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April 30, 2021

The Colorado Department of Education (CDE) recognizes that educators, students, and families are facing unprecedented circumstances and challenges related to the COVID-19 pandemic. At this time, however, the U.S. Department of Education has not granted waivers related to the CDE's requirement to annually review the performance of the State's administrative units (AUs) to determine if each AU:

- 1) Meets the requirements and purposes of Part B of IDEA,
- 2) Needs assistance in implementing the requirements of Part B of IDEA,
- 3) Needs Intervention in implementing the requirements of Part B of IDEA, or
- 4) Needs substantial intervention in implementing the requirements of Part B of IDEA.

34 C.F.R. § 300.603(b)(1)

Historically, performance is measured based on information provided by the AU, information obtained through monitoring visits, and other public information made available to the AU. Examining this information in its totality, the CDE determines the AU's level of compliance with IDEA and academic success of students with disabilities via the Compliance Matrix and Results Matrix, respectively.

Due to the COVID-19 pandemic, however, many data points in SY2019-20 were compromised or unavailable, especially in the area of academic achievement. Furthermore, some of the compliance elements were impacted considerably by the suspension of in-person learning and the closure of school buildings related to the pandemic.

In the light of these factors, the CDE has employed an abbreviated version of the Compliance Matrix, which includes only the compliance elements that were not negatively impacted by the pandemic, to make the AU Determinations for 2021 (based on the SY2019-20 data).

The abbreviated version of the Compliance Matrix used in the current determination includes the following compliance elements:

**Indicator 4A:** Whether the AU has significant discrepancy from the state in the rate of out-of-school suspensions/expulsions of students with disabilities that sum up to greater than 10 days in a school year.

**Indicator 4B:** Whether the AU has disproportionate representation by race/ethnicity in the rate of out-of-school suspensions/expulsions of students with disabilities that sum up to greater than 10



days in a school year, and the disproportionate representation is due to inappropriate policies, procedures, or practices.

**Indicator 9:** Whether the AU has disproportionate representation of students with disabilities by race/ethnicity due to inappropriate policies, procedures, or practices.

**Indicator 10:** Whether the AU has disproportionate representation of students with disabilities by race/ethnicity in a specific disability category due to inappropriate policies, procedures, or practices.

**Indicator 13:** Percent of youth ages 15 and above with an IEP that includes each of the required components for secondary transition.

**Timely and Accurate Data Submission:** The timeliness and accuracy of data submitted by the AUs under section 616 and 618 of the IDEA.

The following compliance elements, historically examined in the Compliance Matrix, were eliminated in the current determination due to the negative impact resulting from the pandemic during SY2019-20:

**Indicator 11:** Percent of children who were evaluated within 60 calendar days of receiving parental consent for initial evaluation.

**Indicator 12:** Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

Based on an evaluation using the criteria identified above, the CDE has determined that Northeast Colorado BOCES **meets the requirements and purposes of Part B of the IDEA for SY2019-20**. Please access <http://www.cde.state.co.us/cdesped/determperf> for various resources related to the determinations.

CDE is committed to supporting Northeast Colorado BOCES in its efforts to improve results for children with disabilities during these challenging times and looks forward to working with you over the next year.

If you have any questions regarding this determination or the process, please contact Miki Imura at [imura\\_m@cde.state.co.us](mailto:imura_m@cde.state.co.us).

Sincerely,



Paul Foster, Ed.D  
Executive Director; State Director of Special Education  
Exceptional Student Services Unit

Posted to <https://www.cde.state.co.us/cdesped/determinations> on 5/7/2021



# AU Compliance Matrix 2021



## Administrative Unit: 64103 - Northeast Colorado BOCES

| Indicator  | Performance                        | Points Eligible | Points Earned |
|--|------------------------------------|-----------------|---------------|
| <b>4A:</b> Significant discrepancy in the rate of suspension and expulsion from the state rate.  | 0.00                               | 2               | 2             |
| 2 = The rate of children with disabilities who received suspensions/expulsions for > 10 days in a school year was below 1.57<br>1 = Rate is above threshold for current year<br>0 = Rate is above threshold for the current and previous two school years  |                                    |                 |               |
| <b>4B:</b> Significant discrepancy in the rate of suspensions and expulsions from the state rate by race and ethnicity.  | No Significant Discrepancy         | 2               | 2             |
| 2 = No racial category was found with significant discrepancy for Indicator 4B<br>1 = At least one racial category was found with significant discrepancy for current year<br>0 = At least one racial category was found with significant discrepancy for the current and the previous two school years, and 2) policies, procedures, and/or practices were found to 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. |                                    |                 |               |
| <b>Indicator 9:</b> Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.   | NO disproportionate representation | 2               | 2             |
| <b>Indicator 10:</b> Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification.  | NO disproportionate representation | 2               | 2             |
| 2 = No racial category was found with disproportionate representation due to inappropriate identification for Indicators 9 and 10.<br>1 = At least one racial category was found with disproportionate representation for the current year<br>0 = At least one racial category was found with disproportionate representation for the current and previous year  |                                    |                 |               |
| <b>Indicator 11:</b> Timely initial evaluation   | 98%                                | n/a             | n/a           |
| <b>Indicator 12:</b> IEP developed and implemented by third birthday.  | 100%                               | n/a             | n/a           |
| <b>Indicator 13:</b> Secondary transition  | 100%                               | 2               | 2             |
| 2 = Indicators were at least 95% compliant<br>1 = Indicators were at least 75% and less than 95% compliant<br>0 = Indicators were less than 75% compliant in the current year <u>OR</u> less than 95% compliant for the current and previous year  |                                    |                 |               |
| <b>Timely and Accurate Data Submission</b>   | Yes                                | 2               | 2             |
| Special Education December Count, Special Education End of Year Collection, Special Education Discipline Collection, and Indicator 13 file review<br>2 = All above submissions were both timely and accurate<br>1 = One or two of the above submissions were late and/or inaccurate<br>0 = Three or four of the above submissions were late and/or inaccurate  |                                    |                 |               |
| <b>Total Points Available:</b>   | 12                                 |                 |               |
| <b>Compliance Points Earned:</b>   | 12                                 |                 |               |
| <b>Compliance Score:</b>   | 100 out of 100                     |                 |               |
| <b>Compliance Determination:</b>   | Meets Requirements                 |                 |               |

90 to 100 = Meets Requirements

80 to 89 = Needs Assistance

0 to 79 = Needs Intervention