

Special Education Accountability

Determinations, Non-Compliance, and Significant Disproportionality

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OSPI/WASA Special Education
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Douglas H. Gill, Ed.D.,
Director, Special Education

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It all starts here: State Performance Plan (SPP)



- ▶ Each State submitted an SPP in 2005
- ▶ Framework for improvement (8 year plan)
- ▶ Twenty Indicators (Results & Compliance)
- ▶ Collection/analysis of data
- ▶ Each State submits an Annual Performance Report (APR) that describes progress on the SPP

<http://www.k12.wa.us/SpecialEd/Data/SPP-APR.aspx>

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20 Performance Indicators

1. Graduation rates
2. Dropout rates Red = Compliance Indicator
3. Statewide assessments
- 4a. Suspension/expulsion rates
- 4b. Suspension/expulsion rates by race/ethnicity
5. Least Restrictive Environment (ages 6-21)
6. Early Childhood LRE (ages 3-5)
7. Preschool outcomes
8. Parent involvement
9. Disproportionate racial/ethnic representation in special education
10. Disproportionate racial/ethnic representation in specific disability categories

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20 Performance Indicators (cont.)

11. Timely evaluation and eligibility after parent consent
12. Part C to B transition - IEP by 3rd birthday
13. IEPs with secondary transition components
14. Postsecondary outcomes
15. General supervision - correction of non-compliance within one year of identification
16. Timely resolution of citizen complaints
17. Timely adjudication of due process requests
18. Resolution settlement agreements
19. Mediation agreements
20. Timely and accurate State-reported data

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General Supervision System



IDEA Compliance – Form Pkg 442

- Page 1 – District Determination Level
 - Page 2 – Significant Disproportionality Designation
 - Page 3 – Notification of Non-Compliance
-
- Page 4 – Student-Specific Corrections
 - Page 5 – Systemic Plan
 - Page 6 – Correction of Indicators 11, 12, 20
 - Page 7 – District and ESD Assurances

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Determination Levels

- Background
- Washington's Criteria
- The Four Levels
- Calculate Your District's Determination Level
- Sanctions

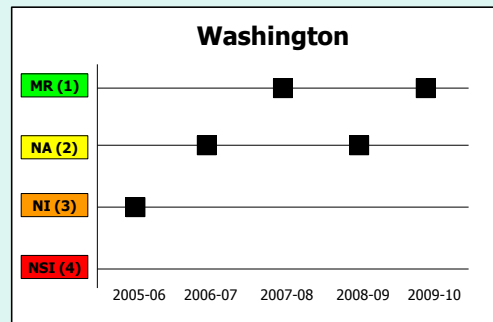
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Background

- IDEA 2004 requires the U.S. Department of Education to rate States according to their performance (*IDEA 616(a) and CFR 300.600 & 300.602*)
 - Meets Requirements (Level 1)
 - Needs Assistance (Level 2)
 - Needs Intervention (Level 3)
 - Needs Substantial Intervention (Level 4)

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State Determination Levels



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Individual States are also required to make these same determinations annually for their school districts and early education programs.

(See 34 CFR §300.600, 300.602, and WAC 392-172A-07012)

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Four Criteria

- The U.S. Department of Education requires that States consider, at a minimum, the following criteria:
 1. Audit results
 2. Timely correction of non-compliance
 3. Timely and accurate data
 4. Performance on State Performance Plan (SPP) compliance indicators (currently Ind. 9, 10, 11, 12, and 13)
- States may also consider other compliance and/or results indicators.

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Washington's Criteria

- **Criteria 1 – Material Audit Findings**
 - Does the district have any unresolved special education audit findings that are material in nature?

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Washington's Criteria (cont.)

- **Criteria 2 – Timely correction of non-compliance**
 - Did the district correct non-compliance within one year of identification? (Ind. 15)
 - This would include:
 - citizen complaint decisions
 - due process hearing decisions
 - student-specific issues of non-compliance and/or district level issues of non-compliance

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Washington's Criteria (cont.)

- **Criteria 3 – Timely and accurate data**
 - **Timely Data** – (Indicator 20)
 - Submissions on or before the deadline.
 - Re-submissions on or before the deadline.
 - Data do not have missing cells or inconsistencies.
 - **Accurate Data** – (Indicator 20)
 - Data from the correct reporting period.
 - Demonstrate accurate use of the instructions.
 - Data consistent with established definitions.

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Washington's Criteria (cont.)

- For November 2011, Criteria 3 will include the following 8 reports:
 1. Sp. Ed. Personnel Employed & Needed (*Due 12/1/10*)
 2. Child Count/Least Restrictive Environment (*Due 12/31/10*)
 3. Sp. Ed. Students Suspended/Expelled (*Due 6/30/11*)
 4. Preschool Outcomes (*Due 7/15/11*)
 5. Timeline for Initial Evaluation (*Due 7/15/11*)
 6. Transition from Part C to Part B (*Due 7/15/11*)
 7. Quarterly ARRA Reports (*Due quarterly, 2010-11*)
 8. Post School Outcome Survey (*Due 11/1/10*)

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Criteria 3 (cont.)

Data Report	Timely?	Accurate?	<i>If both timely and accurate, enter checkmark here</i>
Sp. Ed. Personnel Employed & Needed (Fed. 618 requirement)	✓	✓	✓
Child Count/LRE (Indicators 5, 6, 9, 10, & Fed. 618 requirement)		✓	
Sp. Ed. Students Suspended/Expelled (Indicator 4, Fed. 618 req.)	✓	✓	✓
Preschool Outcomes (Indicator 7)	✓		
Timeline for Initial Evaluation (Indicator 11)			
Transition from Part C to Part B (Indicator 12)	✓	✓	✓
Quarterly ARRA Reports (Federal Requirement)	✓	✓	✓
Post School Outcome Survey (Indicator 14)	✓	✓	✓
TOTAL (add checkmarks) <i>(Total of 8 = meets requirements)</i>			5

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Washington's Criteria (cont.)

- **Criteria 4 – Performance on compliance indicators**
 - Did the district demonstrate substantial compliance with the SPP compliance indicators?
 - States are required to include compliance indicators (currently 9, 10, 11, 12, and 13) in district determinations.

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Criteria 4 (cont.)

- **Indicator 9:** disproportionate representation in special education.
- **Indicator 10:** disproportionate representation in specific disability categories.
- **Indicator 11:** evaluations and eligibility determinations within 35 school days.
- **Indicator 12:** children referred by Part C who have an IEP developed and implemented by their third birthday.
- **Indicator 13:** youth turning 16 and above with an IEP that includes all required transition components.

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More on criteria 4 (Indicators 11, 12, and 13)

- Minimum "n" size = 10% of the relative population
- "n" size < 10% = will not impact determination level
- **Any** issues of non-compliance, regardless of "n" size, are required to be corrected under criteria 2 (timely correction of non-compliance)

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Meets Requirements (Level 1)

1. No unresolved special education audit findings, **and**
2. Corrected all identified non-compliance within one year, **and**
3. Timely/accurate data for all 8 reports, **and**
- 4a. Substantial compliance on indicators 11, 12, **and** 13, **and**
- 4b. Disproportionate representation is **not** a result of inappropriate identification (indicators 9 and 10).

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Needs Assistance (Level 2)

1. No unresolved special education audit findings, **and**
2. Corrected all identified non-compliance within one year, **and**
3. Timely/accurate data for 6 or 7 reports, **or**
- 4a. Between 65% and 94.9% on indicators 11, 12, **or** 13, **and**
- 4b. Disproportionate representation is **not** a result of inappropriate identification (indicators 9 and 10).

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Needs Intervention (Level 3)

1. Unresolved special education audit findings, **or**
2. Non-compliance was corrected, but not within one year, **or**
3. Timely/accurate data for 4 or 5 reports, **or**
- 4a. Less than 65% on indicators 11, 12, **or** 13, **or**
- 4b. Disproportionate representation **is** a result of inappropriate identification (indicators 9 or 10).

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Needs Substantial Intervention (Level 4)

- Uncorrected non-compliance remains in the district, **or**
- The district submitted **fewer than 4** of the 8 required reports timely/accurately.

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Rubric

CRITERIA	MEETS REQ. (1)	NEEDS ASST. (2)	NEEDS INTERV. (3)	NEEDS SUBST. INTERV. (4)
1. Did the district resolve all special education audit findings (if any)?	yes		no	
2. Were all identified issues of non-compliance corrected by the district, including verification and validation by the ESD and OSPI, as soon as possible but no later than one year from identification?	yes		no <i>(corrected, but not timely)</i>	no <i>(uncorrected)</i>
3. Did the district submit timely and accurate data (Indicator 20)?	All 8 reports	6 or 7 reports	4 or 5 reports	Fewer than 4 reports
4a. Did the district demonstrate substantial compliance (on SPP Indicators 11, 12, and 13)? <i>"n < reqd" means the district did not meet the "n" size for that indicator</i>	yes <i>(95% or higher (or n-reqd) on all three)</i>	65.0% to 94.9%	Below 65% <i>(on any of the three indicators)</i>	
4b. Is disproportionate representation the result of inappropriate identification (Indicators 9, 10)?	no		yes	

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Calculate your district's level...

- **Criteria 1 – Check your district's audit results for special education.**
 - No unresolved special education audit findings = **"meets requirements"**.
 - Unresolved special education audit findings = **"needs intervention"**.

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Calculate your district's level...

CRITERIA	MEETS REQ. (1)	NEEDS ASST. (2)	NEEDS INTERV. (3)	NEEDS SUBST. INTERV. (4)
1. Did the district resolve all special education audit findings (if any)?	X			
2. Were all identified issues of non-compliance corrected by the district, including verification and validation by the ESD and OSPI, as soon as possible but no later than one year from identification?				
3. Did the district submit timely and accurate data (Indicator 20)?				
4a. Did the district demonstrate substantial compliance (on SPP Indicators 11, 12, and 13)? <i>"n < reqd" means the district did not meet the "n" size for that indicator</i>				
4b. Is disproportionate representation the result of inappropriate identification (Indicators 9, 10)?				

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Criteria 2

- **Check your complaint & due process decisions (2009-10) & Non-Compliance worksheet (Nov. 2010)**
 - No non-compliance identified = **"meets requirements"**.
 - All identified issues were corrected within the required timeline = **"meets requirements"**.
 - Corrections made, but not timely = **"needs intervention"**.
 - Uncorrected issues of non-compliance still exist = **"needs substantial intervention"**.

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Calculate your district's level...

CRITERIA	MEETS REQ. (1)	NEEDS ASST. (2)	NEEDS INTERV. (3)	NEEDS SUBST. INTERV. (4)
1. Did the district resolve all special education audit findings (if any)?	X			
2. Were all identified issues of non-compliance corrected by the district, including verification and validation by the ESD and OSPI, as soon as possible but no later than one year from identification?	X			
3. Did the district submit timely and accurate data (Indicator 20)?				
4a. Did the district demonstrate substantial compliance (on SPP Indicators 11, 12, and 13)? <i>"n < reqd" means the district did not meet the "n" size for that indicator</i>				
4b. Is disproportionate representation the result of inappropriate identification (Indicators 9, 10)?				

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Criteria 3

- **Check the data profile for indicator 20:**

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

State Reports and their due dates:	Personnel Due 12/17/10	Child Count/LRE Due 12/31/10	Disc Due 6/30/11	C 2 B Due 7/15/11	Init Eval Due 7/15/11	COSF Due 7/15/11	ARRA (up to 8 qtrly reports)	Post-school Outcomes Due 11/1/10
District submitted:	12/22/10	1/8/11	6/30/11	7/13/11	7/13/11	7/15/11	All on time	On time

- **Late/inaccurate reports are highlighted in red.**

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Criteria 3

- All 8 reports timely & accurate = "meets requirements".
- 6 or 7 reports timely & accurate = "needs assistance".
- 4 or 5 reports timely & accurate = "needs intervention".
- 0, 1, 2, or 3 reports timely & accurate = "needs substantial intervention".

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Calculate your district's level...

CRITERIA	MEETS REQ. (1)	NEEDS ASST. (2)	NEEDS INTERV. (3)	NEEDS SUBST. INTERV. (4)
1. Did the district resolve all special education audit findings (if any)?	X			
2. Were all identified issues of non-compliance corrected by the district, including verification and validation by the ESD and OSPI, as soon as possible but no later than one year from identification?	X			
3. Did the district submit timely and accurate data (Indicator 20)?		X		
4a. Did the district demonstrate substantial compliance (on SPP Indicators 11, 12, and 13)? <i>/"n < reqd" means the district did not meet the "n" size for that indicator</i>				
4b. Is disproportionate representation the result of inappropriate identification (Indicators 9, 10)?				

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Criteria 4a

- Check your district's 10-11 performance (Ind. 11, 12, and 13) on the district's data profile

09-10 District	10-11 District	10-11 State	10-11 Target	Meet Target?	← 11
83.6%	78.0%	TBD	100%	No	
09-10 District	10-11 District	10-11 State	10-11 Target	Meet Target?	← 12
100%	96.8%	TBD	100%	No	
09-10 District	10-11 District	10-11 State	10-11 Target	Meet Target?	← 13
No Review	59.2%	TBD	100%	No	

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Criteria 4a

- If all 3 indicators are at or above 95% (or the "n" size not met) = "meets requirements".
- If any indicators are between 65% and 94.9% (but not below 65%) = "needs assistance".
- If any indicators are below 65% = "needs intervention".

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Calculate your district's level...

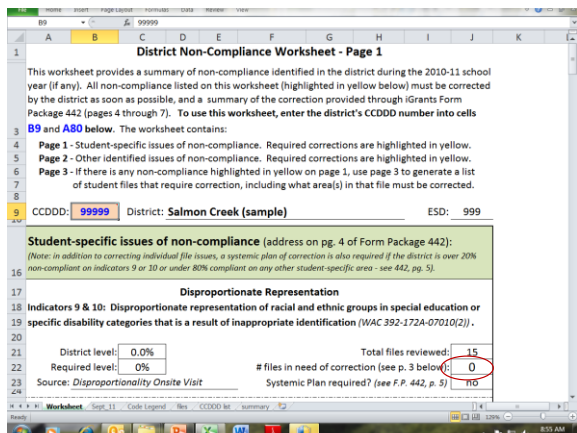
CRITERIA	MEETS REQ. (1)	NEEDS ASST. (2)	NEEDS INTERV. (3)	NEEDS SUBST. INTERV. (4)
1. Did the district resolve all special education audit findings (if any)?	X			
2. Were all identified issues of non-compliance corrected by the district, including verification and validation by the ESD and OSPI, as soon as possible but no later than one year from identification?	X			
3. Did the district submit timely and accurate data (Indicator 20)?		X		
4a. Did the district demonstrate substantial compliance (on SPP Indicators 11, 12, and 13)? <i>/"n < reqd" means the district did not meet the "n" size for that indicator</i>			X	
4b. Is disproportionate representation the result of inappropriate identification (Indicators 9, 10)?				

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Criteria 4b

- Did the district receive a Disproportionality onsite visit during 2010-11?
 - District did not receive a Disproportionality onsite visit during 2010-11, or did receive a visit but did not have any files with inappropriate identification = "meets requirements".
 - District received a Disproportionality onsite visit in 2010-11, and there were files in need of correction (indicators 9 and 10) due to inappropriate identification = "needs intervention".

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Calculate your district's level...

CRITERIA	MEETS REQ. (1)	NEEDS ASST. (2)	NEEDS INTERV. (3)	NEEDS SUBST. INTERV. (4)
1. Did the district resolve all special education audit findings (if any)?	X			
2. Were all identified issues of non-compliance corrected by the district, including verification and validation by the ESD and OSPI, as soon as possible but no later than one year from identification?	X			
3. Did the district submit timely and accurate data (Indicator 20)?		X		
4a. Did the district demonstrate substantial compliance (on SPP Indicators 11, 12, and 13)? ("n < read" means the district did not meet the "n" size for that indicator)			X	
4b. Is disproportionate representation the result of inappropriate identification (Indicators 9, 10)?	X			

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For questions about...	Contact...
•Unresolved audit findings (criteria 1)	Your district's business manager.
•Correction of non-compliance related to dispute resolution (criteria 2)	Pam McPartland, OSPI Sp. Ed. 360-725-6075
•Other issues of non-compliance (criteria 2) •Performance on the compliance indicators (criteria 4a) •Disproportionate representation (criteria 4b)	Program Review Team, OSPI Sp. Ed. 360-725-6075
•Timely and accurate data (criteria 3)	Sandy Grummick, OSPI Sp. Ed. 360-725-6075

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Needs Assistance (Level 2) - TA/Improvement Activities

- OSPI will advise the school district and ESD of sources of technical assistance, which may include:
 - ESD, OSPI, and/or OSEP/DOE
 - Technical assistance providers
 - Experts and/or distinguished professionals
 - Colleges/universities, non-profit organizations, etc.

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Needs Assistance (for 2 consecutive years – "NA2") - Federally-mandated Enforcement Activities

- District may be required to work with a specific entity for technical assistance, and/or
- Conditions may be imposed on the district's use of Part B funds.

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Needs Intervention (Level 3) - TA/Improvement Activities

- May receive a focused monitoring visit,
- Will receive TA resources for improvement,
- May be required to prepare/implement an improvement or corrective action plan, and/or
- May be partnered with another district for technical assistance.

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Needs Intervention (for 3 consecutive years – “NI3”) - Federally-mandated Enforcement Activities

- Will be required to prepare/implement a corrective action plan and/or compliance agreement,
- OSPI may withhold, in whole or in part, further Part B payments to the district, and/or
- Conditions may be imposed on the district’s use of Part B funds.

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Needs Substantial Intervention (Level 4) - TA/Improvement Activities

- Will receive a focused monitoring visit, which may lead to a comprehensive, consolidated review of all federal programs,
- Will receive TA resources for improvement,
- Will be required to prepare/implement an improvement or corrective action plan, and/or
- May be partnered with another district for technical assistance.

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Needs Substantial Intervention (at any time) - Federally-mandated Enforcement Activities

- OSPI is required to withhold, in whole or in part, any further payments to the district under Part B.

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Notification



- Districts notified of determination level **electronically** (through iGrants **Form Package 442** – IDEA Compliance Package) – November 1st.
- Districts may request a review and reconsideration if their level is incorrect due to OSPI error. Requests must be received by **November 15th**.

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Anticipated Changes for November 2012 Determinations

- Criteria 3 – Removing ARRA quarterly reports from the timely and accurate reporting requirements.
- Criteria 4a (Indicators 11, 12, and 13) - Raising compliance required for level 2 to 75% (from current level of 65%).
- Criteria 4b – Adding compliance on Indicator 4b (suspension and expulsion rates by race/ethnicity).

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Significant Disproportionality

- Background
- Washington’s Definition
- Notification
- Required Actions

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Overview (34 CFR §300.646)

- States are required to collect and examine data annually from school districts to determine if significant disproportionality based on race or ethnicity is occurring in the state with respect to:
 - The identification of children,
 - The identification of particular disabilities,
 - The placement of children, OR
 - The incidence, duration, and type of disciplinary actions.

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The designation of significant disproportionality is based solely on the existence of discrepant data.

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Washington's Continuum of Disproportionality

Weighted Risk Ratio (WRR)

≤0.5	>0.5 to <0.67	0.67 to 1.5	>1.5 to <2.0	≥2.0 to <3.0	≥3.0 to <4.0	≥4.0 (3 cons. yrs.)
Disprop Under-Rep	At Risk for Disprop Under-rep	No Disprop Rep	At Risk for Disprop Over-rep	Disprop Over-rep	At Risk for Signif Disprop	Signif Disprop

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Notification



- Districts are notified of their significant disproportionality designation on page 2 of iGrants form package 442.
- Posted to iGrants on **November 1st** of each year.

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Required Actions

- Districts with a designation of significant disproportionality must complete three required actions

34 CFR §300.646(b) and WAC 392-172A-07040(2)

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Required Actions (cont.)

- Review and, if appropriate, revise policies, procedures, and practices used in the identification of children as children with disabilities or the placement in particular educational settings of these children;
- Publicly report on the revision of policies, procedures, and practices; and

(Note – actions 1 and 2 are completed using the worksheet on page 2 of iGrants form package 442, and are due by April 30th)

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Required Actions (cont.)

- 3. Reserve 15% of the district's federal funds to provide comprehensive, coordinated early intervening services (CEIS) to serve students particularly, but not exclusively, in those groups that were significantly over-identified.

(Note – the plan for using CEIS is completed using iGrants form package 267, due July 1, 2012)

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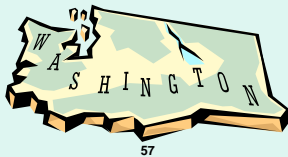
Non-Compliance

- Identification
- Notification
- Correction
- Verification
- Validation
- Timelines

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Identification of Non-compliance

- Indicator 15: The State's general supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects non-compliance **as soon as possible**, but in no case later than one year from identification. *(20 U.S.C. 1416 (a)(3)(B))*



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State Targets – Indicator 15

Year	Target	Actual	Met Target?
2005-06	100%	100%	Yes
2006-07	100%	100%	Yes
2007-08	100%	100%	Yes
2008-09	100%	100%	Yes
2009-10	100%	100%	Yes
2010-11	100%	TBD	TBD

Note: Compliance Indicator, so mandatory target of 100%.

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Non-compliance includes:

- Any SPP **compliance** indicator in which the district is not at **100%** performance,
- Issues related to any of the SPP **results** indicators, or
- Any other identified issues.

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General Supervision System



- Regardless of the level of non-compliance, if a State finds non-compliance the State must notify the district in writing.
- Non-compliance must be corrected as soon as possible, but in no case more than one year from identification (*OSEP Memo 09-02*).

CORRECTION, VERIFICATION, & VALIDATION = ONE YEAR


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Review of Data

- Districts have the opportunity to review data for indicators 11, 12, and 20 prior to the issuance of official notifications in the fall
- This process is not through form package 442
- Submit corrected data to OSPI by September 30th

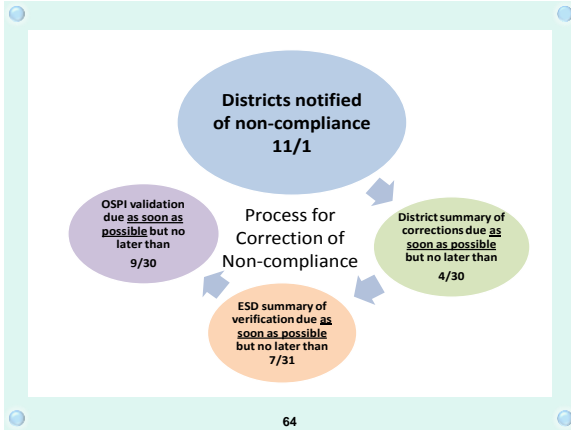
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Notification



- Districts notified **electronically** (iGrants *Form Package 442* – IDEA Compliance Package).
- Notifications for 2010-11 non-compliance available **November 1st, 2011**.
- Additional notifications may be issued dependent upon monitoring activities and associated timelines.

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Correction

- Correction of official non-compliance is through iGrants Form Package 442 (pages 4 through 7).

iGrants 442 is ONLY for official non-compliance identified on the district's *Non-compliance Worksheet*.

- A summary of how each issue was corrected must be submitted as soon as possible but no later than **April 30th**.

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Student-Specific Correction Sample

SSID #	Non-Compliance Code(s) (see notification worksheet)	School District Summary of Correction (including date(s) of correction) <i>**For school district use only**</i>
444444444	1, 2, 7a, 7b, 7d, 8	Interest survey conducted (<i>date</i>) to gather transition assessment data and to develop a compliant transition plan. All transition components were addressed, including postsecondary goals and course of study. IEP meeting held (<i>date</i>) to provide specific data relating to present levels, to include measurable goals for reading and behavior, and to revise the transition plan. IEP meeting included a general education teacher in attendance.
555555555	1, 2, 7a, 7b	Student graduated on (<i>date</i>).
666666666	Late, Eval	Student was reevaluated and exited from special education on (<i>date</i>).

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Systemic Plans of Correction

- Regardless of Determination status, if less than 80% compliant on Indicator 13 or any other procedural compliance area, or more than 20% non-compliant on Indicators 9 or 10, a **Systemic Plan** is required. This Plan is **in addition to** the correction of individual issues of non-compliance.
- Systemic Plans outline **district-level improvement activities** that will be implemented in order to ensure that the issue(s) does not recur.

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Systemic Plan Template

Area:		District:		
Baseline Data: (What is your current compliance level in this area?)				
Root Cause: (What did you determine was the cause(s) of the identified non-compliance? Indicate if a policy, procedure, and/or practice contributed to this non-compliance.)				
Evidence of Change: (What criteria will you use to measure the results/effectiveness of your identified activities?)				
Activities/Outputs	Resources (human, fiscal, or material)	Position(s) Responsible (contact for the activity)	Timelines (date of anticipated initiation/completion)	Follow-up/Commentary (any additional information)

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Sample Indicator 11 Correction

Root Cause <i>(What did the district determine was the cause(s) of the non-compliance? Indicate if a policy, procedure, and/or practice contributed to this non-compliance.)</i>	School District Summary of Correction (including date(s) of correction) <i>**For school district use only**</i>
<p>On <i>(date)</i>, special education director met with all psychologists in the district. Challenges regarding timely completion of evaluations were discussed. Primary challenges that were identified included:</p> <ol style="list-style-type: none"> 1. lack of documentation and/or use of an agreement to extend the timeline <i>(policy)</i>. 2. district scheduling issues <i>(procedure)</i>. 3. delays in obtaining medical reports, and 4. early childhood transition planning conferences held less than 90 days prior to a child's third birthday <i>(practice)</i>. 	<p>A plan was developed and implemented to ensure timely completion of evaluations. The main components of the plan included:</p> <ol style="list-style-type: none"> 1. District adopted the new model state form (5c - agreement to extend evaluation timeline) at the beginning of the 20XX-XX school year. Psychologists will complete this form and obtain parent agreement when circumstances may warrant an extension. 2. Support staff developed and implemented on <i>(date)</i> an electronic tickler system for tracking initial evaluation timelines with built-in intranet reminders sent to eligibility team members. 3. Based on root cause analyses, two buildings received targeted technical assistance on <i>(date)</i> and <i>(date)</i> to clarify state regulations and written policies and procedures regarding mandatory initial evaluation timelines. 4. Quarterly meetings were established for 20XX-XX and are ongoing with Part C providers to increase collaboration efforts for timely referrals and scheduling of transition planning conferences. <p>Special education director will conduct quarterly reviews over the next 2 years of all initial evaluations completed within each quarter to ensure that evaluations are completed on time and extensions are appropriately documented.</p>

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Verification Activities (completed by ESD)

- Verify district correction of identified areas of non-compliance.
- Review data sample to determine if district is currently correctly implementing the regulatory requirement.
- Submit verification summary to OSPI **as soon as possible** but no later than July 31st.

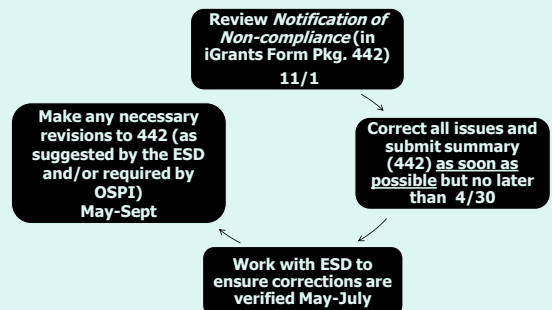
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Validation activities (completed by OSPI)

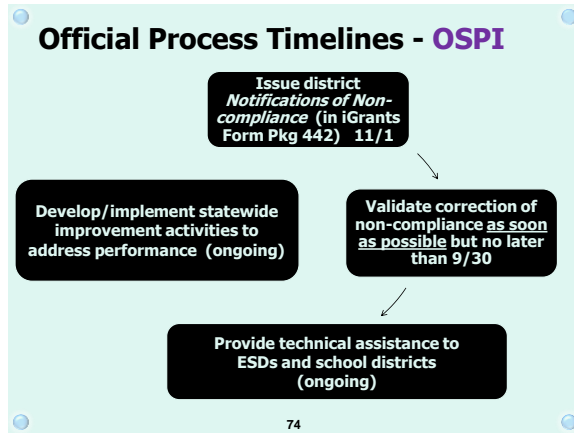
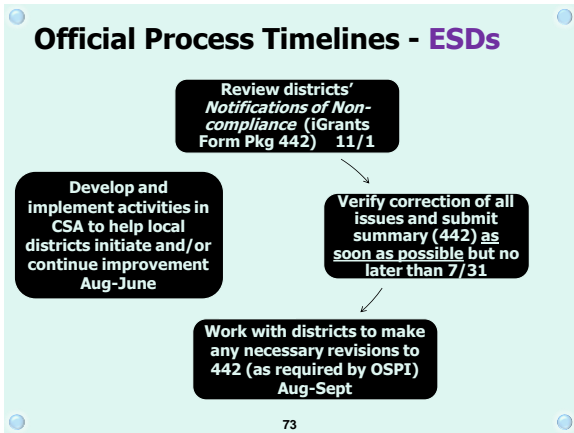
- Include (but are not limited to):
 - review of correction and verification summaries (iGrants Form Package 442) **as soon as possible** but no later than **September 30th**
 - file sampling
 - review of district-submitted data and/or IEPs
 - Monitoring visits

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Official Process Timelines - Districts



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We are all in this together...

If even **ONE** district did not correct all of their non-compliance in a timely manner, our *entire state* would be out of compliance on Indicator 15!

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- ### Resources
- **Determinations:**
<http://www.k12.wa.us/SpecialEd/programreview/Determinations.aspx>
 - **Significant Disproportionality:**
<http://www.k12.wa.us/SpecialEd/programreview/Disproportionality.aspx>
 - **Identification/Correction of Non-Compliance:**
<http://www.k12.wa.us/SpecialEd/programreview/CorrectNon-Compliance.aspx>
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For additional information

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Questions?