeholders and how information from the evaluation will be disseminated to stakeholders.
- (c) Specify the methods that the State will use to collect and analyze data to evaluate implementation and outcomes of the SSIP and the progress toward achieving intended improvements in the SIMR(s).
- (d) Specify how the State will use the evaluation data to examine the effectiveness of the implementation; assess the State's progress toward achieving intended improvements; and to make modifications to the SSIP as necessary.

Technical Assistance and Support

Describe the support the State needs to develop and implement an effective SSIP. Areas to consider include: Infrastructure development; Support for EIS programs and providers implementation of EBP; Evaluation; and Stakeholder involvement in Phase II.

**FFY 2015 Part B State Performance Plan (SPP)/Annual Performance Report (APR)
Certify and Submit your SPP/APR**

I certify that I am the Chief State School Officer of the State, or his or her designee, and that the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report is accurate.

Selected: Designated by the Chief State School Officer to certify

Name and title of the individual certifying the accuracy of the State's submission of its IDEA Part B State Performance Plan/Annual Performance Report.

Name: Deborah Dominguez-Clark

Title: Director of Special Education

Email: Deborah.Clark@state.nm.us

Phone: 505-827-1437