



**District of Columbia
Part B State Annual Performance Report (APR) for
Federal Fiscal Year (FFY) 2012 (SY 2012- 2013)**

Submitted: February 3, 2014

Revised April 30, 2014



TABLE OF CONTENTS

INDICATOR 1:	8
INDICATOR 2:	13
INDICATOR 3:	16
INDICATOR 4A:	21
INDICATOR 4B:	33
INDICATOR 5:	46
INDICATOR 6:	50
INDICATOR 7:	53
INDICATOR 8:	61
INDICATOR 9:	67
INDICATOR 10:	74
INDICATOR 11:	82
INDICATOR 12:	90
INDICATOR 13:	97
INDICATOR 14:	106
INDICATOR 15:	111
INDICATORS 16 AND 17:	128
INDICATOR 18:	129
INDICATOR 19:	ERROR! BOOKMARK NOT DEFINED.
INDICATOR 20:	133

District of Columbia
Part B State Annual Performance Report (APR) for
Federal Fiscal Year (FFY) 2012 (SY 2012- 2013)

Overview of the Annual Performance Report Development

The District of Columbia Office of the State Superintendent of Education (OSSE), as the State Education Agency (SEA) for the District of Columbia, is responsible for ensuring Local Educational Agency (LEA) compliance with the Individuals with Disabilities Education Act (IDEA, at 20 U.S.C. § 1400, et seq.). In FFY 2012, the District of Columbia included 58 LEAs and served 12,585¹ students with IEPs. However, in the District of Columbia, public charter LEAs may elect to have the District of Columbia Public Schools (“DCPS”) serve as the LEA for the purposes of IDEA, in which case DCPS becomes responsible for ensuring IDEA compliance.² In FFY 2012, 15 public charter LEAs made this election. Therefore, 43 LEAs are referenced when examining performance related to IDEA compliance. It is important to note that some performance indicators addressed in this report utilize previous FFY data as required by the United States Department of Education’s (USDE’s) Office of Special Education Programs (OSEP). In the case that prior year data is utilized, its use is referenced accordingly.

OSSE’s Division of Specialized Education (DSE) is responsible for the development and promulgation of state policy governing special education; monitoring of LEAs for compliance with IDEA as well as other federal and local regulations and court-ordered consent decrees; allocation and administration of IDEA grant funds to LEAs and other public agencies; provision of training and technical assistance to LEAs; and investigation and resolution of state-level administrative complaints relating to special education. OSSE also administers the District’s due process hearing system, through the Student Hearing Office (SHO), which reports to OSSE’s Chief Operations Officer and is operated independently of the Division of Specialized Education.

DSE is also responsible for the regulation of nonpublic schools under local statute. This includes setting rates for nonpublic schools; budgeting for, processing, and paying the invoices from nonpublic schools; monitoring the quality of nonpublic schools serving District of Columbia children; taking corrective action against schools not meeting District of Columbia standards; and issuing Certificates of Approval (COA) to nonpublic special education schools, in accordance with local law and regulations.

In FFY 2012, the DSE also housed the District of Columbia Early Intervention Program (DC EIP) Unit, which serves as the lead agency for IDEA Part C early intervention services in the District of Columbia. In FFY 2013, DC EIP was transitioned to the Division of Early Learning, while DSE retained oversight for monitoring and compliance.

¹ Data Source: OSSE December 1, 2012 Child Count Submission to OSEP.

² D.C. Official Code § 38-1802.10(c).

The District of Columbia's Part B State Performance Plan (SPP) continues to serve as a road map that outlines performance goals and annual targets that ensure accelerated reform. Progress in key performance areas is reviewed and reported on annually via the Annual Performance Report (APR). This annual data collection and review process allows OSSE to make data-based decisions that ensure the appropriate allocation of resources to areas of greatest need. The SPP and the APR are seen as critical levers for assisting OSSE in meeting its special education reform goals. Following receipt of a waiver from certain requirements of *No Child Left Behind*, the agency has worked to ensure alignment between efforts that support our ability to meet both the targets in the waiver and the APR/SPP.

OSSE ensures that stakeholders and the public are engaged in its activities through regular meetings of the State Advisory Panel on Special Education (SAP), quarterly meetings with LEA representatives, expansion of OSSE's special education web page, regular communications to LEAs and other stakeholders, and frequent focus groups on specific topics central to the reform efforts. Together, these tools create a feedback loop which allows for continuous improvement at both the state and local levels.

The FFY 2012 APR was prepared using the instructions provided by OSEP in the following documents:

- OSEP's FFY 2011 APR Response Table for the District of Columbia
- OSEP's General Instructions for the SPP and APR
- OSEP's SPP and APR Part B Indicator Measurement Table
- OSEP's Optional APR Templates

OSSE staff and contractors collected data and made calculations for each of the indicators. Technical assistance was provided by several federal contractors – most notably the Mid-South Regional Resource Center. OSSE leadership discussed each of the requirements, reviewed calculations, and discussed improvement activities.

Data Sources

Indicator 1: The data used in reporting this indicator are aligned with standards of the Elementary and Secondary Education Act ("ESEA") and are the same data as reported by the OSSE under the ESEA.

Indicator 2: OSSE used data collected on Table 4 (Exiting) in reporting this indicator.

Indicator 3: The data for this indicator were based on the results of the District of Columbia Comprehensive Assessment System ("DC-CAS"), the statewide assessments in reading/language arts and mathematics and the DC-CAS Alt, a portfolio-based assessment used to measure achievement of students with the most significant cognitive disabilities on alternate achievement standards. The data were calculated by the OSSE Office of Data Management and are the same data as reported for ESEA purposes.

Indicator 4: OSSE used data collected on Table 5 of Information Collection 1820-0621 (Report of Children with Disabilities Subject to Disciplinary Removal) to report on Indicator 4.

Indicator 5: Educational environments data were collected at the same time as the December 1, 2012 Child Count. IEP information from the District of Columbia's Special Education Data System (SEDS) was used to calculate percent of time in the regular classroom.

Indicator 6: Educational environment data for children aged 3-5 with IEPs was collected at the same time as the December 1, 2012 Child Count. IEP information from SEDS was used to calculate percent of time in an early childhood program or separate special education class.

Indicator 7: Child Outcome Survey (COS) Forms were collected for entry and exit from LEAs throughout the 2012-2013 school year.

Indicator 8: OSSE used both an electronic (Survey Monkey) and a paper-and-pencil, modified version of the 26-item National Center for Special Education Accountability Monitoring (NCSEAM) Part B K-12 survey. A few items were modified in order to increase the readability of the survey and increase response rates. OSSE contracted with Mountain Plains Regional Resource Center (MPRRC) for assistance with the data collection, data analysis, and report-writing for this indicator.

Indicator 9: OSSE used its 2012 Enrollment and Child Count data for the Indicator 9 FFY 2012 SPP/APR submission.

Indicator 10: OSSE used its 2012 Enrollment and Child Count data for the Indicator 10 FFY 2012 SPP/APR submission.

Indicator 11: OSSE used data from SEDS to collect data for this indicator.

Indicator 12: OSSE used data from SEDS and the Part C data system (Early Steps and Stages) to collect data associated with Part C to B transition. This data was then correlated with information in SEDS to identify information for this indicator.

Indicator 13: OSSE completes a random sampling of at least 100 IEPs from all LEAs of youth aged 16 and above to be reviewed for secondary transition content on a quarterly basis. The random sample is based on SEDS data of all youth aged 16 and above enrolled in District of Columbia LEAs.

Indicator 14: OSSE used census data for this indicator. OSSE collected exiting information for all students who graduated or left school in FFY 2011 and provided this information to its contractor to complete the survey.

Indicator 15: OSSE used data from DSE's Monitoring and Compliance Unit tracking logs, the Blackman Jones Database, and SEDS to report on this indicator.

Indicator 16: Reporting on this indicator was not required by OSEP as part of the FFY 2012 APR.

Indicator 17: Reporting on this indicator was not required by OSEP as part of the FFY 2012 APR.

Indicator 18: OSSE used its web-based Case Management System (Docketing System), which enables the Student Hearing Office to capture and report information on resolution sessions.

Indicator 19: OSSE used its web-based Case Management System (Docketing System), which enables the Student Hearing Office to capture and report information on mediations.

Indicator 20: OSEP has determined that OSEP will calculate the rating for Indicator 20. States are no longer required to provide a preliminary calculation on this indicator. As permitted by OSEP, OSSE has elected not to report preliminary data for this indicator but will review and respond to OSEP'S calculation.

OSSE is pleased to note that the District made significant progress in FFY 2012. Key initiatives that were completed include:

- Maintenance of a Placement Oversight Unit and implementation of a change in placement policy designed to decrease over-reliance on separate placements and ensure appropriate referrals, which continued to maintain an overall diversion rate of over 40%³ in its fifth year of operation;
- Continued refinement of the LEA grant application process and a reimbursement system which proactively assists LEAs in managing funding;
- Continued implementation and refinement of SEDS;
- Continued production of a Related Services Management Report (RSMR) to allow LEAs to proactively manage related service delivery and prevent lapses;
- Continued refinement of a robust system of general supervision, with issuance of letters of finding and required corrective actions as warranted;
- Implementation of a comprehensive training and technical assistance plan for all LEAs, with additional on-site coaching and technical assistance provided to LEAs based on performance data as well as upon request or referral;
- Continued implementation of an electronic docketing system for the Student Hearing Office (SHO), which supports effective management of the due process hearing system and timely provision of hearings and issuance of hearing officer decisions;
- Development of community forums to ensure that LEAs, parents, and the community were kept abreast of progress and have input into OSSE reform efforts;

³ The diversion rate reflects the percentage of students for which a change in placement to a more restrictive setting was initially considered by the IEP team, but placement into a nonpublic school was subsequently diverted once the LEA received technical assistance and other supportive resources from OSSE.

- Release of a special education quality assessment tool; and
- Ongoing creation of foundational regulation and policies designed to align local practice with federal requirements.
- Completion of first annual Accuracy Audit to measure implementation of related services throughout all LEAs.

OSSE recognizes that sustainable reform requires proactive problem solving to address many systemic challenges. OSSE is pleased to note that the data collected for this reporting period continues to be more robust than in prior years, reflecting OSSE's focus on data quality and accuracy. In addition, while there is still work to do, this report provides clear evidence of the success of the District's special education reform efforts and of the LEAs' increased ability to provide quality services in the least restrictive environment.

This report is designed to provide a comprehensive update on SEA efforts to meet both federal and local objectives for all students with IEPs to achieve at high levels and receive timely and effective support. Together with the SPP, this report will be published on the OSSE website at <http://osse.dc.gov/> by June 30, 2014.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: FAPE in the LRE

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

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

Measurement: States must report using the adjusted cohort graduation rate required under the ESEA.

FFY	Measurable and Rigorous Target
2012 (2011-2012 data)	Eighty five percent of youth with IEPs graduating from high school will receive a regular diploma.

Actual Target Data for FFY 2012:

44%

The actual target data was calculated as follows:

$$366 / 825 * 100 = 44\%$$

Data Source:

The data used for this indicator are aligned with USDE's ESEA requirements and were supplied to OSSE by LEAs, which certified their submissions.

For Indicator 1, OSSE must examine data for the year before the reporting year and compare the results to the target. Using the graduation calculation formula, the 2011- 2012 graduation rate for students with IEPs is 44%. The data are presented in the following calculation:

$$366 / 825 * 100 = 44\%$$

The graduation rate for FFY 2012 is calculated based on students who were eligible for special education at any time during high school, not based on the student's eligibility status on date of exit.

Four-Year Cohort Graduation Rate = # students with disabilities graduating within four or fewer years with a regular high school diploma ÷ (first-time CWD entering ninth grade four years earlier + transfers in - transfers out - deceased) * 100

OSSE did not meet its FFY 2012 target for Indicator 1 of 85%.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

The actual target data of 44% represents continuation of progress from the State's reported FFY 2011 target of 39%. In FFY 2012, OSSE continued to focus on the proper development and implementation of secondary transition plans, maintained a State Community of Practice around secondary transition, and conducted numerous professional development and training sessions for LEAs to increase knowledge and skills related to increased secondary teaching and learning and preparing students for graduation and postsecondary options.

Specifically, OSSE hosted trainings on developing measurable annual goals and objectives for transition services, utilizing SEDS; integrating best practices for addressing the needs of students with IEPs into professional learning and teaching activities; determining student progress at the secondary level; implementing an effective Response to Intervention (RTI) framework in secondary schools; developing and implementing research-based secondary school reading interventions; identifying programs and activities that will help students reach their post-secondary school goals by linking graduation, dropout, secondary transition, and post-school outcomes to drive student improvement; and providing technical assistance on the 15 Strategies for Dropout Prevention from the National Dropout Center.

OSSE further enhanced training and technical assistance in this area via a one-day Secondary Transition Institute in the summer of 2013, followed by the launch of the CIRCLES secondary transition planning model, made possible through a partnership with the National Secondary Transition Technical Assistance Center (NSTTAC).

The CIRCLES model promotes interagency collaboration and service coordination for transition-aged youth with disabilities who can greatly benefit from the involvement of multiple agencies to successfully transition to post-school life. CIRCLES meetings offer schools, transition-related service agencies, students, and families the unique opportunity to discuss a student's individualized needs and available resources to meet those needs.

In addition, during the fall of 2012, OSSE released a comprehensive Secondary Transition Toolkit for LEAs, families, and students, developed in partnership with the Community of Practice.

OSSE believes that its dedication to the allocation of resources in this area and its diligence in engaging community stakeholders is contributing to the District's ability to make necessary

progress in graduation, dropout and postsecondary outcomes; however, the District of Columbia must continue to accelerate its progress. OSSE is committed to continuing to support LEAs in achieving excellence in teaching and learning at the classroom level in order to provide every student with increased opportunities to graduate and succeed after high school.

OSSE is pleased to be moving forward with its work in developing and implementing Common Core Standards, including issuing State guidance related to curriculum mapping and instructional entry points for students with IEPs, as well as supporting the development of standards-driven IEPs. It is believed that both of these initiatives, supported by OSSE's receipt of Federal Race to the Top funding, will support the District's ability to make significant progress related to this indicator.

The following activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING ACTIVITIES		
Improvement Activities	Timelines	Resources
Completion of Secondary Transition Monitoring as Required by OSEP: The Quality Assurance and Monitoring (QAM) unit continued regular monitoring of 100 IEPs of students aged 16 or older to ensure compliance with requirements related to secondary transition content in FFY 2012. This monitoring will continue through FFY 2013.	Ongoing through June 30, 2013	Director, QAM Unit

CONTINUING ACTIVITIES		
Improvement Activities	Timelines	Resources
<p>Implementation of a Training Series to Support Secondary Success: The DSE's Training and Technical Assistance (TTA) Unit continued a robust training series in FFY 2012 which will continue through FFY 2013. This LEA training series includes trainings specifically designed to ensure the success of students in secondary grades. Specifically, the training series includes the following training content:</p> <ul style="list-style-type: none"> • Developing measurable annual goals and objectives for transition services utilizing SEDS • Integrating best practices for addressing the needs of students with IEPs into professional learning and teaching activities • Determining student progress at the secondary level • Implementing an effective Response to Intervention (RTI) framework in secondary schools • Developing and implementing research-based secondary school reading interventions • Identifying programs and activities that will help students reach their post-secondary school goals by linking graduation, dropout, secondary transition, and post-school outcomes to drive student improvement • Providing technical assistance on the 15 Strategies for Dropout Prevention from the National Dropout Center 	Ongoing through June 30, 2013	Director, TTA Unit

CONTINUING ACTIVITIES		
Improvement Activities	Timelines	Resources
Completion and Implementation of a State Action Plan: The Secondary Transition Community of Practice continued to meet regularly throughout FFY 2012 to support work related to ensuring that students with disabilities have opportunities to access a regular or alternate diploma and are well-prepared for transition to life beyond high school. The team also completed development of a State Action Plan and will continue to implement the plan through FFY 2013.	Ongoing through June 30, 2013	Director, TTA Unit; DSE Leadership Team

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: FAPE in the LRE

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

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

Measurement: States must report a percentage using the number of youth with IEPs (14-21) who exited special education due to dropping out in the numerator and the number of all youth with IEPs who left high school (ages 14-21) in the denominator.

FFY	Measurable and Rigorous Target
2012	The percent of youth with IEPs dropping out of high school will decrease to 5.8%

Actual Target Data for FFY 2012 (calculated using data from the 2011-12 school year):

6%

The actual target data was calculated using the following calculation:

$$51/825 * 100 = 6\%$$

Calculation

OSSE is calculating indicator 2 utilizing the cohort dropout rate= (# CWD dropping out ÷ # CWD enrolled in SY11-12 graduating cohort) * 100

$$51 \text{ CWD dropouts} \div 825 \text{ adjusted CWD cohort} * 100 = 6\%$$

OSEP requires OSSE to use State-level dropout data for the year before the reporting year. The data used for this indicator are aligned with Table 4 Exiting and the definitions in file specification N009 as requested by the Department of Education.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

OSSE did not meet the target. OSSE notes that-the target data is a result of a more accurate calculation based on the application of the cohort dropout method from that which was utilized in previous years.

In FFY 2012, OSSE continued to focus on the proper development and implementation of secondary transition plans, maintained a State Community of Practice around secondary transition, and conducted numerous professional development and training sessions for LEAs to increase knowledge and skills related to increased secondary teaching and learning and preparing students for graduation and postsecondary options.

Specifically, OSSE hosted trainings on developing measurable annual goals and objectives for transition services, utilizing SEDS; integrating best practices for addressing the needs of students with IEPs into professional learning and teaching activities; determining student progress at the secondary level; implementing an effective Response to Intervention (RTI) framework in secondary schools; developing and implementing research-based secondary school reading interventions; identifying programs and activities that will help students reach their post-secondary school goals by linking graduation, dropout, secondary transition, and post-school outcomes to drive student improvement; and providing technical assistance on the 15 Strategies for Dropout Prevention from the National Dropout Center.

OSSE further enhanced training and technical assistance in this area via a one-day Secondary Transition Institute in the summer of 2013, followed by the launch of the CIRCLES secondary transition-planning model, made possible through a partnership with the National Secondary Transition Technical Assistance Center (NSTTAC).

The CIRCLES model promotes interagency collaboration and service coordination for transition-aged youth with disabilities who can greatly benefit from the involvement of multiple agencies to successfully transition to post-school life. CIRCLES meetings offer schools, transition-related service agencies, students, and families the unique opportunity to discuss a student's individualized needs and available resources to meet those needs.

Last, this fall, OSSE released a comprehensive Secondary Transition Toolkit for LEAs, families, and students, developed in partnership with the Community of Practice.

OSSE believes that its dedication to the allocation of resources in this area and its diligence in engaging community stakeholders is contributing to the District's ability to make necessary progress in graduation, dropout and postsecondary outcomes; however, the District must continue to accelerate its progress. OSSE is committed to continuing to support LEAs in achieving excellence in teaching and learning at the classroom level in order to provide every student with increased opportunities to graduate and succeed after high school.

OSSE is pleased to be moving forward with its work in developing and implementing Common Core Standards, including issuing State guidance related to curriculum mapping and

instructional entry points for students with IEPs, as well as supporting the development of standards-driven IEPs. It is believed that both of these initiatives, supported by OSSE's receipt of Federal Race to the Top funding, will support the District's ability to make significant progress related to this indicator.

The activities listed under indicator 1 are also focused on improving the outcomes for this indicator.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: FAPE in the LRE

Indicator 3: Participation and performance of children with IEPs on statewide assessments:

- A. Percent of the districts with a disability subgroup that meets the State's minimum "n" size that meet the State's Adequate Yearly Progress/Annual Measurable Objective (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))

Measurement:

A. (choose either A.1 or A.2)

A.1 AYP percent = $\left[\frac{\text{(\# of districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP targets for the disability subgroup)}}{\text{(total \# of districts that have a disability subgroup that meets the State's minimum "n" size)}} \right] \times 100$.

A.2 AMO percent = $\left[\frac{\text{(\# of districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AMO targets for the disability subgroup)}}{\text{(total \# of districts that have a disability subgroup that meets the State's minimum "n" size)}} \right] \times 100$.

- B. Participation rate percent = $\left[\frac{\text{(\# of children with IEPs participating in the assessment)}}{\text{(total \# of children with IEPs enrolled during the testing window, calculated separately for reading and math)}} \right]$. The participation rate is based on all children with IEPs, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.
- C. Proficiency rate percent = $\left[\frac{\text{(\# of children with IEPs scoring at or above proficient against grade level, modified and alternate academic achievement standards)}}{\text{(total \# of children with IEPs who received a valid score and for whom a proficiency level was assigned, and calculated separately for reading and math)}} \right]$. The proficiency rate includes both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

FFY	Measurable and Rigorous Targets
2012	<p>A. At least 50% of the districts with a disability subgroup that meet the State’s minimum “n” size will meet the State’s AMO targets for the disability subgroup.</p> <p>B. The participation rate for children with IEPs will be 95%.</p> <p>C. The proficiency rate of children with IEPs measured against grade level, modified and alternate academic achievement standards will be 86.85% for elementary reading; 85.07% for elementary math; 85.90% for secondary reading; and 85.14% for secondary math.</p>

Actual Target Data for FFY 2012:

Targets for FFY2012	(Number of LEAs with a disability subgroup that meet the State’s targets for the disability subgroup (3A))		Participation for Students with IEPs (3B)				Proficiency for Students with IEPs (3C)			
			Reading		Math		Elem Reading	Elem Math	Sec Reading	Sec Math
	50%		95%		95%		86.85%	85.07%	85.90%	85.14%
Actual Data for FFY2012	LEAs ^[1]	%	#	%	#	%	#	%	#	%
	0/21	0%	5973 / 6039	99%	5968 / 6039	99%	636/3305	782/3309	515/2668	646/2659

^[1] Number of LEAs with N=25 meeting the AMO in reading and math divided by total # of LEAs with N=25 for this subgroup.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

The target was not met for 3(a), was met for 3(b), and the target was not met for 3(c).

OSSE showed slippage in indicator 3a as a result of measurement against the new AMOs under the approved ESEA waiver. In the ESEA waiver, OSSE defined new AMOs based on reduction by half of the percentage of non-proficient students over a period of six years. This required LEAs that have typically been higher performing to show additional growth beyond what has been required in recent years which they did not achieve.

OSSE continued to meet indicator 3b by exceeding 95% participation rate across both subjects in valid tests inclusive of all ESEA grades assessed (3-8 and high school), for children with IEPs. This accounts for all children with IEPs, in all grades assessed, including the children not participating in assessment and those not enrolled for a full academic year. This only includes children who had an IEP at the time of testing. The difference between the denominators used to calculate the number of students who qualified to take the state assessment (3b) and the number of students who completed the state assessment (3c) in FFY 2012 is a result of one of the following reasons: integrity concerns or misapplication of accommodations, students who were enrolled in the LEA but absent during testing, or students who were unable to complete the test due to medical reasons.

OSSE shows progress across all four combinations of level and subject for Indicator 3c but did not meet the target. This was aligned with academic growth for the children with disabilities combining regular and all alternates for children with IEPs, in all grades assessed (3-8 and high school), including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year that OSSE demonstrated on both the DC-CAS and the NAEP assessment.

In FFY 2012, OSSE continued many initiatives designed to improve DC CAS proficiency, including a comprehensive training curriculum for LEA leaders and practitioners. In addition to professional development sessions offered by OSSE's Division of Specialized Education, OSSE's Division of Elementary and Secondary Education provided trainings on assessment guidelines on accommodations for students with IEPs, participation in the alternate assessment, test administration, assessment score interpretation and use of longitudinal data.

To accelerate improvement, OSSE is expanding its support, intervention, and oversight provided to schools in need of improvement, through its approved ESEA waiver system. In addition, a new inquiry team structure has been developed to support cross agency implementation of technical assistance, interventions for students, and support.

CONTINUING ACTIVITIES		
Improvement Activities	Timelines	Resources
OSSE provided all administrators an opportunity to meet with TTA staff to take a close look at individual school performance data to discuss where the LEAs are with respect to meeting AMOs in SY 2012-2013. This opportunity will be offered through FFY 2013.	Ongoing through June 30, 2013	Division of Elementary and Secondary Education, Office of Data Management, DSE Director, TTA Unit; TTA staff
Professional development workshops were conducted during SY 2012-2013 on interpreting data. As a result, attendees learned how to identify sources of student data, and based on the data, isolate area(s) of deficiency, create goals and/or determine the appropriateness of existing goals, create interim assessments to determine instructional effectiveness, and track student progress over time. These trainings will continue to be offered through FFY 2013 due to the positive results mentioned above.	Ongoing through June 30, 2013	Division of Elementary and Secondary Education, Office of Data Management, DSE Director, TTA Unit; TTA staff
Ongoing professional development opportunities were offered to teachers, paraprofessionals, and support staff on lesson-planning and the use of UDL during SY 2012-2013. Participants learn to plan lessons using information about student competencies and deficiencies. These trainings will continue to be offered annually through 2013.	Ongoing through June 30, 2013	Division of Elementary and Secondary Education, Office of Data Management, DSE Director, TTA Unit; TTA staff
During SY 2012-2013, DSE TTA worked in conjunction with QAM to analyze data both at the LEA and school level to determine appropriate technical assistance, and provide resources for increasing the participation and improving the performance of students with IEPs on statewide assessments. This analysis will continue each spring to inform training plans through FFY 2013.	Ongoing through June 30, 2013	Director, TTA Unit; Director, QAM Unit
During the 2012-2013 SY, TTA continued to offer support to LEAs implementing	Ongoing through June	Director, TTA Unit; TTA staff; contractors

Response to Intervention (RTI). This work, supported by local and nationally recognized experts in academic and behavioral intervention, will be available to LEAs upon request through FFY 2013.	30, 2013	
OSSE continued to provide professional development in reading training and technical assistance, with a focus on needs of special education teachers, during SY 2012- 2013. This targeted professional development will be ongoing through FFY 2013.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
OSSE continues to provide an ongoing <i>Leadership Training</i> series aimed at assisting school leaders to build capacity, develop and articulate their vision and mission, shape school culture, achieve data sophistication, and develop and support master teachers (as well as parent and community outreach initiatives). This targeted professional development will be ongoing through FFY 2013.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors

Public Reporting Information:

OSSE's public report related to State-wide assessments can be found at: <http://learndc.org>

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: FAPE in the LRE

Indicator 4A: Rates of suspension and expulsion

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

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

Measurement:

Percent = [(# of districts that have a significant discrepancy in the rates of suspensions and expulsions for greater than 10 days in a school year for children with IEPs) divided by the (# of districts in the State)] times 100.

Actual Target Data for FFY 2012 (using 2011-2012 data)

FFY	Measurable and Rigorous Target
2012 (2011-2012 data)	0%

For this indicator, report data for the year before the reporting year (using 2011-2012 data).

28%

The Actual Target Data was calculated as follows:

$$(11 \text{ LEAs}/39) \times 100 = 28\%$$

Definition of Significant Discrepancy and Identification of Comparison Methodology

The state defines 'significant discrepancy' as the suspension and expulsion of any child with a disability for more than 10 days cumulatively in a school year by an LEA with a qualifying subgroup at a rate that is higher than the equivalent rate for non-disabled peers.

OSSE only investigated significant discrepancy for those LEAs with a minimum “n” size of 40 children with IEPs. OSSE used all LEAs in the denominator.

In its analysis, the State compares the rates of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in each LEA, with a qualifying subgroup, compared to the rates for nondisabled children in the same LEA.

OSSE used the following comparison methodology to determine whether significant discrepancies occurred: the rates of suspensions and expulsions of greater than ten days in a school year for children with IEPs in each LEA, with a qualifying subgroup, are compared to the rates for nondisabled children in the same LEA. Eighteen (18) LEAs did not meet the minimum “n” size of 40 children with IEPs.

Districts with Significant Discrepancy in Rates for Suspension and Expulsion

Year	Total Number of Districts*	Number of Districts that have Significant Discrepancies	Percent
FFY 2012 (using 2011-2012 data)	39*	11	28%

OSSE has completed the above table to show significant discrepancy based on 2011-2012 data however, OSSE completed the review in FFY 2013.

Review of Policies, Procedures, and Practices (completed in FFY 2013 using 2011-2012 data):

For each of the eleven (11) LEAs that the State identified as having a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in FFY 2012 (using 2011 – 2012 data, review completed in FFY 2013), the State required completion of a self-study reviewing the LEA’s policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

As part of this self-study, the LEA was required to review a number of student records (depending on the overall number of students with IEPs at the LEA); provide existing policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to OSSE for comparison with regulatory requirements under the IDEA; and complete a continuous improvement plan detailing the way in which any identified areas of noncompliance or areas of improvement would be addressed. All eleven LEAs submitted their completed self-studies as well as copies of their policies and procedures.

OSSE reviewed the results of the self-studies submitted by the eleven (11) LEAs, in addition to the LEA policies, procedures and practices. OSSE found that three (3) LEAs had noncompliant policies, procedures, and practices. OSSE's review showed that the continuous improvement plans submitted by the three LEAs included revision of policies, procedures and practices which would address the identified noncompliance. On December 30, 2013, OSSE issued letters to the three LEAs, noting the identified noncompliance and requiring proof of the completion of the continuous improvement plan in order to correct the noncompliance.

OSSE did not issue any individual-level findings of noncompliance for Indicator 4a in FFY 2012 (using 2011 – 2012 data, review completed in FFY 2013).

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2012:

The actual target data of 28% represents progress from the State's FFY 2011 reported data of 43%. However, direct comparison may not be apt, because OSSE's denominator for this calculation is not the same as it was in the FFY 2011 APR. In the FFY 2011 APR, OSSE only included LEAs meeting the minimum "N" size in the denominator. For this APR, OSSE included all LEAs in the denominator. Therefore, OSSE considers the FFY 2012 actual target data of 28% to represent new baseline data for the State.

OSSE did not meet its FFY 2012 target of 0%.

In FFY 2012, OSSE provided multiple professional development opportunities to LEAs to improve knowledge and understanding of IDEA requirements pertaining to positive behavioral supports, functional behavioral assessments, manifestation determinations, evidence-based behavioral strategies, and deescalating student behaviors. A selection of trainings opportunities provided by the State is provided in the chart below:

DATE	TOPIC
7/24/2012-7/26/2012	Behavior 101 Conference
7/30/2012-7/31/2012	Instructional Strategies for Teaching Students with Disabilities in the General Education Classroom
8/30/2012-8/31/2012	Managing Classrooms and Student Behaviors in Pre-K and Grades K-2
9/6/2012-9/7/2012	CHAMPS: Classroom Management K-8
10/26/2012	Restorative Practices
11/30/2012	Restorative Practices
1/18/2013	Restorative Practices
2/15/2013	Restorative Practices
11/28/2012	ADHD and Associate Disorders: Their Impact on Educational Performance in the Classroom

1/28/2012- 1/29/2012	Responsive Classrooms
2/12/2013- 2/13/2013	CHAMPS: Classroom Management K-8
2/27/2013	Effective Behavior Support Webinar: Legal Foundations (manifestation determinations, change of placement, removal)
3/13/2013	Effective Behavior Support Webinar: Trauma Based Behavior Support
3/27/2013	Effective Behavior Support Webinar: Functionally Based Behavior Support
3/20/2013- 3/21/2013	Safe and Civil Schools - Interventions
1/15/2013- 5/30/2013	Behavior Training for specific schools that attended Behavior Conference and applied to receive training. Four LEAs received 5 training sessions on their school campuses in the Responsive Classrooms Behavior Management approach. Additionally, 1 LEA received 5 training sessions on its campus in Safe and Civil Schools - CHAMPS Classroom Management

In addition, upon LEA request, OSSE continued to provide one-to-one technical assistance regarding the identification of LEAs for further examination based on data, the scope and definition of significant discrepancy compared with disproportionate representation and significant disproportionality, and a description of OSSE's process for reviewing LEA policies, procedures and practices.

In FFY 2012, OSSE continued to monitor discipline-related requirements for compliance. Specifically, if students' IEPs contained documentation that the IEP contained strategies, including positive behavioral interventions and supports, and other strategies to address behavior if the child's record indicated behavioral concerns; and if the student's IEP included a behavioral intervention plan and/or goals and objectives to address social/emotional needs, if necessary. During the course of on-site monitoring, OSSE issued findings of noncompliance to LEAs with noncompliance in these areas and OSSE will report on the correction of this noncompliance in its FFY 2013 APR due on February 1, 2015.

In FFY 2011 and early FFY 2012, OSSE reviewed the methods and tools for determining whether LEAs' significant discrepancy was the result of noncompliant policies, procedures and practices. As part of this review, OSSE consulted OSEP technical assistance documents and the self-assessments and other tools employed by various states. OSSE then developed a new multi-part self-study tool. OSSE used the tool in FFY 2013 for the current review of 2011-2012 data. This tool includes a review of student records, LEA policies, procedures and practices, and regulatory requirements. The tool is suitable for LEAs whose data demonstrate significant discrepancy as well as LEAs who voluntarily conduct a review to improve compliance with

requirements related to discipline, IEP development, and positive behavioral interventions and supports. The result of the self-study process is the development of a guided continuous improvement plan to address identified areas of concern or noncompliance.

OSSE also made available a web-based training on significant discrepancy and the use of the self-study tool to all LEAs. OSSE has received positive feedback from LEAs on the content of the self-study, which it has made available on its website, to encourage continuous improvement in practice related to discipline, behavioral intervention, and IEP development.

Correction of FFY 2011 Findings of Noncompliance

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011 through June 30, 2012) using 2010-2011 data	3
2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the district of the finding)	2
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

OSSE has completed the above table to show findings made based on 2010-2011 data. However, OSSE made these findings in FFY 2012, not FFY 2011.

Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	1
5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2011 findings <u>not</u> yet verified as corrected [(4) minus (5)]	1

OSSE has completed the above table to show findings made based on 2010-2011 data. However, OSSE made these findings in FFY 2012, not FFY 2011.

Actions Taken if Noncompliance Not Corrected:

There is 1 finding of noncompliance based on 2010-2011 data (finding issued in FFY 2012) that is still open. To determine the root cause of the continued noncompliance, OSSE compliance

monitors examined the finding and materials previously submitted by the LEA. OSSE compliance monitors then discussed the finding with LEA staff. From this review, OSSE determined that the LEA had worked diligently to produce compliant policies and procedures, but had not yet been able to ensure that all LEA staff knew how to implement them in practice. This LEA received another finding for this indicator based on the 2011-2012 data, so OSSE was able to ensure that the LEA's continuing improvement plan included training of LEA staff as one necessary component.

Enforcement actions taken against this LEA include the loss of points for failure to correct longstanding noncompliance on the LEA's annual determination. In addition, the LEA has been placed on a corrective action plan due to overall levels of noncompliance.

Verification of Correction (either timely or subsequent):

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification. OSSE did not issue individual findings of noncompliance for this indicator, so there were no corrections of individual or student level corrections to verify, but OSSE verified correction of noncompliance in accordance with OSEP Memo 09-02 in all other respects.

OSSE issued LEA-level findings of noncompliance to three (3) LEAs and required specific revision of policies, procedures, and practices from each LEA. Upon receipt of updated policies, procedures, and practices, OSSE reviewed the materials for compliance with IDEA requirements and to ensure that all required revisions had been completed. If the updated policies, procedures, and practices did not show evidence of the required revisions, OSSE provided additional guidance on revisions required to render the LEA's policies, procedures, or practices compliant with IDEA.

Additionally, OSSE reviewed 2011 - 2012 data for the three (3) LEAs who received findings of noncompliance based on 2010 - 2011 data. OSSE found that the first of the three LEAs was found to have compliant policies, procedures, and practices based on a review of those policies and the results of the LEA self-studies. The second LEA had closed by the time the 2011-2012 data were available, and the third LEA was issued an additional finding in based upon the results of the review of policies, procedures, and practices.

OSSE considered the review of policies, procedures, and practices, and the review of data for a subsequent year as verification that the noncompliance had been corrected and that the LEA was demonstrating that it is correctly implementing the specific regulatory requirement for all students with IEPs

Correction of Remaining FFY 2010 Findings of Noncompliance (Issued in FFY 2011):

1. Number of remaining FFY 2010 findings (using 2009-2010 data), noted in OSEP's July 1, 2013 FFY 2011 APR response table for this indicator (Findings issued FFY 2011)	2
2. Number of remaining FFY 2010 findings the State has verified as corrected	1
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	1

OSSE has completed the above tables to show findings expected to be made in FFY 2010 based on 2009-2010 data. However, OSSE made these findings in FFY 2011, not FFY 2010.

Verification of Correction (either timely or subsequent):

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification. OSSE did not issue individual findings of noncompliance for this indicator, so there were no corrections of individual or student level corrections to verify, but OSSE verified correction of noncompliance in accordance with OSEP Memo 09-02 in all other respects.

OSSE considered the review of policies, procedures, and practices, and the review of data for a subsequent year as verification that the noncompliance had been corrected and that the LEA was demonstrating that it is correctly implementing the specific regulatory requirement for all students with IEPs.

In FFY 2011, OSSE issued LEA-level findings of noncompliance to six (6) LEAs based on 2009-2010 data and required specific revision of policies, procedures, and practices from each LEA. Upon receipt of updated policies, procedures, and practices, OSSE reviewed the materials for compliance with IDEA requirements and to ensure that all required revisions had been completed. If the updated policies, procedures, and practices did not show evidence of the required revisions, OSSE provided additional guidance on revisions required to render the LEA's policies, procedures, or practices compliant with IDEA.

Additionally, OSSE reviewed 2010 - 2011 data for the LEAs who received findings of noncompliance based on 2009 - 2010 data. Findings of noncompliance were closed for four (4) of six (6) LEAs after submission of compliant revised policies, procedures, and practices and a subsequent review of updated data demonstrated that the LEAs were correctly implementing the specific regulatory requirement. At the time of the FFY 2011 APR, two (2) of the six (6) LEAs who had been issued findings still had open, uncorrected noncompliance.

Following publication of the FFY 2011 APR, OSSE verified correction according to the method described above for one (1) of the two (2) remaining LEAs with a finding open based on 2009-2010 data. One open finding based on 2009-2010 data remains.

Correction of Any Remaining Findings of Noncompliance from FFY 2009 or Earlier (if applicable):

In the FFY 2011 APR, OSSE reported that all findings made for FFYs 2008 (based on 2007-2008 data, issued in FFY 2010) and 2009 (based on 2008-2009 data, issued in FFY 2010) were closed, and that four of six FFY 2010 findings (based on 2009-2010 data, issued in FFY 2011) were closed.

In the Part B FFY 2011 Response Table, OSEP rejected OSSE's statement of closure of FFY 2010 findings (based on 2009-2010 data, issued in FFY 2011) saying it was, "unclear to OSEP whether [the State's assertion that it does not issue individual-level findings] pertains to the State's identification of noncompliance based on its review of 2009-2010 data. Therefore, the State did not demonstrate that it corrected findings based on 2009-2010 data, because correction was not verified consistent with OSEP Memo 09-02."

The State again reports that all findings made for FFY's 2008 and 2009 are closed and reports that 5 of 6 findings from FFY 2010 are now closed in accordance with OSEP Memo 09-02 as described in detail in the section above. The State provides the following chart of findings made under this indicator to clarify this issue:

FFY of Finding	Finding Issued	Individual (student level) Findings Issued? (Y/N)	Findings Closed in Accordance with OSEP Memo 09-02
FFY 2008 (2007-2008 data)	FFY 2010	N	All findings closed as of FFY 2011 APR
FFY 2009 (2008- 2009 data)	FFY 2010	N	All findings closed as of FFY 2011 APR
FFY 2010 (2009-2010 data)	FFY 2011	N	5 of 6 findings closed as of FFY 2012 APR

OSSE verified correction of the findings issued for FFYs 2008, 2009, and 2010 in the manner described below:

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification.

OSSE issued LEA-level findings of noncompliance and required specific revision of policies, procedures, and practices. Upon receipt of updated policies, procedures, and practices, OSSE reviewed submitted materials for compliance with IDEA requirements to ensure that required revisions had been completed. If the updated policies, procedures, and practices did not show evidence of the required revisions, OSSE provided additional guidance on revisions required to render the LEA's policies, procedures, or practices compliant with IDEA.

Additionally, OSSE reviewed subsequent data for each LEA who had noncompliance under this indicator to ensure that the LEA was properly implementing the regulatory requirement (i.e., achieved 100% compliance).

OSSE considered the review of policies, procedures, and practices, and the review of data for a subsequent year as verification that the noncompliance had been corrected and that the LEA was demonstrating that it is correctly implementing the specific regulatory requirement for all students with IEPs.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State's Response
<p>The State must report on the correction of noncompliance identified in FFY 2012 based on 2010-2011 data, and must report that it verified that each LEA with noncompliance is correctly implementing the specific regulatory requirements based on a review of updated data and 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.</p>	<p>The State reported that 2 of 3 findings of noncompliance made using 2010-2011 data were corrected. The State verified that each LEA with noncompliance had updated policies, practices, and procedures in compliance with the specific regulatory requirement. The State verified that each LEA is correctly implementing the regulatory requirements based upon a review of subsequent data.</p> <p>OSSE did not issue individual findings for this indicator based upon 2010-2011 data.</p>
<p>The State did not report that noncompliance identified in FFY 2011 based on 2009-2010 data was corrected. When reporting on correction of this noncompliance, the State must report that it verified that each LEA with noncompliance is correctly implementing the specific regulatory requirements based on a review of updated data and has corrected</p>	<p>The State clarified that no individual student level findings were made based on 2009-2010 data.</p> <p>The State reported that it verified that 5 of 6 LEAs with noncompliance based on 2009-2010 data (1 of 2 LEAs that had remaining noncompliance as of the FFY 2011 APR) had</p>

each individual case of noncompliance unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02.	updated policies, practices, and procedures in compliance with the specific regulatory requirement. The State verified that each LEA is correctly implementing the regulatory requirements based upon a review of subsequent data.
--	--

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Provide training and Technical Assistance to all LEAs on IDEA and basic requirements.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Provide professional development to Student Support Teams from all LEAs regarding addressing behavioral and academic concerns that could potentially lead to suspension and expulsions. (e.g. Positive Behavior Supports, Functional Behavior Assessment (FBA) training.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Conduct professional development workshops on compliance issues related to student behavior (i.e. manifestation processes for students with IEPs, de-escalating student behavior)	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Consult with national experts to further the skill set of LEA staff and understanding of students who experience severe emotional difficulties.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Partner with LEAs and the Department of Mental Health to review alternative approaches for addressing the needs of students who lack social competency skills, experience severe emotional difficulties; writing school-wide discipline goals for school improvement plans.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; Department of Mental Health
Research other state models for addressing the behavioral needs of students with IEPs utilizing research tools,	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; technical assistance providers

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
participation in webinars and conference calls with other states.		
Continue to provide technical assistance with the use of SEDS as a data collection tool to support the PBIS initiative.	Ongoing through June 30, 2013	Director, TTA Unit; Director, Data Unit
Survey LEAs to determine needs for more intensive behavioral supports and subsequent training including, but not limited to, Crisis Prevention Institute training.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff
Partner with QAM to provide training for LEAs on alternatives to suspension and train LEA staff on how to write appropriate positive behavior goals for IEPs.	Ongoing through June 30, 2013	Director, TTA Unit; Director, QAM Unit
Provide bi-weekly technical assistance sessions with targeted LEAs participating in the RTI model to promote the integration of positive behavior supports as a form of tiered intervention.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Provide technical assistance sessions for targeted LEAs on how to collect data to inform the FBA process and development of BIPs.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
In conjunction with Monitoring and Compliance Unit, develop a LEA survey to determine potential need for more intensive supports and subsequent training from other agencies.	Ongoing through June 30, 2013	Director, TTA Unit; Director, Monitoring and Compliance Unit
Provide trainings to all LEAs to determine factors which contribute to significant discrepancies in the rates of suspension and expulsion of students with IEPs.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Provide trainings and continuous technical assistance sessions to help LEAs analyze data on suspension and expulsion rates and correction of any significant discrepancies.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Continue to consult with national experts to increase the SEA and LEA staff skill set and understanding of students who experience severe emotional difficulties.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Develop State-level discipline regulations to ensure that LEAs are clear on their obligations and establish compliant policies, practices and procedures.	Regulations are being updated and reposted in response to public comments. Due to leadership transition, OSSE anticipates finalization by June 30, 2014.	OSSE Leadership
Coordinate closely with new OSSE Director of Data Management to develop an agency –wide data collection calendar that allows for timely access to data needed for special education compliance calculations.	Ongoing through 2013	OSSE Leadership; DSE Data Director

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 (if applicable):

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: FAPE in the LRE**Indicator 4B:** Rates of suspension and expulsion:

Percent of districts that have:

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

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

Measurement:

Percent = [(# of districts that have: (a) a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year 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) divided by the (# of districts in the State)] times 100.

Include State's definition of "significant discrepancy."

Definition of Significant Discrepancy and Methodology

OSSE defines 'significant discrepancy' as the suspension and expulsion of any child with a disability in any racial/ethnic category greater than 10 cumulative days in a school year by an LEA with a qualifying subgroup at a rate that is higher than the equivalent rate for non-disabled peers.

To determine significant discrepancy, OSSE compared the rates of expulsions and suspensions of greater than 10 days in a school year for children with IEPs in each race/ethnicity in each LEA compared to the rates for nondisabled children in the same LEA, using rate difference. The established bar is greater than zero. OSSE investigated significant discrepancy for those LEAs with a minimum "n" size of 40 children with IEPs; however, OSSE used all LEAs in the denominator after receiving input from public stakeholders on the calculation.

Eighteen (18) LEAs did not meet the minimum "n" size of 40 children with IEPs.

In the FFY 2011 APR, OSSE reported that it planned to adopt updated methodology for calculation of target data for this indicator. To date, OSSE has not adopted new calculation methodology. While OSSE's inclusion of all District of Columbia LEAs in the denominator, not just those meeting the minimum N size, was a change made in consultation with stakeholders, the overall calculation methodology used to calculate target data for this indicator for the FFY 2012 APR is the same method used in the FFY 2011 APR. OSSE continues to review calculation methodology in consultation with OSEP.

FFY	Measurable and Rigorous Target
2012 (2011-2012 data)	0%

Actual Target Data for FFY 2012 (2011-2012 data):

8%

The Actual Target Data was calculated as follows:

$$(3 \text{ LEAs}/39) \times 100 = 8\%$$

4B(a). Districts with Significant Discrepancy, by Race or Ethnicity*, in Rates of Suspension and Expulsion:

Year	Total Number of Districts**	Number of Districts that have Significant Discrepancies by Race or Ethnicity	Percent**
Finding Issued FFY 2013 (using 2011-2012 data)	39	11	28%

4B(b). Districts with Significant Discrepancy, by Race or Ethnicity, in Rates of Suspensions and Expulsions; and 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.

Year	Total Number of Districts	Number of Districts that have Significant Discrepancies, by Race or Ethnicity, and 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.	Percent
FFY 2012 (using 2011-2012 data)	39	3	8%

Review of Policies, Procedures, and Practices (completed in FFY 2013 using 2011-2012 data):

OSSE completed the review of 2011-2012 data in FFY 2013.

For each of the 11 LEAs that the State identified as having a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs in FFY 2013 using 2011-2012 data, the State required completion of a self-study reviewing the LEA's policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. As part of this self-study, the LEA was required to review a number of student records (depending on the overall number of students with IEPs at the LEA); compare existing policies, procedures and practices to regulatory requirements; and complete a continuous improvement plan detailing the way in which any identified areas of noncompliance or areas of improvement would be addressed. All LEAs submitted their completed self-studies as well as copies of their policies, procedures and practices.

Identification of Noncompliance

OSSE reviewed the results of the self-studies submitted by 11 LEAs, in addition to each LEA's policies, procedures and practices. OSSE found that 8 LEAs had compliant policies, procedures and practices, and 3 LEAs had noncompliant policies, procedures, and practices. OSSE did not issue individual level findings of noncompliance for this indicator.

Revision of Noncompliant Policies, Procedures, and Practices

Upon review of the continuous improvement plans submitted with the self-studies, OSSE found that the plans submitted by each of the three (3) LEAs with noncompliance for this indicator adequately addressed the specific noncompliance identified during the review of each LEA's self-study. On December 30, 2013, OSSE issued letters to LEAs that had noncompliant policies, procedures, and practices for this indicator. OSSE identified the specific noncompliance found through review of the self-study materials, and required each LEA to implement the continuous improvement plan submitted with the self-study.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2012:

The actual target data of 8% represents progress from the State's FFY 2011 reported data of 14%, however, direct comparison may not be apt, because OSSE's denominator for this calculation is not the same as it was in the FFY 2011 APR. In the FFY 2011 APR, OSSE only included LEAs meeting the minimum "N" size in the denominator. For this APR, OSSE included all LEAs in the denominator, after receiving stakeholder input. Therefore, OSSE considers the FFY 2012 actual target data of 28% to represent new baseline data for the State. The State did not meet its FFY 2012 target of 0%.

OSSE engaged District LEAs in many improvement activities throughout FFY 2012. In FFY 2012, OSSE provided multiple professional development opportunities to LEAs to improve knowledge and understanding of IDEA requirements pertaining to positive behavioral supports, functional behavioral assessments, manifestation determinations, evidence-based behavioral strategies, and deescalating student behaviors. A selection of training opportunities provided by the State is provided in the chart below:

DATE	TOPIC
7/24/2012-7/26/2012	Behavior 101 Conference
7/30/2012-7/31/2012	Instructional Strategies for Teaching Students with Disabilities in the General Education Classroom
8/30/2012-8/31/2012	Managing Classrooms and Student Behaviors in Pre-K and Grades K-2
9/6/2012-9/7/2012	CHAMPS: Classroom Management K-8
10/26/2012	Restorative Practices
11/30/2012	Restorative Practices
1/18/2013	Restorative Practices
2/15/2013	Restorative Practices
11/28/2012	ADHD and Associate Disorders: Their Impact on Educational Performance in the Classroom

1/28/2012- 1/29/2012	Responsive Classrooms
2/12/2013- 2/13/2013	CHAMPS: Classroom Management K-8
2/27/2013	Effective Behavior Support Webinar: Legal Foundations (manifestation determinations, change of placement, removal)
3/13/2013	Effective Behavior Support Webinar: Trauma Based Behavior Support
3/27/2013	Effective Behavior Support Webinar: Functionally Based Behavior Support
3/20/2013- 3/21/2013	Safe and Civil Schools - Interventions
1/15/2013- 5/30/2013	Behavior Training for specific schools that attended Behavior Conference and applied to receive training. Four LEAs received 5 training sessions on their school campuses in the Responsive Classrooms Behavior Management approach. Additionally, 1 LEA received 5 training sessions on its campus in Safe and Civil Schools - CHAMPS Classroom Management

In FFY 2012, OSSE continued to monitor for compliance with discipline related requirements, specifically, if the student's IEP contained documentation that the IEP contained strategies, including positive behavioral interventions and supports, and other strategies to address behavior if the child's record indicated behavioral concerns; and if the student's IEP included a behavioral intervention plan and/or goals and objectives to address social/emotional needs, if necessary. During the course of on-site monitoring, OSSE issued findings of noncompliance to LEAs with noncompliance in these areas and OSSE will report on the correction of this noncompliance in its FFY 2013 APR due February 1, 2015.

Correction of FFY 2011 Findings of Noncompliance Based Upon 2010-2011 Data (Issued FFY 2012):

1. Number of FFY 2011 findings of noncompliance the State made using 2010-2011 data	3
2. Number of FFY 2011 findings based on 2010-2011 data the State verified as timely corrected (corrected within one year from the date of notification to the district of the finding)	2
3. Number of FFY 2011 findings based on 2010-2011 data <u>not</u> verified as corrected within one year [(1) minus (2)]	1

OSSE has completed the above table to show findings made based on 2010-2011 data. However, OSSE made these findings in FFY 2012, not FFY 2011.

Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2011 findings based on 2010-2011 data not timely corrected (same as the number from (3) above)	1
5. Number of FFY 2011 findings based on 2010-2011 data the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2011 findings based on 2010-2011 data <u>not</u> yet verified as corrected [(4) minus (5)]	1

OSSE has completed the above table to show findings made based on 2010-2011 data. However, OSSE made these findings in FFY 2012, not FFY 2011.

Actions Taken if Noncompliance Not Corrected:

There is 1 finding of noncompliance based on 2010-2011 data (finding issued in FFY 2012) that is still open. To determine the root cause of the continued noncompliance, OSSE compliance monitors examined the finding and materials previously submitted by the LEA. OSSE compliance monitors then discussed the finding with LEA staff. From this review, OSSE determined that the LEA had worked diligently to produce compliant policies and procedures, but had not yet been able to ensure that all LEA staff knew how to implement them in practice. This LEA received another finding for this indicator based on the 2011-2012 data., OSSE has ensured that the LEA’s continuing improvement plan included training of LEA staff as one necessary component.

Enforcement actions taken against this LEA include the loss of points for failure to correct longstanding noncompliance and failure to comply with indicator 4b on the LEA’s annual determination. In addition, the LEA has been placed on a corrective action plan due to overall levels of noncompliance.

Verification of Correction:

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification. OSSE requires all LEAs to correct noncompliance within one year of the date of notification using the “two pronged” approach outlined in OSEP Memo 09-02.

To verify correction of noncompliance for this indicator OSSE uses the following steps, which are to be completed as soon as possible, but in no case more than one year from the date of notification of noncompliance:

Prong I: After a finding is made, the LEA must submit updated policy, procedure, and/or practice documentation. OSSE reviews the LEA's updated policies, procedures, and practices. If the documentation does not demonstrate correction sufficient to ensure that the LEA is in compliance with the regulation, OSSE provides technical assistance to the LEA to support the LEA's efforts in creating compliant policies, procedures, and practices.

Prong II: Following the submission of compliant documentation in Prong I, described above, OSSE reviews the LEA's data for this indicator in the subsequent year to ensure that the LEA is correctly implementing the specific regulatory requirement for all students with IEPs.

OSSE does not issue student-level findings of noncompliance for Indicator 4B. Indicator 4B findings are frequently not correctible at the student-level. For example, an LEA is unable to correct the failure to timely hold a manifestation determination meeting according to IDEA requirements.

In accordance with the verification of correction process described above, OSSE issued findings of noncompliance to 3 LEAs based on 2010-2011 data, and required specific revision of policies, procedures, and practices. Upon receipt of updated policies, procedures, and practices, OSSE reviewed submitted materials for compliance with IDEA requirements to ensure that required revisions had been completed. If the updated policies, procedures, and practices did not show evidence of the required revisions, OSSE provided additional guidance on revisions required to render the LEA's policies, procedures, or practices compliant with IDEA.

Additionally, OSSE reviewed 2011 - 2012 data for two of the three LEAs who received findings of noncompliance based on 2010 - 2011 data. OSSE did not review subsequent data for the first LEA, because LEA 1 closed after the finding was issued. LEA 2 received a finding of noncompliance based on 2010-2011 data was found to have compliant policies, procedures, and practices during the review of data from 2011-2012. OSSE considered the review of LEA 2's policies, procedures, and practices, and the review of data for a subsequent year as verification that the noncompliance had been corrected and that the LEA was demonstrating that it is correctly implementing the specific regulatory requirement for all students with IEPs. LEA 3 received an additional finding for this indicator in FFY 2013 based upon a review of 2011-2012 data. The continuing improvement plan for this LEA includes training of staff to ensure they know how to implement the policies. The chart below shows the outcomes for the 3 LEAs:

LEA With Finding Based on 2010- 2011 Data	Correction Status as of FFY 2012 APR
LEA 1	LEA Closed. Finding Closed.
LEA 2	Correction of Noncompliance Verified, Finding Closed.
LEA 3	Finding Remains Open, Additional Finding Assessed Based Upon 2011-2012 Data.

Correction of Remaining FFY 2010 Findings of Noncompliance Based upon 2009-2010 data (findings issued FFY 2011):

1. Number of remaining findings for FFY 2010 (in the period from July 1, 2010 – June 30, 2011 using 2009-2010 data) noted in OSEP’s July 1, 2013 FFY 2011 APR response table for this indicator	2
2. Number of remaining FFY 2010 findings the State has verified as corrected	1
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	1

OSSE has completed the above table to show findings made based on 2009-2010 data. However, OSSE made these findings in FFY 2011, not FFY 2010.

Actions Taken if Noncompliance Not Corrected:

There is 1 finding of noncompliance based on 2009-2010 data (finding issued in FFY 2011) that is still open. To determine the root cause of the continued noncompliance, OSSE compliance monitors examined the finding and materials previously submitted by the LEA. OSSE compliance monitors then discussed the finding with LEA staff. This is the same LEA that has longstanding open noncompliance from 2010-2011, as described above. From this review, OSSE determined that the LEA had worked diligently to produce compliant policies and procedures, but had not yet been able to ensure that all LEA staff knew how to implement them in practice. This LEA received another finding for this indicator based on the 2011-2012 data. OSSE has ensured that the LEA’s continuing improvement plan included training of LEA staff as one necessary component.

Enforcement actions taken against this LEA include the loss of points for failure to correct longstanding noncompliance and failure to comply with indicator 4b on the LEA’s annual determination. In addition, the LEA has been placed on a corrective action plan due to overall levels of noncompliance.

Verification of Correction:

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification. OSSE requires all LEAs to correct noncompliance within one year of the date of notification using the “two pronged” approach outlined in OSEP Memo 09-02.

To verify correction of noncompliance for this indicator OSSE uses the following steps, which are to be completed as soon as possible, but in no case more than one year from the date of notification of noncompliance:

Prong I: After a finding is made, the LEA must submit updated policy, procedure, and/or practice documentation. OSSE reviews the LEA's updated policies, procedures, and practices. If the documentation does not demonstrate correction sufficient to ensure that the LEA is in compliance with the regulation, OSSE provides technical assistance to the LEA to support the LEA's efforts in creating compliant policies, procedures, and practices.

Prong II: Following the submission of compliant documentation in Prong I, described above, OSSE reviews the LEA's data for this indicator in the subsequent year to ensure that the LEA is correctly implementing the specific regulatory requirement for all students with IEPs.

OSSE does not issue student-level findings of noncompliance for Indicator 4B. Indicator 4B findings are frequently not correctible at the student-level. For example, an LEA may not go back following a finding of noncompliance and timely hold a manifestation determination meeting according to IDEA requirements.

Correction of Any Remaining Findings of Noncompliance from FFY 2009 or Earlier (if applicable):

There are no remaining findings of noncompliance from data earlier than 2009-2010. All findings based on data previous to 2009-2010 and issued in FFY 2010 were closed as of the FFY 2011 APR submission.

Additional Information Required by the OSEP APR Response Table for this Indicator:

Statement from the Response Table	State's Response
The State must report on the status of correction of noncompliance based on 2010-2011 data (identified in FFY 2012) for this indicator. The State must demonstrate that these LEAs have corrected the noncompliance and that the State has verified that each LEA is correctly implementing the specific regulatory requirement based on a review of updated data and has corrected each individual case of noncompliance.	<p>OSSE reported that 1 finding of noncompliance based on 2010-2011 data and issued in FFY 2012 remains open. OSSE described the two-pronged process it uses to verify that LEAs are properly implementing the regulatory requirements as soon as possible, but in no case more than one year from the date the finding is issued.</p> <p>OSSE reported that it does not make student-level findings of noncompliance for this indicator. OSSE only makes LEA-level findings for this indicator.</p>

<p>The State must describe specific actions taken to verify corrections above.</p>	<p>OSSE reported that corrections are verified using a two pronged process. OSSE reported reviewing the results of each LEA's self-study, working with LEAs to ensure that policies, procedures, and practices are compliant with the IDEA, and reviewing a subsequent (updated) data set to determine whether the LEA has demonstrated proper implementation of the regulatory requirement (100% compliance).</p>
<p>The State must demonstrate that it has verified that each LEA with noncompliance based on 2009-2010 data (identified in FFY 2011) is correctly implementing the specific regulatory requirement based on a review of updated data and has corrected each individual case of noncompliance.</p>	<p>OSSE reported that 1 finding of noncompliance based on 2009-2010 data and issued in FFY 2011 remains open. OSSE described the two-pronged process it uses to verify that LEAs are properly implementing the regulatory requirements as soon as possible, but in no case more than one year from the date the finding is issued.</p> <p>OSSE reported that it does not make student-level findings of noncompliance for this indicator. OSSE only makes LEA-level findings for this indicator.</p>
<p>The State must describe specific actions taken to verify corrections above.</p>	<p>OSSE reported that corrections are verified using a two pronged process. OSSE reported reviewing the results of each LEA's self-study, working with LEAs to ensure that policies, procedures, and practices are compliant with the IDEA, and reviewing a subsequent (updated) data set to determine whether the LEA has demonstrated proper implementation of the regulatory requirement (100% compliance).</p>

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Provide training and Technical Assistance to all LEAs on IDEA and basic requirements.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Provide professional development to Student Support Teams from all LEAs regarding addressing behavioral and academic concerns that could potentially lead to suspension and expulsions. (e.g. Positive Behavior Supports, Functional Behavior Assessment (FBA) training.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Conduct professional development workshops on compliance issues related to student behavior (i.e. manifestation processes for students with IEPs, De-escalating Student Behavior)	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Consult with national experts to further the skill set of LEA staff and understanding of students who experience severe emotional difficulties. OSSE consulted with national experts during its annual Special Education Symposium.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Partner with LEAs and the Department of Mental Health to review alternative approaches for addressing the needs of students who lack social competency skills, experience severe emotional difficulties; writing school-wide discipline goals for school improvement plans.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; Department of Mental Health
Research other State models for addressing the behavioral needs of students with IEPs utilizing research tools, participation in webinars and conference calls with other States.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; technical assistance providers
Continue to provide technical assistance with the use of SEDS as a data collection tool to support the PBIS initiative.	Ongoing through June 30, 2013	Director, TTA Unit; Director, Data Unit

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Survey LEAs to determine needs for more intensive behavioral supports and subsequent training including, but not limited to, Crisis Prevention Institute training.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff
Partner with QAM to provide training for LEAs on alternatives to suspension and train LEA staff on how to write appropriate positive behavior goals for IEPs.	Ongoing through June 30, 2013	Director, TTA Unit; Director, QAM Unit
Provide bi-weekly technical assistance sessions with targeted LEAs participating in the RTI model to promote the integration of positive behavior supports as a form of tiered intervention.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Provide technical assistance sessions for targeted LEAs on how to collect data to inform the FBA process and development of BIPs.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
In conjunction with QAM, develop a LEA survey to determine potential need for more intensive supports and subsequent training from other agencies.	Ongoing through June 30, 2013	Director, TTA Unit; Director, QAM Unit
Provide trainings to all LEAs to determine factors which contribute to significant discrepancies in the rates of suspension and expulsion of students with IEPs.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Provide trainings and continuous technical assistance sessions to help LEAs analyze data on suspension and expulsion rates and correction of any significant discrepancies.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Continue to consult with national experts to increase the SEA and LEA staff skill set and understanding of students who experience severe emotional difficulties.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
Coordinate closely with new OSSE Director	Ongoing	OSSE Leadership; DSE Data

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
of Data Management to develop an agency –wide data collection calendar that allows for timely access to data needed for special education compliance calculations.	through FFY 2013	Director
Propose and discuss new methodology with stakeholders and adopt pending discussion and approval. Justification: To ensure that the methodologies adopted by the District of Columbia accurately calculate the measurement in a manner that identifies systemic noncompliance.	Ongoing through FFY 2013	DSE; Office of Data Management; Stakeholders

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: FAPE in the LRE

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

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

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

Measurement:

- A. Percent = [(# of children with IEPs served inside the regular class 80% or more of the day) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.
- B. Percent = [(# of children with IEPs served inside the regular class less than 40% of the day) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.
- C. Percent = [(# of children with IEPs served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 6 through 21 with IEPs)] times 100.

FFY	Measurable and Rigorous Target
2012	<ul style="list-style-type: none"> A. Increase the percent of students with IEPs aged 6 through 21 served inside the regular class 80% or more of the day to 17.5%. B. Reduce the percent of children with IEPs aged 6 through 21 served inside the regular class less than 40% of the day to 15%. C. Reduce the percent of children with IEPs aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements to 15%.

Actual Target Data for FFY 2012:

5A: 50%
5B: 12%
5C: 19%

The Actual Target Data was calculated as follows:

5A: $5461/11012 \times 100 = 50\%$

5B: $1280/11012 \times 100 = 12\%$

5C: $2111/11012 \times 100 = 19\%$

Percent of Children with IEPs in various categories

	5A	5B	5C
Target	17.5%	15%	15%
Total number of Children with IEPs	11012	11012	11012
Number of Children with IEPs in this category	5461	1280	2111
Percentage of Children with IEPs in this category	50%	12%	19%
Met Target	Yes	Yes	No

Data Source:

Educational environments data were collected at the same time as the December 1, 2012 Child Count. IEP information from SEDS was used to calculate percent of time in the regular classroom.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

The State met its targets for 5A and 5B but did not meet its target for 5C. The State continues to demonstrate significant progress in serving District students in the least restrictive environment (LRE). Specifically, the percent of students with IEPs aged 6 through 21 served inside the regular class 80% or more of the day (category 5A) increased from 46% in the prior year to 50%, and the percent of students with IEPs aged 6 through 21 served inside the regular class less than 40% of the day (category 5B) was reduced from 13% to 12%.

While the State did not meet the FFY 2012 target for category 5C, the percent of children with IEPs aged 6 through 21 served in separate schools, residential facilities, or homebound/hospital placements, actual target data demonstrated a 1% decrease from FFY 2011.

Overall progress for this indicator is attributed to the concerted effort made by OSSE, its sister agencies, and District LEAs to further understand how to develop a continuum of services and placement in the LRE while maintaining compliance with the IDEA and local law.

In FFY 2012, through the work of OSSE's Division of Specialized Education- Training and Technical Assistance (TTA) Unit, OSSE continued to implement a robust state-level training series designed to improve LEA and school level practice related to ensuring that students with IEPs are appropriately served and supported in the LRE. These trainings were intentionally aligned with all state-level policies, and demand for the sessions was, and continues to be, extremely high.

In addition, in FFY 2012, OSSE's Placement Oversight Unit (POU) marked its fifth consecutive year of implementation of the state's policy regarding placement review (5-E DCMR §3019.8; *Policy and Procedure for Placement Review, Revised (January 5, 2010)*). This policy is designed to support LEAs in understanding their roles and responsibilities when considering a change in placement to a more restrictive environment outside the LEA for a child with a disability. Since its inception, the District's state-level placement oversight process has ensured timely guidance and support to IEP Teams and LEA teams in implementing/exhausting appropriate support and strategies for children with disabilities before considering placement into a more restrictive separate school setting. This model has aided in diverting inappropriate educational placements. In FFY 2012, the Placement Oversight Unit diverted 38% of potential nonpublic school placements, a consistent accomplishment of the team for the past five years.

The diversion of inappropriate nonpublic school placements has been further supported by focused initiatives, such as the state-level *Least Restrictive Environment White Paper* and the development of the District of Columbia Special Education Quality Review (SEQR) Tool.

In addition, OSSE collaborated with community partners to host the District of Columbia's first *Inclusive Schools Capstone*, which was held in early 2013, as a one-day summit to build on the year's Inclusive Schools Week theme of "Awareness to Action." The Capstone Event featured top education experts including Daniel Habib, the award-winning filmmaker of *Including Samuel*, and workshops and trainings aimed at providing innovative solutions to current challenges.

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Continue to support LEA implementation of response to intervention (RTI).	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
OSSE will continue to provide training and technical assistance on the IEP process to assist school staff on the implementation of LRE for students with IEPs as stated on their IEP. In addition, OSSE will develop a Special Education Resource Manual to guide LEAs through the IEP process. The Special Education Resource Manual will be made available on the OSSE website.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
OSSE will continue to provide ongoing technical assistance to LEAs in change in placement team recommendations.	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors
OSSE will develop State-level discipline regulations to ensure that LEAs have guidance related to their obligations to support students with IEPs that exhibit behavioral difficulties.	Due to leadership transition, regulations will be reposted in FFY 2013	OSSE Leadership
OSSE will identify special education best practices for dissemination and replication and support continuous improvement via a comprehensive special education quality review project, will release the SEQR self-assessment tool, and will continue to provide technical assistance resources that support LEA professional development.	Ongoing through June 30, 2013	DSE Leadership; contractor

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: FAPE in the LRE

Indicator 6: 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))

Measurement:

- A. Percent = [(# of children aged 3 through 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children aged 3 through 5 with IEPs)] times 100.
- B. Percent = [(# of children aged 3 through 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children aged 3 through 5 with IEPs)] times 100.

FFY	Measurable and Rigorous Target
2012	<p>A. Increase the percent of children aged 3 through 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program to 63%; and</p> <p>B. Decrease the percent of children aged 3 through 5 with IEPs attending a separate special education class, separate school or residential facility to 15%.</p>

Actual Target Data for FFY 2012:

6A: 56%

6B: 16%

The Actual Target Data was calculated as follows:

6A: $875/1550 \times 100 = 56\%$

6B: $254/1550 \times 100 = 16\%$

Percent of Children with IEPs in various categories

Indicator Category	6A	6B
Target	63%	15%
Total number of Children with IEPs	1550	1550
Number of Children with IEPs in this category	875	254
Percentage of Children with IEPs in this category	56%	16%
Met Target	No	No

Data Source:

Educational environments data were collected at the same time as the December 1, 2012 Child Count. IEP information from SEDS was used to calculate percent of time in the regular program.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

As this is a new indicator, last year's APR established a baseline and annual targets against which progress would be measured. The State did not meet its targets for this indicator for FFY 2012.

OSSE will continue to examine the State's data to identify specific additional improvement activities for ensuring that this population is educated in the least restrictive environment.

OSSE is pleased that the State continues to demonstrate significant overall progress in serving District students in the least restrictive environment (LRE) and is coming into closer alignment with national trends. This progress is seen as the result of the concerted effort made by OSSE, its sister agencies, and District LEAs to further understand how to develop a continuum of services and ensure placement in the LRE while maintaining compliance with the IDEA and local law.

In FFY 2012, the Division of Specialized Education's Placement Oversight Unit (POU) marked its fifth consecutive year of implementation of the state's policy's regarding placement review (5-E DCMR §3019.8; *Policy and Procedure for Placement Review, Revised (January 5, 2010)*). This is policy aimed to support LEAs in understanding their roles and responsibilities when considering a change in placement to a more restrictive environment outside of the LEA for a child with a disability. Since its inception, the District's state-level placement oversight process has ensured timely guidance and support to IEP Teams and LEA Teams in implementing/exhausting appropriate support and strategies for children with disabilities before considering placement into

a more restrictive separate school setting. This has aided in diverting inappropriate educational placements. In FFY 2012, the Placement Oversight Unit diverted 38% of potential nonpublic school placements, a consistent accomplishment of the team for the past five years.

In addition, in FFY 2012, through the work of the DSE Training and Technical Assistance (TTA) Unit, OSSE continued to implement a robust state-level training series designed to improve LEA and school level practice related to ensuring that students with IEPs are appropriately served and supported in the LRE. These trainings were intentionally aligned with all state-level policies, and demand for the sessions was, and continues to be, extremely high.

A particular focus of the training and technical assistance work in FFY 2012 was related to supporting practitioners in developing the skills to evaluate progress and design effective programming for 3-5 year olds. OSSE used the requirement of Childhood Outcome Summary (COS) reporting (Indicator 7) as an anchor for this work with LEAs. DSE developed a more robust system for collecting COS data, training LEAs on the appropriate method for completion and submission of COS data, and following up with t LEAs to ensure full compliance in FFY 2012 reporting.

As a key component of this effort, OSSE also requested that each LEA appoint a staff person as COS Data Administrator at the local level and offered several trainings during the 2012-2013 school year regarding the COS process. COS Data Administrators were required to attend full day trainings that included information regarding the significance of the COS as a tool for program improvement, best practices related to COS scoring, and the use of the DC CATS system for COS submission. OSSE also developed a COS guidance tool for LEAs to ensure that LEAs had information available at their sites.

OSSE also released the District of Columbia Special Education Quality Review (SEQR) tool in FFY 2012to further support LRE by assisting District LEAs with defining and implementing quality special education programming.

Lastly, in FFY2012, OSSE hosted the District of Columbia's first *Inclusive Schools Capstone*, which was held in early 2013, as a one-day summit to build on the year's theme of "Awareness to Action." The Capstone Event featured top education experts including Daniel Habib, the award-winning filmmaker of *Including Samuel*, and workshops and trainings aimed at providing innovative solutions to programmatic challenges.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: FAPE in the LRE

Indicator 7: Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved:

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

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

Measurement:

- (a) Outcomes:
 - (b) Positive social-emotional skills (including social relationships);
- C. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and
- D. Use of appropriate behaviors to meet their needs.
 - (c) Progress categories for A, B and C:
 - a. Percent of preschool children who did not improve functioning = $[(\# \text{ of preschool children who did not improve functioning}) \div (\# \text{ of preschool children with IEPs assessed})] \times 100$.
 - b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $[(\# \text{ of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers}) \div (\# \text{ of preschool children with IEPs assessed})] \times 100$.
 - c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = $[(\# \text{ of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it}) \div (\# \text{ of preschool children with IEPs assessed})] \times 100$.
 - d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = $[(\# \text{ of preschool children who improved functioning to reach a level comparable to same-aged peers}) \div (\# \text{ of preschool children with IEPs assessed})] \times 100$.
 - e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = $[(\# \text{ of preschool children who maintained functioning at a level comparable to same-aged peers}) \div (\# \text{ of preschool children with IEPs assessed})] \times 100$.

assessed)] times 100.

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

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

(f) Measurement for Summary Statement 1:

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

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

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

FFY	Measurable and Rigorous Target
2012	<p>A. Increase the percent of preschool children aged 3-5 with IEPs who demonstrate improved positive social-emotional skills. Of those who entered the preschool program below age expectations, the percent who substantially increase their rate of growth by the time they turned 6 years of age or exited will be <u>70%</u>. The percent of those who were functioning within age expectations by the time they turned 6 years of age or exited the program will be <u>60%</u>.</p> <p>B. Increase the percent of preschool children aged 3-5 with IEPs who demonstrate improved acquisition and use of knowledge and skills. Of those who entered the preschool program below age expectations, the percent who substantially increase their rate of growth by the time they turned 6 years of age or exited will be <u>90%</u>. The percent of those who were functioning within age expectations by the time they turned 6 years of age or exited the program will be <u>60%</u>.</p> <p>C. Increase the percent of preschool children aged 3-5 with IEPs who demonstrate improved use of appropriate behavior to meet their needs. Of those who entered the preschool program below age expectations, the percent who substantially increase their rate of</p>

	growth by the time they turned 6 years of age or exited will be <u>60%</u> . The percent of those who were functioning within age expectations by the time they turned 6 years of age or exited the program will be <u>80%</u> .
--	---

Actual progress Data for FFY 2012-2013:

7A: Positive social-emotional skills	Number	Percentage
a: Children who did not improve functioning	1	1%
b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	24	16%
c: Children who improved functioning to a level nearer to same-aged peers but did not reach it	23	16%
d: Children who improved functioning to reach a level comparable to same-aged peers	58	39%
e: Children who maintained functioning at a level comparable to same-aged peers	41	28%
Total	147	100%

7B: Acquisition and use of knowledge and skills	Number	Percentage
a: Children who did not improve functioning	1	1%
b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	19	13%
c: Children who improved functioning to a level nearer to same-aged peers but did not reach it	29	19%
d: Children who improved functioning to reach a level comparable to same-aged peers	57	39%
e: Children who maintained functioning at a level comparable to same-aged peers	41	28%
Total	147	100%

7C: Use of appropriate behaviors to meet their needs	Number	Percentage
a: Children who did not improve functioning	2	2%
b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers	15	10%
c: Children who improved functioning to a level nearer to same-aged peers but did not reach it	27	18%
d: Children who improved functioning to reach a level comparable to same-aged peers	38	26%
e: Children who maintained functioning at a level comparable to same-aged peers	65	44%
Total	147	100%

Data Source, Instruments and Procedures used to gather data:

OSSE collected outcome data through LEA electronic submission of Child Outcomes Summary (COS) forms during the 2012-2013 academic year through census. OSSE required LEAs to collect data on children who entered preschool programs and on children who were enrolled in preschool programs in the previous year. A total of 39 LEAs submitted COS data during the 2012-2013 academic year. At the end of the 2012-2013 school year, these LEAs provided OSSE with entry and exit data for 147 students.

OSSE aligned its guidance related to COS data collection with OSEP-funded organizations, the National Early Childhood Technical Assistance Center (NECTAC) and Early Childhood Outcomes (ECO) Center, and required LEAs to input data into the District of Columbia Compliance and Tracking System (DC CATS). The Indicator 7 of this system was modeled after the COS forms developed by the ECO Center. OSSE provided training and technical assistance to LEAs throughout the COS data collection process to ensure proper use of the DC CATS web-based tool and that COS data were accurate, reliable, and valid.

Actual Target Data for FFY 2012-13

Summary Statements	Targets FFY 2012 (% of children)	Actual FFY 2012 (% of children)	Actual FFY 2011 (% of children)
Outcome A: Positive social-emotional skills (including social relationships)			
1. 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.	70%	76%	64%
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program.	60%	67%	29%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)			
1. Of those preschool children who entered or exited the preschool program below age expectations in Outcome B, the percent who	90%	81%	70%

substantially increased their rate of growth by the time they turned 6 years of age or exited the program.			
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program.	60%	67%	42%
Outcome C: Use of appropriate behaviors to meet their needs			
1. 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.	60%	79%	67%
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program.	80%	70%	62%

Indicator 7A: Positive social-emotional skills (including social relationships)

The District of Columbia exceeded its FFY 2012 target of 70% for students who enter below age expectations. 76% of preschool children who entered the preschool program below age expectations showed a substantial rate of growth by exit, compared to the target.

The District of Columbia exceeded its FFY 2012 target of 60% for students who were functioning within age expectations. 67% of preschool children were functioning within age expectations by the time they exited preschool special education programs, compared to the target.

Summary Statements for Positive Social-Emotional Skills	2012-2013 Data	Target Met?
1. Of those children who entered the program below age expectations in each outcome, the percent that substantially increased their rate of growth in each outcome by the time they exited.	76%	Yes
2. Percent of children who were functioning within age expectations in each outcome, by the time they exited.	67%	Yes

Indicator 7B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)

The District of Columbia did not meet its FFY 2012 target of 90% for students who enter below age expectations. 81% of preschool children who entered the preschool program below age expectations showed a substantial rate of growth by exit, compared to the target.

The District of Columbia exceeded its FFY 2012 target of 60% for students who were functioning within age expectations. 67% of preschool children were functioning within age expectations by the time they exited preschool special education programs, compared to the target.

Summary Statements for Acquisition and use of knowledge and skills	2012-2013 Data	Target Met?
1. Of those children who entered the program below age expectations in each outcome, the percent that substantially increased their rate of growth in each outcome by the time they exited.	81%	No
2. Percent of children who were functioning within age expectations in each outcome, by the time they exited.	67%	Yes

Indicator 7C: Use of appropriate behaviors to meet their needs

The District of Columbia exceeded its FFY 2012 target of 60% for students who enter below age expectations. 79% of children who entered the preschool program below age expectations showed a substantial rate of growth by exit.

The District of Columbia did not meet its FFY 2012 target of 80% for students who were functioning within age expectations. 70% of preschool children were functioning within age expectations by the time they exited preschool special education programs, compared to the target.

Summary Statements for Acquisition and use of knowledge and skills	2012-2013 Data	Target Met?
1. Of those children who entered the program below age expectations in each outcome, the percent that substantially increased their rate of growth in each outcome by the time they exited.	79%	Yes
2. Percent of children who were functioning within age expectations in each outcome, by the time they exited.	70%	No

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2012-2013:

While the District did not meet each of the FFY 2012 targets, the District is pleased to note that we have sustained increased growth across all three outcome areas. Refer to table entitled “Actual Target Data for FFY 2012-2013” to see a comparison of FFY11 data and FFY12 data.

The District did not meet its targets for Indicator 7B Summary Statement 1: Acquisition and use of knowledge and skills (including early language/communication and early literacy). However, the District saw growth in the percentage of children who were functioning within age expectations in acquisition and use of knowledge and skills (81%) in this outcome area by the time they exited, as compared to FFY 2011 (70%).

OSSE expects to see continuous improvement in this domain based on its recently released Early Learning Standards, which are Common-Core aligned, and a robust training plan to support implementation that is currently underway, spearheaded by the Division of Elementary and Secondary Education and the Division of Early Learning.

DSE developed a more robust system for collecting COS data, training LEAs on the appropriate method for completion and submission of COS data.

In FFY 2011, OSSE prepared for a substantial effort to ensure that in FFY 2012, the District's LEAs with preschool programs understood how to use the COS and were provided with the appropriate tools to facilitate regular COS data submissions.

As noted above, in FFY 2012, the Training and Technical Assistance Unit and the Monitoring and Compliance Unit of the Division of Specialized Education developed an online compliance and monitoring system, DC-CATS. OSSE included in its web-based portal a COS module specifically to address requests from LEAs regarding the ability to submit data electronically. OSSE also requested that each LEA appoint a staff person as COS Data Administrator at the local level.

In order to ensure that relevant LEA staff were well positioned for the use of the system, the Division of Specialized Education offered several trainings during the 2012-2013 school year regarding the COS process and the new DC CATS data collection portal. The Division of Specialized Education continues to offer trainings on COS and Early Childhood Outcomes. The full day trainings were required training for all LEAs with preschool programs. The training included information regarding the significance of the COS as a tool for program improvement, best practices related to COS scoring, and use of the DC CATS system for COS submission. OSSE also developed a COS guidance tool for LEAs to ensure that LEAs had information available back at their sites.

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District of Columbia's continued progress in relation to this indicator.

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Consult with National Early Childhood Technical Assistance Center (NECTAC) and the Early Childhood Outcomes Center (ECO)	Ongoing through June, 2013	Director, TTA Unit; TTA staff in collaboration with NECTAC and the Early Childhood Outcomes Center (ECO)

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
as needed on questions related to this indicator.		
Create and provide each LEA with a training and technical assistance resource manual on Early Childhood Outcomes, and post related training modules for LEAs to use as a resource guide.	Completed; will be revised as necessary annually	Director, TTA Unit; 619 Coordinator; Assistant Superintendent of Special Education; TTA staff
Continue to implement a robust annual professional development schedule on specific early literacy and numeracy instructional approaches for all LEAs.	Ongoing through June, 2013	Director, TTA Unit; TTA staff
Targeted and tiered training and technical assistance on COS content.	Ongoing through June, 2013	Director, TTA Unit; TTA staff

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development:

Monitoring Priority: FAPE in the LRE

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

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

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

FFY	Measurable and Rigorous Targets
2012	75.0% of parents with a child receiving special education services will report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

Actual Target Data for FFY 2012:

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

	FFY 2012
Total number of Parent respondents	389
Number who reported school facilitated their involvement	360
Percentage who reported school facilitated their involvement	93%

The target of 75.0% was met.

Data Source:

In FFY 2012, the survey was distributed to all parents of children receiving special education services in the District of Columbia either via mail or online. A total of 12,585 parents were

given the opportunity to complete the survey; 389 were returned for a response rate of 3%. This response rate is higher than the response rate in 2011-2012, where a response rate of 2% was attained.

The purpose of the Parent Survey is to assist OSSE in determining the extent to which LEAs are facilitating parent involvement. The survey data assists OSSE and the LEAs in improving parent involvement and will result in positive outcomes for parents as well as improved outcomes for children.

In the spring of 2013, OSSE convened a series of focus groups to review the current survey. Previous comments regarding the length of the survey prompted the agency and key partners to discuss a methodology that would increase the response rate while avoiding being overly burdensome to parents providing input.

The Center for Technical Assistance for Excellence in Special Education (TAESE) at the Center for Persons with Disabilities at Utah State University provided technical assistance throughout the process. They reviewed the SPP and APR indicators, provided examples of other state surveys, discussed the 26-item National Center for Special Education Accountability Monitoring (NCSEAM) Part B K-12 survey and discussed improvement strategies.

Several items were modified in order to increase the readability of the survey and the survey was reduced to ten questions that focused on the following areas:

1. Parent Rights/Procedural Safeguards
2. Partnerships
3. Involvement and Participation
4. Training and Information
5. Communication
6. Culture
7. Satisfaction

In November 2013, the Parent Survey was personally distributed to parents of students (age 3-21) who received special education services during the 2012-13 school year. Surveys were sent to parents and local education agencies bundled by school locations (some schools have several locations) with individual student packets to be distributed to parents. Packets to parents included a self-addressed, postage-paid return envelope. Parents were not asked to provide student identifiable information.

The survey mailing included a letter of instruction, a copy of the survey questionnaire in English and in Spanish, an offer of assistance to complete the survey by state education agency staff and a preaddressed postage paid business reply envelope.

The survey was announced to LEAs via the agency weekly newsletter dissemination as well as posted on the agency website. The survey was also disseminated through community based organizations and government partners.

Following the initial mailing of the survey, reminders were sent to each parent encouraging them to return the completed survey or to contact OSSE if they needed a new survey.

All surveys materials were printed and available online, <http://osse.dc.gov/service/annual-special-education-parent-survey>, in English, Spanish and Amharic.

Discussion of the Data:

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. Parents of students from each racial/ethnic category, each primary disability category, each grade level and each school sector responded to the survey. 83% of respondents reported having a child that is Black/African American, 9% reported having a child that is White, 8% reported having a child that is Hispanic or Latino, 2% of respondents reported having a child that is Asian/Pacific Islander, and 1% reported having a child that is American Indian or Alaskan Native.

This demographic breakdown is similar to the demographic breakdown of the FFY 2012 student population of District of Columbia public schools and public charter schools, with the exception of the Hispanic/Latino population, which was underrepresented in survey responses. In FFY 2012, African Americans/Blacks made up 73% of the student population; Hispanics/Latinos made up 16% of the student population; Whites made up 8% of the student population; Asian/Pacific Islander made up 1% of the student population; American Indians made up approximately .1% of the student population; and 1% of the student population was identified as multiracial.

OSSE plans to further refine its outreach methodology in the upcoming survey cycle to ensure full representation of all racial/ethnic categories in the District of Columbia's student population. In addition, OSSE will explore expanded partnerships with outside organizations, including the State Advisory Panel and the State Board of Education, to assist with further overall outreach and response.

To arrive at the percent of parents who report that the school facilitated their involvement, a "percent of maximum" scoring procedure was used. Each survey respondent received a percent of maximum score based on their responses to 8 of the items. A respondent who rated their experiences with the school a "1" (Very Strongly Agree) on each of the 8 items received a 100% score; a respondent who rated their experiences with the school a "6" (Very Strongly Disagree) on each of the 16 items received a 0% score. A respondent who rated their experiences with the school a "3" (Agree) on each of the 16 items received a 60% score. (Note: a respondent who **on average** rated their experiences a "3" (e.g. a respondent who rated 4 items a "3," 6 items a "2" and 6 items a "4,") would also receive a percent of maximum score of 60%). A parent who has a percent of maximum score of 60% or above was identified as one who reported that the school facilitated his/her involvement. A 60% cut-score is representative of a parent who, on

average, agrees with each item; as such, the family member is agreeing that the school facilitated their involvement.

Explanation of Progress or Slippage that Occurred for FFY 2012:

As indicated in Display 8-2, the percentage of parents who reported that the school facilitated their involvement increased from FFY 2011 to FFY 2012, from 68% to 93% respectively.

Display 8-2: Percent of Parents Who Report that the School Facilitated Their Involvement, Results Over Time

	FFY2011	FFY2012
Total number of parent respondents	273	389
Number who reported school facilitated their involvement	185	360
Percentage who reported school facilitated their involvement	68%	93%

Overall, an upward trend in parent satisfaction has emerged. In comparing the past two years of the survey, the change, although incremental, is progressive and steady. Survey results are grouped into several categories. The FFY 2012 survey results point to the following areas of strength:

Procedural Safeguards and Parents Rights: The majority of respondents (94%) agreed that their child's school ensured that the understood their parents' rights.

School's Performance in Developing Partnerships with Parents: An overwhelming majority (95%) of the parents surveyed indicated that they were encouraged to participate with their child's teachers and other professionals in developing their child's educational program, and 92% felt they were treated as an equal partner by their child's teachers and other professionals in planning their child's special education program.

Teachers and Administrators: Satisfaction with teachers and administrators was high, with 94% of the respondents agreeing that they were shown respect for their culture as it relates to their child's education. In addition, 95% felt that their ideas and suggestions were considered at their child's IEP meetings.

School Communication: The vast majority (92%) of respondents indicated that their child's school communicates with them regularly about their child's progress on their IEP goals, and 94% reported the information that they receive about their child's special education program is communicated in an understandable way. Additionally, 94% of respondents indicated that their

child's school ensures that they understand special education procedural safeguards, and 82% reported that they were offered training about special education related issues.

Services: The majority of respondents (89%) expressed that they were satisfied with the special education services their child received during the past year.

Outcomes: 89% of respondents indicated that they were satisfied with the progress their child made during the past year.

Discussion of Improvement Activities Completed for FFY 2012 (SY 2012-2013):

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's demonstrated progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Distribute the Parent Survey prior to the end of the school year and extend the survey period.	Ongoing through June 30, 2013	Assistant Superintendent; Special Projects Coordinator, Parent and Community Relations
Offer the survey in the language spoken in the home and continue utilizing the District of Columbia Language Access Line to assist with the completion of the survey.	Ongoing through June 30, 2013	Assistant Superintendent; Special Projects Coordinator, Parent and Community Relations
Utilize parent and community based resources to encourage the completion of the survey (i.e. Parent Training and Information Centers and DC Parent Resource Centers).	Ongoing through June 30, 2013	Assistant Superintendent; Special Projects Coordinator, Parent and Community Relations

*A copy of the Parent Survey is attached as a separate document.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

REVISED IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
OSSE will develop a strategy to increase the response rates of the Latino population. FFY 2012's response rate for Latino families shows a slightly lower rate than the rate that would be representative of the makeup of the District of Columbia.	Ongoing	Special Project Manager, Parent and Community Relations
Based upon survey responses, OSSE will	Ongoing	Assistant Superintendent;

<p>be increasing parent training and technical assistance opportunities and strengthening partnerships with community based organizations, including the Parent Training and Information Center and the federally mandated State Advisory Panel on Special Education.</p>		<p>Special Projects Manager, Parent and Community Relations</p>
---	--	---

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: Disproportionality

Indicator 9: Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.

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

Measurement:

Percent = [(# of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification) divided by the (# of districts in the State)] times 100.

Include State's definition of "disproportionate representation."

Based on its review of the 618 data for FFY 2012, describe how the State made its annual determination that the disproportionate overrepresentation it identified of racial and ethnic groups in special education and related services was the result of inappropriate identification as required by §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum 'n' size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in special education and related services is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2012 reporting period, i.e., after June 30, 2013. If inappropriate identification is identified, report on corrective actions taken.

FFY	Measurable and Rigorous Target
2012	0%

Actual Target Data for FFY 2012:

13%

The Actual Target Data was calculated as follows:

$$(3 \text{ LEAs} / 24) \times 100 = 13\%$$

Data Source:

OSSE used its Fall October 5, 2012 Enrollment and October/December 1, 2012 Child Count data for the calculation to determine disproportionate representation. All LEAs included in the denominator met the “n” size of 40 children with IEPs and at least 5 students in one race/ethnicity.

Definition of “Disproportionate Representation” and Methodology

OSSE notes that in the FFY 2011 APR, the State proposed changing its methodology for this indicator, however, OSSE did not adopt new methodology. The methodology described here is the same that was used in FFY 2011.

OSSE has adopted a weighted risk ratio of 2.5 for over- representation for determining if LEAs have disproportionate representation for Indicator 9. The weighted risk ratio compares the chance, or risk, of children of a particular racial/ethnic group being identified for special education with the chance of children of all other racial/ethnic groups being identified for special education, taking into account the racial/ethnic composition of the student population in the District of Columbia. That is, the weighted risk ratio negates any effect on risk caused by a large or small percent of students being of a particular racial/ethnic group. The District of Columbia’s weighted risk ratio limits of 2.5 means that the OSSE will investigate cases in which a particular racial/ethnic group is more than two and one half times as likely as all other racial/ethnic groups to be identified for special education, based on each racial/ethnic group’s proportion of all students in the District of Columbia.

As required by OSEP, OSSE reviewed data related to the following required racial/ethnic groups: American Indian or Alaska Native, Asian, Black or African American, Hispanic /Latino, Native Hawaiian or Other Pacific Islander, White, or two or more races.

Minimum Group Size for Inclusion:

OSSE determined that an LEA must have at least 40 students with IEPs in order for an LEA to be included in this indicator. In addition, within LEAs of 40 or more students with IEPs, at least five students of a single race/ethnicity are required for weighted risk ratio analysis for that particular race/ethnicity. In FFY 2012, 24 LEAs in the District of Columbia had 40 or more students with IEPs and at least five students in one race/ethnicity. (Sixteen agencies were excluded due to “n” size.)⁴

Step One: Identifying the Number of Districts Identified with Disproportionate Representation

⁴ In FFY 2012, 40 LEAs in the District of Columbia served students with IEPs aged 6 through 21.

Using the criteria established above, OSSE determined that four (4) LEAs were identified as meeting the data threshold for disproportionate representation.

Step Two: Determining if Disproportionate Representation is the Result of Inappropriate Identification

For each of the four (4) LEAs that the State identified as having disproportionate representation of racial and ethnic groups in special education or related services, the State required completion of a self-study to determine if the disproportionate representation was a result of inappropriate identification. As part of this self-study, LEAs were required to review a number of student records (depending on the overall number of students with IEPs at the LEA); compare existing policies, procedures and practices to child find, evaluation and eligibility requirements; and complete a continuous improvement plan detailing the way in which any identified areas of noncompliance or areas of improvement would be addressed. All four (4) LEAs submitted their completed self-studies. OSSE reviewed the results of the self-studies and found that three (3) LEAs had disproportionate representation as a result of inappropriate identification. OSSE's review showed that the continuous improvement plans submitted by the LEA would adequately address the identified noncompliance with the LEA's policies, procedures, and practices related to identification and evaluation. On December 31, 2013 OSSE issued letters to the 3 LEAs, noting the identified noncompliance and requiring specific revision of its policies, procedures and practices in accordance with their continuous improvement plans. OSSE will report on the correction of this noncompliance in its FFY 2013 APR due February 1, 2015.

Districts with Disproportionate Representation of Racial and Ethnic Groups that was the Result of Inappropriate Identification

Year	Total Number of Districts	Number of Districts with Disproportionate Representation	Number of Districts with Disproportionate Representation of Racial and Ethnic Groups that was the Result of Inappropriate Identification	Percent of Districts
FFY 2012 (2012-2013)	24	4	3	13%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

The actual target data of 13% represents slippage from OSSE's FFY 2011 actual target data of 5%. The State did not meet its target of 0%.

OSSE attributes the slippage to circumstances unique to each LEA. For example, OSSE has determined that at one LEA, unexpected turnover in staff led to less rigorous application of

educational interventions by the LEA's student study team prior to a determination of eligibility for special education. Despite this slippage, LEAs continue to demonstrate an increased awareness of requirements in the areas of eligibility, evaluation requirements, and early intervening activities. OSSE provided training regarding best practices that are available to all LEA teachers and administrators.

In FFY 2012 OSSE began using a new multi-part self-study tool. This tool includes a review of student records, LEA policies, procedures and practices, and regulatory requirements, and is suitable for LEAs whose data demonstrate disproportionate representation as well as LEAs who voluntarily conduct a review to improve compliance with requirements related to evaluation and eligibility determinations. The result of the self-study process is the development of a guided continuous improvement plan to address identified areas of concern or noncompliance.

OSSE made available a web-based training on disproportionate representation and the use of the self-study to all LEAs. OSSE has received positive feedback from LEAs on the content of the self-study, which it has made available on its website, to encourage continuous improvement in practice related to identification and evaluation.

Correction of FFY 2011 Findings of Noncompliance:

Level of compliance (actual target data) State reported for FFY 2011 for this indicator: 5 %

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011 through June 30, 2012)	1
2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	1
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	0

Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	0
5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	0

6. Number of FFY 2011 findings <u>not</u> yet verified as corrected [(4) minus (5)]	0
---	---

Actions Taken if Noncompliance Not Corrected:

OSSE has verified correction of all FFY 2011 findings.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2011:

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification. OSSE requires all LEAs to correct noncompliance within one year of the date of notification using the “two pronged” approach outlined in OSEP Memo 09-02.

To verify correction of noncompliance for this indicator OSSE uses the following steps, which are to be completed as soon as possible, but in no case more than one year from the date of notification of noncompliance:

Prong I: After a finding is made, the LEA must submit updated policy, procedure, and/or practice documentation. OSSE reviews the LEA’s updated policies, procedures, and practices. If the documentation does not demonstrate correction sufficient to ensure that the LEA is in compliance with the regulation, OSSE provides technical assistance to the LEA to support the LEA’s efforts in creating compliant policies, procedures, and practices. In addition, LEAs must submit proof of correction of each individual case of noncompliance (if any) unless the student is no longer within the jurisdiction of the LEA.

Prong II: Following OSSE’s verification that the documentation submitted in Prong I, described above, is compliant, OSSE reviews the LEA’s data for this indicator in a subsequent time period to ensure that the LEA is correctly implementing the specific regulatory requirement. OSSE considers a finding in this area to be corrected if the LEA makes all necessary corrections to its policies, procedures, practices, corrects each individual finding (if any, unless the student is no longer under the jurisdiction of the LEA), and OSSE’s review of the data for a subsequent time period shows that there is no disproportionate representation of racial and ethnic groups that is the result of inappropriate identification in special education and related services.

In accordance with the verification of correction process described above, OSSE issued findings of noncompliance to 1 LEA, and required specific revision of policies, procedures, and practices, and correction of all individual cases of noncompliance. Upon receipt of updated policies, procedures, and practices, and evidence of correction of each individual case of noncompliance, OSSE verified that required corrections had been completed in compliance with the IDEA. Finally, OSSE reviewed the LEA’s data from a subsequent time period to ensure that the LEA was correctly implementing the requirements of the regulations related to child find, evaluation and eligibility.

Correction of Remaining FFY 2010 Findings of Noncompliance (if applicable):

The State reported that 0% of districts had disproportionate representation based on inappropriate identification in FFY 2010.

Correction of Any Remaining Findings of Noncompliance from FFY 2009 or Earlier (if applicable):

All findings for FFY 2009 were corrected as of the FFY 2011 APR.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State's Response
The State must report on the status of correction of noncompliance identified in FFY 2012 based on 2011-2012 data & must demonstrate that the LEA with disproportionate representation is in compliance:	The State reported that the LEA identified in FFY 2012 (based on FFY 2011-2012 data) with disproportionate representation of racial and ethnic groups due to inappropriate identification is in compliance with IDEA regulations.
The State must report that it verified correction of noncompliance (identified in FFY 2012, based on 2011-2012 data) in conformance with OSEP Memo 09-02, and must describe the specific actions taken to verify the correction.	OSSE verified correction of all noncompliance in accordance with OSEP Memo 09-02. OSSE verified that all individual cases of noncompliance (if any) were corrected, and confirmed that the LEA's policies, procedures, and practices were compliant with IDEA regulations. OSSE verified that the LEA was correctly implementing the regulatory requirements by reviewing a subsequent data sample from the LEA which demonstrated that the LEA did not have disproportionate representation of racial and ethnic groups that was the result of inappropriate identification of students for special education services.

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Continue to refine the data collection process to ensure that SEDS collects all data required for federal reporting purposes.	Ongoing through June 30, 2013	OSSE Data Team and contractors
Continue to provide user training on all modifications/improvements to the SEDS.	Ongoing through June 30, 2013	OSSE Data Team and contractors
Provide technical assistance to facilitate LEA self-reviews and provide on-site technical assistance to LEAs to address identified inappropriate policies, procedures and practices.	Ongoing through June 30, 2013	OSSE Training & Technical Assistance staff and contractors
Coordinate closely with new OSSE Director of Data Management to develop an agency –wide data collection calendar that allows for timely access to data needed for special education compliance calculations.	Ongoing through June 30, 2013	OSSE Leadership; DSE Data Director
Propose and discuss new methodology with stakeholders and adopt pending discussion and approval to ensure that the methodologies adopted by the District of Columbia accurately calculate the measurement in a manner that identifies systemic noncompliance.	Ongoing through June 30, 2013	DSE; Office of Data Management; Stakeholders

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: Disproportionality

Indicator 10: Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

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

Measurement:

Percent = [(# of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification) divided by the (# of districts in the State)] times 100.

Include State's definition of "disproportionate representation."

Based on its review of the 618 data for FFY 2012, describe how the State made its annual determination that the disproportionate overrepresentation it identified of racial and ethnic groups in specific disability categories was the result of inappropriate identification as required by §§300.600(d)(3) and 300.602(a), e.g., using monitoring data; reviewing policies, practices and procedures, etc. In determining disproportionate representation, analyze data, for each district, for all racial and ethnic groups in the district, or all racial and ethnic groups in the district that meet a minimum 'n' size set by the State. Report on the percent of districts in which disproportionate representation of racial and ethnic groups in specific disability categories is the result of inappropriate identification, even if the determination of inappropriate identification was made after the end of the FFY 2012, i.e., after June 30, 2013. If inappropriate identification is identified, report on corrective actions taken.

Actual Target Data for FFY 2012:

FFY	Measurable and Rigorous Target
2012	0%

17%

The Actual Target Data was calculated as follows:

$$(4 \text{ LEAs}/24) \times 100 = 17\%$$

Data Source:

OSSE used its Fall October 5, 2012 Enrollment and October/December 1, 2012 Child Count data for the Indicator 10 FFY 2012 SPP/APR submission.

Definition of “Disproportionate Representation” and Methodology

In the FFY 2011 APR, OSSE reported that it planned to adopt an updated methodology for this indicator for calculating actual target data in the FFY 2012 APR. OSSE did not adopt new methodology. The methodology described below is the same methodology used for calculating actual target data in the FFY 2011 APR.

OSSE has adopted a weighted risk ratio of 2.5 for over-representation for determining if LEAs have disproportionate representation for Indicator 10. The weighted risk ratio compares the chance, or risk, of children of a particular racial/ethnic group being identified with a specific disability with the chance of children of all other racial/ethnic groups being identified with that same specific disability, taking into account the racial/ethnic composition of the student population in the District of Columbia. That is, the weighted risk ratio negates any effect on risk caused by a large or small percent of students being of a particular racial/ethnic group. The District of Columbia’s weighted risk ratio limits of 2.5 means that the OSSE will investigate cases in which a particular racial/ethnic group is more than two and one half times as likely as all other racial/ethnic groups to be identified with a specific disability, based on each racial/ethnic group’s proportion of all students in the District of Columbia.

As required by OSEP, OSSE reviewed data related to the following required racial/ethnic groups: American Indian or Alaska Native, Asian, Black or African American, Hispanic /Latino, Native Hawaiian or Other Pacific Islander, White, or two or more races, and the following disabilities categories: autism, specific learning disability (SLD), emotional disturbance (ED), multiple disabilities (MD), other health impaired (OHI), mental retardation (MR), speech or language impairment (SLI), deaf/blind, visually impaired (VI), deafness, hearing impairment, orthopedic impairment (OI), and traumatic brain injury (TBI).

Minimum group size for inclusion:

OSSE determined that an LEA must have at least 40 students with IEPs in order for an LEA to be included in this indicator. In addition, within LEAs of 40 or more students with IEPs, at least five students of a single race/ethnicity are required for weighted risk ratio analysis for that particular race/ethnicity. In FFY 2012, 24 LEAs in the District of Columbia had 40 or more students with IEPs and at least five students of a single race/ethnicity for a particular race/ethnicity (Sixteen LEAs were excluded due to “n” size)⁵.

Step One: Using the criteria established above, OSSE determined that twelve LEAs were

⁵ In FFY 2012, 40 LEAs in the District of Columbia served students with IEPs aged 6 through 21.

identified as meeting the data threshold for disproportionate representation.

Step Two: Determining if Disproportionate Representation is the Result of Inappropriate Identification

For each of the twelve (12) LEAs that the State identified as having disproportionate representation of racial and ethnic groups in specific disability categories, the State required completion of a self-study to determine if the disproportionate representation was a result of inappropriate identification. As part of this self-study, LEAs were required to review a number of student records (depending on the overall number of students with IEPs at the LEA); compare existing policies, procedures and practices to child find, evaluation and eligibility requirements; and complete a continuous improvement plan detailing the way in which any identified areas of noncompliance or areas of improvement would be addressed. All twelve (12) LEAs submitted their completed self-studies.

OSSE reviewed the results of the self-studies and found that four (4) LEAs had disproportionate representation in specific disability categories as a result of inappropriate identification. OSSE reviewed the continuous improvement plans submitted by the four LEAs and determined that completion of the continuous improvement plan would satisfy Prong I of the required corrective actions. On December 31, 2013, OSSE issued a letter to each of the four LEAs, noting the identified noncompliance and requiring specific revision of its policies, procedures and practices in accordance with each LEA's continuous improvement plan. OSSE will report on the correction of this noncompliance in its FFY 2013 APR due February 1, 2015.

Districts with Disproportionate Representation of Racial and Ethnic Groups in Specific Disability categories that was the Result of Inappropriate Identification:

Year	Total Number of Districts	Number of Districts with Disproportionate Representation	Number of Districts with Disproportionate Representation of Racial and Ethnic Groups in specific disability categories that was the Result of Inappropriate Identification	Percent of Districts
FFY 2012 (2012-2013)	24	12	4	17%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

The actual target data of 17% represents slippage as compared to OSSE's FFY 2011 actual target data of 10%. The State did not meet its target of 0%. OSSE has determined that the slippage

was generally attributable to lack of adequate policies and procedures, which is an ongoing challenge in jurisdictions like the District that have many new LEAs created each year. OSSE continues to refine its training and technical assistance strategies to address this issue. For example, in FFY 2012, OSSE collaborated with the Public Charter School Board to host a special education orientation for new charter leaders. This session was just completed in FFY 2013 and will continue annually.

LEAs continue to demonstrate an increased awareness of requirements in the areas of eligibility, evaluation requirements, and early intervening activities. OSSE provided trainings regarding best practices that are available to all LEA teachers and administrators. In FFY 2012, OSSE began using a new multi-part self-study tool. The self-study tool was first used with LEAs who demonstrated disproportionate representation based on the FFY 2011 data. This tool includes a review of student records, LEA policies, procedures and practices, and regulatory requirements, and is suitable for LEAs whose data demonstrate disproportionate representation as well as LEAs who voluntarily conduct a review to improve compliance with requirements related to evaluation and eligibility determinations. The result of the self-study process is the development of a guided continuous improvement plan to address identified areas of concern or noncompliance.

OSSE made available a web-based training on disproportionate representation and the use of the self-study to all LEAs. OSSE has received positive feedback from LEAs on the content of the self-study, which it has made available on its website.

Correction of FFY 2011 Findings of Noncompliance (if State reported more than 0% compliance):

Level of compliance (actual target data) State reported for FFY 2011 for this indicator: 10 %

1. Number of findings of noncompliance for FFY 2011 (the period from July 1, 2011 through June 30, 2012, findings issued during FFY 2012)	16
2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	15
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	1

Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	1
5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	0
6. Number of FFY 2011 findings <u>not</u> yet verified as corrected [(4) minus (5)]	1

OSSE has completed the table to show findings which have been corrected, and those not yet verified as corrected. However, OSSE issued these findings in FFY 2012, not FFY 2011.

Actions Taken if Noncompliance Not Corrected:

To identify the root cause of the longstanding noncompliance from FFY 2011, OSSE compliance monitors examined the open finding and discovered that while the LEA had produced strong policies and procedures in response to the FFY 2011 finding, and corrected all individual cases of noncompliance as necessary, the policies had not yet been put into practice in a uniform manner, so the in the review of subsequent data, the LEA did not demonstrate 100% compliance with the regulatory requirements. The same LEA was issued a finding in FFY 2013 based on FFY 2012 data, and OSSE has verified that the continuous improvement plan includes staff training which should result in better practice.

The LEA’s failure to correct longstanding noncompliance is figured into its annual determination results. A variety of penalties and corrective actions are built into OSSE’s annual determination process for LEAs, including mandatory training and withholding of IDEA funding.

Verification of Correction (either timely or subsequent):

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification.

OSSE issued findings of noncompliance based on FFY 2011 data and the corresponding self - assessment in FFY 2012. In order to correct these findings of noncompliance, OSSE required completion of individual student-level corrections as well as demonstration that the LEA is correctly implementing the specific regulatory requirement. OSSE verified the completion of student-level corrections, such as demonstration that the appropriate procedural requirements were followed, and verification that a child is or is not eligible for special education and related services. OSSE also required the LEA to implement its continuous improvement plan, which

was focused on correcting any deficiencies in policies, procedures, and practices identified through the self-study. In addition, OSSE reviewed the LEA's data for a subsequent time period. OSSE considers a finding in this area to be corrected if the LEA corrects the individual findings and review of the data for a subsequent time period shows that there is no disproportionate representation of racial and ethnic groups that is the result of inappropriate identification in special education and related services.

Description of the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2011:

As detailed above, following submission of individual student-level corrections by the LEA, OSSE verified the completion of student-level corrections. OSSE also reviewed the LEA's progress with implementation of the continuous improvement plan. In addition OSSE verified that the LEA is correctly implementing the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data collected through the State data system. OSSE considers a finding in this area to be corrected if the LEA corrects the individual findings and review of the data for a subsequent time period shows that there is no disproportionate representation of racial and ethnic groups that is the result of inappropriate identification in special education and related services.

Correction of Remaining FFY 2010 Findings of Noncompliance (if applicable):

All FFY 2010 findings were corrected as of the FFY 2011 APR submission.

Correction of Any Remaining Findings of Noncompliance from FFY 2009 or Earlier (if applicable):

1. Number of remaining FFY 2009 findings noted in OSEP's June 2012 FFY 2010 APR response table for this indicator	1
2. Number of remaining FFY 2009 findings the State has verified as corrected	1
3. Number of remaining FFY 2009 findings the State has not verified as corrected [(1) minus (2)]	0

OSSE has completed the table to show findings which have been corrected. However, OSSE issued these findings in FFY 2011, not FFY 2009.

Verification of Correction (either timely or subsequent):

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification.

OSSE issued findings of noncompliance based on FFY 2009 data in FFY 2011. In order to correct these findings of noncompliance, OSSE required completion of individual student-level corrections as well as demonstration that the LEA is correctly implementing the specific regulatory requirement. OSSE verified the completion of student-level corrections, such as demonstration that the appropriate procedural requirements were followed, and verification that a child is or is not eligible for special education and related services. In addition, OSSE reviewed the LEA's data for a subsequent time period. OSSE considers a finding in this area to be corrected if the LEA corrects the individual findings and review of the data for a subsequent time period shows that there is no disproportionate representation of racial and ethnic groups that is the result of inappropriate identification in special education and related services.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State's Response
The State must demonstrate that the 2 LEAs identified for this indicator in FFY 2012 based on FFY 2011 data are in compliance with the regulatory requirements.	OSSE verified that 1 of 2 LEAs identified with noncompliance for this indicator in FFY 12 (based on FFY 2011 data) is in compliance with the regulatory requirements.
The State must demonstrate that the remaining LEA identified in FFY 2011 based on FFY 2009 data is in compliance with the regulatory requirements.	OSSE verified that the remaining LEA identified with noncompliance for this indicator in FFY 2011 (based on FFY 2009 data) is in compliance with the regulatory requirements.
The State must report that the State verified that each LEA with noncompliance is correctly implementing the specific regulatory requirement (100% compliant) consistent with OSEP Memo 09-02	OSSE verified that each LEA corrected all individual noncompliance, made all necessary corrections to policy, practice, and procedure, and is correctly implementing the regulatory requirement based on a subsequent (100% compliant) review of data.

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Continue to refine the data collection process to ensure that SEDS collects all data required for federal reporting purposes.	Ongoing through June 30, 2013	OSSE Data Team and contractors
Continue to provide user training on all modifications/improvements to the SEDS.	Ongoing through June 30, 2013	OSSE Data Team and contractors
Provide technical assistance to facilitate the self-review and provide on-site technical assistance to LEAs to address identified inappropriate policies, procedures and practices.	Ongoing through June 30, 2013	OSSE Training & Technical Assistance staff and contractors
Coordinate closely with new OSSE Director of Data Management to develop an agency –wide data collection calendar that allows for timely access to data needed for special education compliance calculations.	Ongoing through June 30, 2013	OSSE Leadership; DSE Data Director
Propose and discuss new methodology with stakeholders and adopt pending discussion and approval. Justification: To ensure that the methodologies adopted by the District of Columbia accurately calculate the measurement in a manner that identifies systemic noncompliance.	Ongoing through June 30, 2013	DSE; Office of Data Management; Stakeholders

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: Effective General Supervision Part B/Child Find

Indicator 11: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.

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

Measurement:

- a. # of children for whom parental consent to evaluate was received
- b. # of children whose evaluations were completed within 60 days (or State-established timeline).

Account of children included in (a) but not included in (b). Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

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

FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

93%

The Actual Target Data was calculated as follows:

$$2342/2512 \times 100 = 93\%$$

Method Used to Collect Data:

OSSE used its Special Education Data Systems (SEDS) to collect data for this indicator. Data were collected for the entire reporting year (July 1, 2012 – June 30, 2013) on all children referred for initial evaluation.

The District of Columbia established timeline for evaluations is 120 days from referral to eligibility determination.

Children Evaluated Within State-established timeline:

a. Number of children for whom parental consent to evaluate was received	2512
b. Number of children whose evaluations were completed within 120 days	2342
Percent of children with parental consent to evaluate, who were evaluated within 120 days (Percent = [(b) divided by (a)] times 100)	93%

Account for children included in (a) but not included in (b):

There were 170 children included in (a) but not included in (b). For these children, evaluations were not completed within the State-established timeline. .

Eighty-one (81) children did not receive an evaluation within the State- established timeline but were excluded from the numerator and the denominator because of exceptions outlined in 34 CFR §300.301(d) (the parent of the child repeatedly failed or refused to produce the child for the evaluation)

Indicate the range of days beyond the timeline and provide reasons for the delays:

The range of days beyond the 120 day timeline is 1-255 days. The reasons for delay fall within two categories: LEA delay and parental delay.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2011:

The actual target data of 93% represents progress from OSSE's FFY 2011 actual target data of 89%. The District did not meet the FFY 2012 target of 100%.

OSSE is pleased to note the District’s continued progress related to this indicator. In FFY 2012, OSSE continued to engage in a number of improvement activities to improve evaluation timelines. First, OSSE continued its practice of issuing LEA Performance and Planning Reports to assist LEAs in monitoring progress toward evaluation timeliness and planning for upcoming evaluation deadlines. Further, OSSE conducted multiple training sessions regarding evaluation requirements, and implemented a system of tiered technical assistance based on compliance data. This system placed LEAs with overdue evaluations in “Tier 3”, or intensive intervention, which included required data quality trainings, root cause analysis training and coaching, special education program improvement planning, and access to skilled evaluators to address evaluation delays related to a lack of providers.

OSSE also continued to refine a rigorous monitoring system to identify and correct noncompliance in a timely manner. On-site monitoring and database monitoring regarding evaluation timelines and evaluation-related requirements were completed throughout FFY 2012.

Each quarter, OSSE reviews data in SEDS to report to OSEP on compliance with initial evaluation and reevaluation timeline requirements. Data are reviewed from all LEAs. Following the review of data, OSSE issues written findings of noncompliance to each LEA that did not achieve 100% compliance for evaluation timelines.

To demonstrate correction of the LEA’s noncompliance related to timely evaluations, the LEA must provide student level correction and ensure future LEA compliance. Student level correction is demonstrated when the student receives the evaluation, although late. The LEA must also ensure that future initial evaluations and reevaluations are conducted in a timely manner. This is accomplished by demonstrating that the LEA has met full compliance (100% timely) via the following quarterly review.

Correction of FFY 2011 Findings of Noncompliance (if State reported less than 100% compliance):

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011 through June 30, 2012)	1) 563
2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	2) 430
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	3) 133

Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

1. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	133
2. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	117
3. Number of FFY 2011 findings <u>not</u> verified as corrected [(4) minus (5)]	16

Actions Taken if Noncompliance Not Corrected:

OSSE requires submission of documentation showing the correction of noncompliance as soon as possible and in no case longer than one year from notification. In the initial notification, OSSE will include a deadline for submission of correction between 2 and 6 months from the date of notification. If noncompliance is not corrected with the first submission, OSSE monitors follow-up with the LEA to provide additional technical assistance on the requirements for correction. Following submission of documents which are insufficient to demonstrate correction, OSSE will issue a letter and updated report to the LEA contact detailing the remaining required corrections. In addition, OSSE enhanced its capacity in FFY 2012 through the development of a web-based compliance monitoring system that allows for timely and accurate verification of the correction of noncompliance by both SEA and LEA staff. The system allows SEA and LEA staff members to view findings issued during and after FFY 2012, as well as deadlines for correction.

OSSE considers continued noncompliance with IDEA regulations when it selects LEAs for on-site monitoring, focused monitoring, or completion of self-assessments, all of which provide targeted opportunities for identification and correction of the root cause of noncompliance.

Verification of Correction of FFY 2011 noncompliance (either timely or subsequent):

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification.

Pursuant to OSEP Memorandum 09-02 dated October 17, 2008 (OSEP Memo 09-02), OSSE accounts for all instances of noncompliance. In determining the steps that the LEA must take to correct the noncompliance and document such correction, OSSE may consider a variety of factors. For any noncompliance concerning a child-specific requirement that is not subject to a specific timeline requirement, OSSE must also ensure that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA. In

addition, OSSE must ensure that each LEA has completed the required action (e.g. completed the evaluation although late).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2011:

For correction of noncompliance, OSSE ensured that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, by ensuring that each LEA has completed the required action (e.g. completed the evaluation although late). Additionally, OSSE deems that noncompliance is corrected when the LEA can demonstrate that it is correctly implementing the specific regulatory requirement for all students with IEPs. Specifically, OSSE corrects the findings of noncompliance when the LEA demonstrates, in a subsequent database pull, that it has achieved 100% compliance for initial evaluation timelines.

Correction of Remaining FFY 2010 Findings of Noncompliance:

1. Number of remaining FFY 2010 findings noted in OSEP's June 2013 FFY 2011 APR response table for this indicator	66
2. Number of remaining FFY 2010 findings the State has verified as corrected	59
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	7

Correction of Remaining FFY 2009 Findings of Noncompliance:

1. Number of remaining FFY 2009 findings noted in OSEP's June 2013 FFY 2011 APR response table for this indicator	8
2. Number of remaining FFY 2009 findings the State has verified as corrected	7
3. Number of remaining FFY 2009 findings the State has NOT verified as corrected [(1) minus (2)]	1

Verification of Correction of Remaining FFY 2009 and FFY 2010 findings:

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification.

Pursuant to OSEP Memorandum 09-02 dated October 17, 2008 (OSEP Memo 09-02), OSSE accounts for all instances of noncompliance. In determining the steps that the LEA must take to correct the noncompliance and document such correction, OSSE may consider a variety of factors. For any noncompliance concerning a child-specific requirement that is not subject to a specific timeline requirement, OSSE must also ensure that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA. In addition, OSSE must ensure that each LEA has completed the required action (e.g. completed the evaluation although late).

Specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009 and FFY 2010:

For correction of noncompliance, OSSE ensured that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, by ensuring that each LEA has completed the required action (e.g. completed the evaluation although late). Additionally, OSSE deems that noncompliance is corrected when the LEA can demonstrate that it is correctly implementing the specific regulatory requirement for all students with IEPs. Specifically, OSSE corrects the findings of noncompliance when the LEA demonstrates, in a subsequent database pull, that it has achieved 100% compliance for initial evaluation timelines.

OSSE notes that the 1 remaining findings identified in FFY 2009 are LEA-level findings that will remain open until an LEA is able to demonstrate 100% compliance with the regulatory requirements for initial evaluations in a subsequent reporting period.

Failure to correct longstanding noncompliance is figured into each LEA's annual determination results. A variety of penalties and corrective actions are built into OSSE's annual determination process for LEAs, including mandatory training and withholding of IDEA funding.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State's Response
Because the State reported less than 100% compliance for FFY 2011, the State must report on the status of correction of noncompliance identified in FFY 2011 for this indicator. The State must also demonstrate that the number of remaining uncorrected findings of noncompliance identified in FFY 2009 and FFY 2010 were corrected. When reporting on the correction of noncompliance, the State must report, in its FFY 2012 APR,	As noted above, OSSE reported on the status of correction of findings identified in FFY 2011. OSSE reported that it has verified correction of noncompliance reflected in the FFY 2009 and FFY 2010 data to the extent possible consistent with OSEP Memo 09-02.

that it has verified that each LEA with noncompliance identified in FFY 2009 and 2010: (1) is correctly implementing 34 CFR §300.301(c)(1) (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 completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY 2012 APR, the State must describe the specific actions that were taken to verify the correction.	
---	--

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES	
Improvement Activities	Timelines
Continue to provide training, technical assistance, and professional development to LEAs found noncompliant with Indicator 11 requirements.	Ongoing through June 30, 2013
Continue to evaluate LEA compliant to this indicator through data collection and focused monitoring and impose corrective action plans on LEAs found out of compliance.	Ongoing through June 30, 2013
Continue regular LEA meetings to review obligations and performance data related to timely evaluation, reevaluation and IEP development.	Ongoing through June 30, 2013
Continue issuance of LEA Planning and Performance Reports to assist LEAs with accessing their data related to evaluations and reevaluations to enhance overall management of special education processes.	Ongoing through June 30, 2013

Issue evaluation/reevaluation findings for Special Conditions reports.	Ongoing through June 30, 2013
Issue evaluation/reevaluation findings for quarterly database reviews.	Ongoing through June 30, 2013

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Measurement:

- a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.
- b. # of those referred determined to be NOT eligible and whose eligibilities were determined prior to their third birthdays.
- c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
- d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.
- e. # of children who determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays.

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

Percent = [(c) divided by (a – b – d – e)] times 100.

FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

96%

The actual calculation is as follows: $150 / (228 - 54 - 10 - 7) \times 100 = 96\%$

The State implemented a two phase plan to collect and report data for this indicator. The first phase included collecting data from Part C systems and completing a direct pull from existing Part B data systems. The second phase included a record review for the each of the students who did not have an IEP developed and implemented by their third birthdays, in order to determine the reason for delay.

Actual State Data (Numbers)

a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.	228
b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday	54
c. # of those found eligible who have an IEP developed and implemented by their third birthdays	150
d. # for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	10
e. # of children who were referred to Part C less than 90 days before their third birthdays.	7
# in a but not in b, c, d, or e.	7
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 Percent = $[(c) / (a-b-d-e)] * 100$	96%

Account for children included in a, but not in b, c, d, or e:

Seven (7) children who were served in Part C and referred to Part B for Part B eligibility determination did not have IEPs developed and implemented by their third birthdays.

Indicate the range of days beyond the third birthday and any reasons for the delay:

The range of days beyond the third birthday for a student to have an IEP developed and implemented is 4-157 days. The reasons for delay fall within two categories: LEA delay and parental delay.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

The actual data of 96% represents progress from OSSE's FFY 2010 actual data of 89%. OSSE did not meet its FFY 2012 target of 100%.

OSSE is pleased to note the District's continued progress related to this indicator. OSSE believes that the myriad of improvement activities that have occurred over the past several FFYs has had a significant impact on compliance with this indicator.

First, OSSE developed an Early Childhood Transition Policy that clarifies roles and responsibilities in the Early Childhood Transition Process, followed by issuance of Early Childhood Transition Guidelines detailing the steps LEAs should follow during the transition process. Second, Part C and Part B leadership instituted regular meetings to align their transition practices in a way that facilitates compliance. These revised procedures clarify specific roles and actions for each agency at all transition steps. Further, data sharing between Part C and Part B is now occurring seamlessly, as both data systems are able to export and import data in a common format.

Other factors impacting compliance included the continued improvement of the Special Education Data System (SEDS), which has yielded increasingly robust data. Training on the data systems is ongoing. In addition, OSSE has improved the quality of monitoring visits and data reviews and has revised its tracking of correction of noncompliance.

In FFY 2012, OSSE also continued to include Part C to Part B transition data in its LEA Planning and Performance management reports.

Correction of FFY 2011 Findings of Noncompliance (if State reported less than 100% compliance in its FFY 2011 APR):

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011 through June 30, 2012)	9
2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	5
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	4

Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

1. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	4
2. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	4
3. Number of FFY 2011 findings <u>not</u> verified as corrected [(1) minus (2)]	0

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

1. Number of FFY 2010 findings not timely corrected	2
2. Number of FFY 2010 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	1
3. Number of FFY 2010 findings <u>not</u> verified as corrected [(1) minus (2)]	1

Actions Taken if Noncompliance Not Corrected (FFYs 2011 and 2010):

OSSE requires submission of documentation showing the correction of noncompliance as soon as possible and in no case longer than one year from notification. In the initial notification, OSSE will include a deadline for submission of correction between 2 and 6 months from the date of notification. If noncompliance is not corrected with the first submission, OSSE monitors follow-up with the LEA to provide additional technical assistance on the requirements for correction. Following submission of documents which are insufficient to demonstrate correction, OSSE will issue a letter and updated report to the LEA contact detailing the remaining required corrections. In addition, OSSE enhanced its capacity through the development of a web-based compliance monitoring system that allows for timely and accurate verification of the correction of noncompliance by both SEA and LEA staff. The system allows SEA and LEA staff members to view findings issued during and after FFY 2012, as well as deadlines for correction.

OSSE considers continued noncompliance with IDEA regulations when it selects LEAs for on-site monitoring, focused monitoring, or completion of self-assessments, all of which provide targeted opportunities for identification and correction of the root cause of noncompliance.

Verification of Correction (either timely or subsequent) (FFYs 2011 and 2010):

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification.

Pursuant to OSEP Memorandum 09-02 dated October 17, 2008 (OSEP Memo 09-02), OSSE accounts for all instances of noncompliance. In determining the steps that the LEA must take to correct the noncompliance and document such correction, OSSE may consider a variety of factors. For any noncompliance concerning a child-specific requirement that is not subject to a specific timeline requirement, OSSE must also ensure that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA. In addition, OSSE must ensure that each LEA has completed the required action (e.g. completed the evaluation although late).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFYs 2011 and 2010:

For correction of noncompliance, OSSE ensured that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, by ensuring that each LEA has completed the required action (e.g. completed the evaluation although late). Additionally, OSSE deems that noncompliance is corrected when the LEA can demonstrate that it is correctly implementing the specific regulatory requirement for all students with IEPs. Specifically, OSSE corrects the findings of noncompliance when the LEA demonstrates, in a subsequent record sample, that it has achieved 100% compliance for the regulatory requirement.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State's Response
Because the State reported less than 100% compliance for FFY 2011, the State must report on the status of correction of noncompliance identified in FFY 2011 for this indicator. When reporting on the correction of	As noted above, OSSE reported on the status of correction of findings identified in FFY 2011. OSSE has verified that for one of two findings

<p>noncompliance, the State must report, in its FFY 2012 APR, that it has verified that each LEA with noncompliance identified in FFY 2010 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 2012 APR, the State must describe the specific actions that were taken to verify the correction.</p>	<p>of noncompliance identified in FFY 2010 for this indicator: The LEA (1) has corrected student-level noncompliance unless the child is no longer within the jurisdiction of the LEA; and (2) is correctly implementing the regulatory requirement (i.e., achieved 100% compliance) based on a review of updated data subsequently collected through on-site monitoring or a State data system consistent with OSEP Memo 09-02.</p> <p>OSSE reported that one of two findings of noncompliance identified in FFY 2010 remains open.</p>
---	--

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES	
Improvement Activities	Timelines
OSSE will continue to work with local education agencies to ensure early childhood transition meetings are held no less than 90 days prior to the child's third birthday.	Ongoing through June 30, 2013
OSSE will continue to provide training opportunities to LEAs and other public agencies to encourage parents to register their children and initiate the referral process at the early childhood transition meeting. These training sessions will take place annually during the summer months.	Ongoing through June 30, 2014
OSSE will continue to examine ways to more effectively integrate Part C and Part B data systems.	Ongoing through June 30, 2013
The 619 Coordinator will meet with local preschool early intervention programs on a monthly basis to review data and discuss areas where targets are not being met and request appropriate action to move toward improvement on this indicator.	Ongoing through June 30, 2013

CONTINUING IMPROVEMENT ACTIVITIES	
Improvement Activities	Timelines
OSSE will continue to provide LEA training series on ECT aligned with needs identified through internal workgroups and stakeholder summit, including the provision of guidance to LEAs to timely initiate the process of providing PWN and, as appropriate, obtaining parental consent.	Ongoing through June 30, 2013
OSSE Part C will hold parent transition orientation sessions to assist parents with effectively navigate the transition process	Ongoing through June 30, 2013

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

Measurement:

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

FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

40%

The actual target data was calculated as follows:

$$160/400 \times 100 = 40\%$$

Districts with

Year	Total number of youth aged 16 and above with an IEP	Total number of youth aged 16 and above with an IEP that meets the requirements	Percent of youth aged 16 and above with an IEP that meets the requirements
FFY 2012 (2012-2013)	400	160	40%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred in FFY 2012:

OSSE's actual target data of 40% represents progress from FFY 2011's actual target data of 28%. OSSE did not meet its measurable and rigorous target of 100%.

As a result of a determination by the U. S. Department of Education that the District of Columbia "needs intervention", based in part on the District's noncompliance in the area of secondary transition, OSSE was required to complete a random sampling of at least 100 IEPs from all LEAs of youth aged 16 and above to be reviewed for secondary transition content. (OSSE randomly selected the IEPs equitably among LEAs based on the percentage of students with IEPs in this age range served by each LEA, relative to the total number of students with IEPs in the age range in the District of Columbia, during the quarter under review.)

OSSE monitored the FFY 2012 secondary transition data in accordance with the procedure outlined above 4 times:

FFY 12 Quarter	Date Review Completed	Date Findings Released to LEAs	Overall Percent Compliant
Q1 (July 12-Sept 12)	October 19, 2012	July 15, 2013	38%
Q2 (Oct 12-Dec 12)	January 18, 2013	July 15, 2013	45%
Q3 (Jan 13-March 13)	April 19, 2013	July 15, 2013	34%
Q4 (Apr 13-June 13)	July 18, 2013	August 26, 2013	43%
Overall FFY 12 Compliance Rate:			40%

OSSE notes that due to a series of technical difficulties which were subsequently resolved, all findings resulting from FFY 12 secondary transition monitoring were released during 2013 as indicated in the chart above.

OSSE attributes the progress on this indicator to the intensive ongoing monitoring, training, and technical assistance provided to LEAs to support compliance. In FFY 2012, OSSE continued to offer a robust secondary transition training series, supported through the District's secondary transition Community of Practice (CoP). In addition, OSSE provided internal training to compliance monitors to support clear instruction and communication with LEAs around compliance with secondary transition requirements. OSSE also met with LEAs and discussed special conditions requirements, and highlighted the District's focus on meeting the regulatory requirements related to secondary transition.

Correction of FFY 2011 Findings of Noncompliance:

Level of compliance (actual target data) State reported for FFY 2011 for this indicator: 28%

1. Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011 through June 30, 2012)	682
2. Number of FFY 2011 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	553
3. Number of FFY 2011 findings <u>not</u> verified as corrected within one year [(1) minus (2)]	129

Correction of FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	129
5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	116
6. Number of FFY 2011 findings <u>not</u> yet verified as corrected [(4) minus (5)]	13

Actions Taken if Noncompliance Not Corrected:

OSSE requires submission of documentation showing the correction of noncompliance as soon as possible and in no case longer than one year from notification. OSSE issues findings of noncompliance using the District of Columbia Corrective Action Tracking System (DC CATS). DC CATS allows SEA and LEA staff members to view findings issued during and after FFY 2012, as

well as deadlines for correction. If noncompliance is not properly corrected by the LEA's first submission, OSSE compliance monitors follow-up with the LEA to provide additional technical assistance on the requirements for correction.

To determine the root cause of continued noncompliance, OSSE compliance monitors reviewed open findings of noncompliance that were more than one year old. Based on consistently late dates of submission of initial correction, OSSE determined that several LEAs were not fully aware that both Prong I and Prong II corrections had to be made within the one-year timeline. OSSE took the following steps to address this issue. First, OSSE added language and a flow chart to the 2013-14 monitoring manual that strengthened the description of the timeline for correction of noncompliance including both Prong I and Prong II corrections. Second, in the initial notification of noncompliance through DC CATS, OSSE includes an initial deadline of 90 days from notification for submission of correction. The initial 90 day submission timeline is recorded in DC CATS, and the dates marking 30, 60, and 90 days from notification are provided to LEA users to encourage timely correction of noncompliance. Finally, in meetings with LEAs at the beginning of the 2013-2014 school year, OSSE's compliance monitors provided technical assistance to LEA staff about their responsibility to ensure that Prong I corrections were made in such time that sufficient time remained to perform Prong II corrections.

To determine appropriate enforcement actions to take when an LEA fails to correct longstanding noncompliance, OSSE considers continued noncompliance with IDEA regulations when it selects LEAs for on-site monitoring, focused monitoring, or completion of self-assessments, all of which provide targeted opportunities for identification and correction of the root cause of noncompliance.

Verification of Correction (either timely or subsequent):

Pursuant to OSEP Memorandum 09-02 dated October 17, 2008 (OSEP Memo 09-02), OSSE accounts for all instances of noncompliance, and with the identification of any finding of noncompliance, informs LEAs that all noncompliance must be corrected as soon as possible, but in no case more than one year from the date of notification. In determining the steps that the LEA must take to correct the noncompliance and document such correction, OSSE may consider a variety of factors. For any noncompliance concerning a child-specific requirement, OSSE ensures that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA. In addition, OSSE also ensures that the LEA has completed each required action (e.g. completed the evaluation although late).

Correction of Remaining FFY 2010 Findings of Noncompliance (if applicable):

1. Number of remaining FFY 2010 findings noted in OSEP's July 1, 2013 FFY 2011 APR response table for this indicator	69
2. Number of remaining FFY 2010 findings the State has verified as corrected	55

3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	14
--	-----------

OSSE requires submission of documentation showing the correction of noncompliance as soon as possible and in no case longer than one year from notification. OSSE issues findings of noncompliance using the District of Columbia Corrective Action Tracking System (DC CATS). DC CATS allows SEA and LEA staff members to view findings issued during and after FFY 2012, as well as deadlines for correction. If noncompliance is not properly corrected by the LEA's first submission, OSSE compliance monitors follow-up with the LEA to provide additional technical assistance on the requirements for correction.

To determine the root cause of continued noncompliance, OSSE compliance monitors reviewed open findings of noncompliance that were more than one year old. Based on consistently late dates of submission of initial correction, OSSE determined that several LEAs were not fully aware that both Prong I and Prong II corrections had to be made within the one-year timeline. OSSE took the following steps to address this issue. First, OSSE added language and a flow chart to the 2013-14 monitoring manual that strengthened the description of the timeline for correction of noncompliance including both Prong I and Prong II corrections. Second, in the initial notification of noncompliance through DC CATS, OSSE includes an initial deadline of 90 days from notification for submission of correction. The initial 90 day submission timeline is recorded in DC CATS, and the dates marking 30, 60, and 90 days from notification are provided to LEA users to encourage timely correction of noncompliance. Finally, in meetings with LEAs at the beginning of the 2013-2014 school year, OSSE's compliance monitors provided technical assistance to LEA staff about their responsibility to ensure that Prong I corrections were made in such time that sufficient time remained to perform Prong II corrections.

OSSE's review of the data revealed an additional root cause of longstanding noncompliance: LEA level "Prong II placeholder" findings. 12 of the 14 findings remaining from FFY 2010 are LEA level findings which are not associated with any individual student. These findings were used as a "Prong II placeholder." Under OSSE's counting system, as LEAs received student level findings, OSSE also recorded a Prong II placeholder finding. Individual student level findings were cleared as sufficient evidence of correction was submitted by the LEA, but to clear a secondary transition Prong II placeholder, an LEA must first clear out all student level noncompliance, and then demonstrate 100% compliance in a subsequent quarterly data pull. As the District is still growing the capacity to produce compliant secondary transition plans, achieving 100% compliance in a subsequent quarterly pull has proven to be difficult for some LEAs. Starting with FFY 2013, OSSE will no longer use a Prong II placeholder finding. Instead, between quarterly pulls, OSSE will perform a Prong II review on each LEA using 3-5 files, or more files, if the initial compliance review indicates a deeper review is necessary. OSSE believes that these inter-quarter additional Prong II file reviews will help the District make significant improvement with closure of findings of longstanding noncompliance.

To determine appropriate enforcement actions to take when an LEA fails to correct longstanding noncompliance, OSSE considers continued noncompliance with IDEA regulations when it selects LEAs for on-site monitoring, focused monitoring, or completion of self-assessments, all of which provide targeted opportunities for identification and correction of the root cause of noncompliance.

Verification of Correction of Remaining FFY 2010 findings:

Pursuant to OSEP Memorandum 09-02 dated October 17, 2008 (OSEP Memo 09-02), OSSE accounts for all instances of noncompliance, and with the identification of any finding of noncompliance, informs LEAs that all noncompliance must be corrected as soon as possible, but in no case more than one year from the date of notification. In determining the steps that the LEA must take to correct the noncompliance and document such correction, OSSE may consider a variety of factors. For any noncompliance concerning a child-specific requirement, OSSE ensures that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA. In addition, OSSE also ensures that each required action is completed (e.g. completed the evaluation although late).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2010:

OSSE compliance monitors reviewed every open finding of noncompliance in the area of secondary transition from FFY 2010. LEAs were contacted and open findings were discussed with LEA and school-level staff. Assistance with interpretation of regulatory requirements, correction of findings, and use of the DC CATS system for uploading proof of corrections was offered to each LEA.

Correction of Any Remaining Findings of Noncompliance from FFY 2009 or Earlier (if applicable):

1. Number of remaining FFY 2009 findings noted in OSEP's July 1, 2013 FFY 2011 APR response table for this indicator	14
2. Number of remaining FFY 2009 findings the State has verified as corrected	7
3. Number of remaining FFY 2009 findings the State has NOT verified as corrected [(1) minus (2)]	7

Actions Taken if Noncompliance Not Corrected:

OSSE's review of the data revealed the root cause of all longstanding noncompliance associated with this indicator from FFY 2009: LEA level "Prong II placeholder" findings. 7 of the 7 findings remaining from FFY 2010 are LEA level findings which are not associated with any individual

student. These findings were used as a “Prong II placeholder.” Under OSSE’s counting system, as LEAs received student level findings, OSSE also recorded a Prong II placeholder finding. Individual student level findings were cleared as sufficient evidence of correction was submitted by the LEA, but to clear a secondary transition Prong II placeholder, an LEA must first clear out all student level noncompliance, and then demonstrate 100% compliance in a subsequent quarterly data pull. As the District is still growing the capacity to produce compliant secondary transition plans, achieving 100% compliance in a subsequent quarterly pull has proven to be difficult for some LEAs. Starting with FFY 2013, OSSE will no longer use a Prong II placeholder finding. Instead, between quarterly pulls, OSSE will perform a Prong II review on each LEA using 3-5 files, or more files, if the initial compliance review indicates a deeper review is necessary. OSSE believes that these inter-quarter additional Prong II file reviews will help the District make significant improvement with closure of findings of longstanding noncompliance.

Verification of Correction of Remaining FFY 2009 findings:

Pursuant to OSEP Memorandum 09-02 dated October 17, 2008 (OSEP Memo 09-02), OSSE accounts for all instances of noncompliance, and with the identification of any finding of noncompliance, informs LEAs that all noncompliance must be corrected as soon as possible, but in no case more than one year from the date of notification. In determining the steps that the LEA must take to correct the noncompliance and document such correction, OSSE may consider a variety of factors. For any noncompliance concerning a child-specific requirement, OSSE ensures that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA. In addition, OSSE also ensures that each LEA has completed the required action (e.g. completed the evaluation although late).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:

OSSE compliance monitors reviewed every open finding of noncompliance in the area of secondary transition from FFY 2009. LEAs were contacted and open findings were discussed with LEA and school-level staff. Assistance with interpretation of regulatory requirements, correction of findings, and use of the DC CATS system for uploading proof of corrections was offered to each LEA. All FFY 2009 student-level findings have now been closed. The 7 remaining FFY 2009 findings are LEA level findings which will close when the LEAs demonstrate 100% compliance in a subsequent (Prong II) pull of the data.

Additional Information Required by the OSEP APR Response Table for this Indicator (if applicable):

Statement from the Response Table	State’s Response
The State must report on the status of	As reported above, 98%, or 669 of the 682

correction of noncompliance identified in FFY 2011 for this indicator.	findings made in FFY 2011 are now closed. 13 findings from FFY 2011 remain open.
The State must demonstrate that the remaining 69 uncorrected findings from FFY 2010 and 14 uncorrected findings from FFY 2009 were corrected.	As reported above, 55 of 69 uncorrected findings from FFY 2010 are now closed. 14 findings remain. Seven of 14 findings from FFY 2009 are now closed. Seven findings remain, all 7 are LEA-level findings. There are no student-level findings of noncompliance open from FFY 2009 for this indicator.
The State must report that it has verified that each LEA with findings of noncompliance identified in FFYs 2011, 2010, and 2009 is correctly implementing the specific regulatory requirements based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and has corrected each individual case of noncompliance unless the student is no longer within the jurisdiction of the LEA consistent with OSEP Memo 09-02.	<p>As reported above, OSSE reviewed corrections for each student-level finding to ensure that LEAs have corrected each case of student noncompliance for all students still within the jurisdiction of the LEA. In addition, OSSE used each subsequent quarterly data review to serve as the Prong II data check to determine that LEAs were correctly implementing the regulatory requirements.</p> <p>While some LEAs have been able to achieve 100% compliance in a subsequent quarterly data pull, there are some LEAs that have not yet achieved 100% compliance in a subsequent quarter. That means in each following quarter these LEAs were assessed an additional LEA-level finding for this indicator. As a result, from FFY 2009-2011, there are a total of 29 outstanding LEA-level findings, and 12 of those 29 LEA-level findings are from 3 LEAs who have been unable to achieve 100% compliance on a subsequent data review. The LEA-level findings continued to “stack” quarter after quarter for these 3 LEAs.</p> <p>In most cases, the LEAs have worked hard to correct outstanding student-level noncompliance. In order to ensure that progress throughout the District is fairly reflected in our data, OSSE will begin performing an additional Prong II data pull between quarters using a sample of 3-5 files</p>

	per LEA (or more if the initial data require a deeper look at compliance issues.) While all student-level noncompliance must be closed prior to the closure of LEA-level findings, OSSE believes engaging in additional Prong II activities will allow for the closure of a substantial portion of the outstanding noncompliance for this indicator.
--	--

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING ACTIVITIES		
Improvement Activities	Timelines	Resources
Provide ongoing technical assistance and support	Ongoing through June 30, 2013	OSSE Training & Technical Assistance staff and contractors
Conduct professional development and training activities	Ongoing through June 30, 2013	OSSE Training & Technical Assistance staff and contractors
Collect monitoring data quarterly	Ongoing through June 30, 2013	OSSE Quality Assurance and Monitoring staff
Convene Community of Practice for secondary transition meetings	Ongoing	OSSE staff and community stakeholders
Develop and maintain State-level secondary transition resource site on web page	Ongoing through June 30, 2013	DSE Leadership, Special Assistant, Parent and Community Relations
Identify, through collaboration with the Secondary Transition Community of Practice, list of State- recommended transition assessments; maintain list annually to reflect research-based information	Ongoing through June 30, 2013	Director, TTA

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: Effective General Supervision Part B / Effective Transition

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

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

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

Measurement:

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

FFY	Measurable and Rigorous Target
2012	<p>A. 27% of youth who are no longer in secondary school enrolled in higher education within one year of leaving high school.</p> <p>B. 51% of youth who are no longer in secondary school enrolled in higher</p>

	<p>education or competitively employed within one year of leaving high school.</p> <p>C. 64% of youth who are no longer in secondary school 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.</p>
--	--

Actual Target Data for FFY 2012:

The actual numbers use to calculate the target data were as follows:

There were a total of 297 students identified through data matches.

4. 224 leavers were enrolled in higher education
5. 23 leavers were engaged in competitive employment
6. 50 leavers were engaged in some other employment and not counted in 1 or 2

Measurement A: 23.24%

The actual target data was calculated as follows: $224 / 964 * 100 = 23\%$

Measurement B: 25.62%

The actual target data was calculated as follows: $224+23/964*100 = 26\%$

Measurement C: 30.81%

The actual target data was calculated as follows: $224+23+50/964*100 = 31\%$

Data Source:

For Indicator 14, the SEA must examine data for students who left school during 2011-2012 so that at least one year has passed since the students left school. The cohort of youth who had IEPs and are no longer in secondary school was determined using exit codes and appearance in monthly enrollment snapshots.

The data used to calculate Measurement A, B and C was supplied to OSSE by the National Student Clearinghouse, the DC TAG program, and the Jacob France Institute.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

While OSSE's FFY 2012 actual target data for this indicator represents slippage from OSSE's FFY 2011 reported data, OSSE believes that this is due to a much more robust data sample.

In past years OSSE has contracted with an outside vendor to collect and analyze this data. In FFY 2011 OSSE reported an overall response rate of 23%, 149 of 647 students who were contacted.

For FFY 2012, because of the increased availability of post- secondary outcome data housed within the State Longitudinal Data System (SLED) and related databases, OSSE revised its approach and used a data matching technique to calculate this indicator. OSSE triangulated enrollment data sets for FFY 2012 from the District of Columbia Tuition Assistance Grant program, the National Student Clearing House, and the Jacob France Institute to determine the status of 964 students who left high school in the 2012-2013 school year. This was a significant increase to the data set on which calculations of measurements were made.

Thus while the actual target data for FFY 2012 represents slippage from FFY 2011, OSSE believes data collected using the data matching technique is more representative of students' post-secondary outcomes in the District of Columbia than prior methodologies.

In FFY 2012, OSSE continued to focus on improving outcomes for transition age students through quarterly monitoring of LEAs, high quality training and technical assistance, and support by the Districts secondary transition Community of Practice.

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Secondary Transition Monitoring Pursuant to OSSE's Special Conditions Requirements: The Monitoring and Compliance Unit began regular monitoring of 100 IEPs of students aged 16 or older to ensure compliance with requirements related to secondary transition content.	Ongoing through June 30, 2013	Director, Monitoring and Compliance Unit; Monitoring and Compliance staff
Implementation of a Training Series to Support Secondary Success: The DSE's Training and Technical Assistance (TTA) Unit facilitated a robust training series in SY 2009-2010 which will continue annually through 2013. This LEA training series includes trainings	Ongoing through June 30, 2013	Director, TTA Unit; TTA staff; contractors

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
<p>specifically designed to ensure the success of students in secondary grades. Specifically, the training series includes the following training content:</p> <ul style="list-style-type: none"> • Developing measurable annual goals and objectives for transition services utilizing SEDS • Integrating best practices for addressing the needs of students with IEPs into professional learning and teaching activities • Determining student progress at the secondary level • Implementing an effective Response to Intervention (RTI) framework in secondary schools • Developing and implementing research-based secondary school reading interventions • Identifying programs and activities that will help students reach their post-secondary school goals by linking graduation, dropout, secondary transition, and post-school outcomes to drive student improvement • Providing technical assistance on the 15 Strategies for Dropout Prevention from the National Dropout Center 		
<p>Completion and Implementation of a State Action Plan: This Community of Practice has met 3 times to continue the work related to ensuring that student's with opportunities can access a regular or alternate diploma and are well-prepared for transition to life beyond high school. The team is also in the process of developing a State Action Plan and will implement the plan upon completion.</p>	Ongoing through June 30, 2013	Director, TTA Unit; DSE Leadership team
Provide parent and student fliers for	Ongoing	Director, TTA Unit; Assistant

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
distribution.	through June 30, 2013	Superintendent
Provide reminder to LEAs regarding obligation to update contact information prior to end of school year to increase accuracy of contact information to increase response rates.	Ongoing through June 30, 2013	Director, TTA Unit; Assistant Superintendent

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 15: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

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

Measurement:

Percent of noncompliance corrected within one year of identification:

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

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

States are required to use the “Indicator 15 Worksheet” to report data for this indicator

(see Attachment 1).

FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

77%

Describe the process for selecting LEAs for Monitoring:

The goal of OSSE’s Monitoring and Compliance System is to ensure that LEAs are meeting the requirements of both federal and local regulations. In alignment with federal regulations and OSSE’s Vision, and OSSE’s monitoring approach is outcome oriented. However, if

noncompliance is identified through any of OSSE's monitoring activities, OSSE will require the LEA to correct the noncompliance as soon as possible but in no case later than one year after the identification of the noncompliance.

OSSE employs a number of monitoring activities to ensure compliance with federal and local regulations and improve educational results and functional outcomes for students with IEPs. Monitoring activities include: database reviews, on-site compliance monitoring, record reviews, on-site focused monitoring, dispute resolution activities, LEA self-studies, Phase I and Phase II grant applications, and reviews of audit findings.

Database Reviews: In accordance with the APR reporting requirements, OSSE reviews data in the Special Education Data System (SEDS) and related State systems to identify noncompliance and assess progress toward federal and local targets for special education. Data for special conditions reporting is reviewed quarterly for all LEAs. (Only LEAs serving students 15 years and older are monitored for secondary transition requirements.)

On-site Compliance Monitoring: Annually, OSSE conducts on-site compliance monitoring for a selection of LEAs and public agencies that provide special education services to District of Columbia students. This process includes record reviews and interviews to identify noncompliance and assess progress toward federal and local targets for special education. LEAs and public agencies are selected for an on-site compliance monitoring at a minimum of once every five years, with additional visits based on the consideration and evaluation of the following factors:

- Information provided as a result of LEA self-assessments;
- Information provided in the LEA's most recent Phase I and Phase II Grant Application;
- Level of compliance on the prior year's APR Indicators 4A, 4B, 9, 10, 11, 12 and 13;
- Level of compliance on data reported in OSSE's special conditions reports;
- Number of HODs/SAs not timely implemented;
- Number of State complaints filed against the LEA in the past year;
- Number of students in the LEA placed in a more restrictive setting during the past school year;
- Timely submission of data (programmatic and fiscal) to OSSE;
- Number of requests for reimbursement not approved by OSSE;
- Number of students served by the LEA;
- Date of last on-site monitoring visit; and
- Other Information available to OSSE.

Nonpublic Monitoring: OSSE is committed to ensuring that students educated in nonpublic settings are placed in the least restrictive environment; are receiving proper positive behavior supports; and are receiving appropriate services, including specialized instruction and transition services. Pursuant to D.C. Code §38-2561.07, nonpublic schools, applying for a Certificate of Approval (COA), shall receive an evaluation including an on-site inspection of the operations and facilities of the school or program. OSSE shall conduct an on-site inspection at least once

during the period of the COA and may schedule other inspections as deemed necessary. The LEA responsible for the student placed in the nonpublic school is responsible for ensuring that the nonpublic school is compliant with federal and local rules and regulations. Therefore, should noncompliance be identified during a nonpublic review, the responsible LEA will receive notice of the findings of noncompliance and be accountable for correcting the noncompliance as soon as possible but in no case later than one year from the identification of noncompliance.

On-site Focused Monitoring: Focused monitoring purposefully selects priority areas to examine for compliance and results, while not specifically examining other areas for compliance, in order to maximize resources, emphasize important variables, and increase the probability of improved results. OSSE may choose to conduct an on-site focused monitoring visit in lieu of an on-site compliance monitoring visit if the LEA has demonstrated that it is in compliance with the regulatory requirements described in the Compliance Monitoring Areas.

Dispute Resolution Activities: The State complaint and due process processes are designed to resolve disputes between LEAs and parents (or organization or individual in the case of State complaints). In the fact finding stages of each of these processes, the investigator or hearing officer may identify noncompliance by the LEA. In the case of State complaints, findings of noncompliance are identified in the Letter of Decision. In the case of due process complaints, findings of noncompliance are identified in the Hearing Officer Decision.

Phase I and Phase II Grant Applications: Grant applications submitted by LEAs include important assurances by the LEA that the LEA is in compliance with IDEA Part B regulations. In signing the assurances contained in the Phase I Application, LEAs attest that students within the LEA are receiving a free appropriate public education and that the LEA is properly using IDEA funds. Should an LEA not be able to provide these assurances, or a date by which the LEA will be in compliance, OSSE may not be able to timely distribute funds to the LEA.

Audit Findings Review: LEAs that spend \$500,000 or more in federal funds are required to receive an A-133 single audit and submit a copy of the management letter to OSSE within 30 days of receipt. Additionally, the District of Columbia Public Charter School Board (PCSB) requires all public charter schools in the District to receive an annual audit regardless of level of expenditures. Any noncompliance identified through audits must be corrected in accordance with the audit report.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2012:

OSSE's actual target data of 77% represents progress from FFY 2011 actual target data of 61%. OSSE did not meet its measurable and rigorous target of 100%.

Improvement Activities: OSSE's compliance team examined the open findings over FFYs 09, 10, and 11, and determined that a significant part of the District's untimely uncorrected noncompliance was attributable to failure to properly complete both Prong I and Prong II corrections within one year of issuance of the finding of noncompliance consistent with OSEP

memo 09-02. In an effort to address this problem, OSSE continued to develop new and improved systems for tracking findings of noncompliance, recording evidence of correction of individual instances of noncompliance, and ensuring that LEAs are subsequently implementing regulatory requirements consistent with OSEP Memo 09-02. For example, OSSE updated the annual compliance monitoring handbook to include more explanation of LEA responsibilities to ensure that both Prong I and Prong II corrections were completed as soon as possible, but in no case more than one year from the date of identification of the finding. OSSE also created a flow-chart for LEAs to help with understanding of the process of correcting noncompliance. In addition, OSSE invited all LEAs to attend a meeting where information and technical assistance on the correction of noncompliance in accordance with OSEP memo 09-02, and the relationship between longstanding noncompliance and the District's annual determination level were provided.

OSSE continued to enhance the District's capacity to track and timely correct findings of noncompliance through the development of a web-based compliance monitoring system, District of Columbia Corrective Action Tracking System (DC-CATS). DC CATS assists SEA and LEA staff with timely and accurate verification of the correction of noncompliance by providing clear tracking of timelines for each finding of noncompliance, and by consolidating many compliance monitoring functions into one system. This investment demonstrates the District's continued commitment to ensuring that LEAs have the tools needed to meet their obligation to ensure that identified noncompliance is corrected as soon as possible and in no case later than one year after the date of the State's identification of the noncompliance (i.e., written notification to the LEA of the noncompliance).

OSSE began issuing findings of noncompliance made as part of quarterly database reviews through an online system, the District of Columbia Corrective Action Tracking System (DC-CATS), in fall 2012. On-site reports for LEAs and nonpublic schools are now also made available via DC-CATS. In addition to supporting the accurate and efficient utilization of data gathered via compliance monitoring, OSSE plans to support LEA efforts to correct identified noncompliance within required timelines through the development of dashboards which detail outstanding findings and list remaining requirements for correction.

Additional DC-CATS functionality to support the issuance of findings made for significant discrepancy, disproportionate representation, and through State complaints are slated for release in DC-CATS later in the 2013 – 2014 school year. Finally, OSSE plans to develop a self-assessment tool in DC-CATS which will enable LEAs to evaluate student files and other processes and take proactive steps to improve compliance and results for students with IEPs.

OSSE continues to host annual LEA monitoring training, issue an annual LEA monitoring calendar, and conduct pre-monitoring site visits with LEAs identified for on-site monitoring. These activities continue to ensure that LEAs are aware of the process for correction of noncompliance in accordance with OSEP Memorandum 09-02. OSSE offers LEAs regular opportunities for training and technical assistance throughout the school year via the

designation of dedicated State points of contact and a robust training calendar provided via the DSE Training and Technical Assistance Team.

Explanation of Progress: OSSE attributes progress in the area of timely correction of noncompliance to several factors, including enhanced internal training with OSSE compliance monitors which emphasized the role of the SEA, the purpose and scope of a system of general supervision, and the requirement to correct noncompliance in accordance with OSEP Memo 09-02. In addition, the increased use of the DC CATS platform makes tracking of findings and corrections more streamlined and easier for both SEA and LEA staff to manage. Finally, the compliance unit's increased outreach to LEAs and provision of enhanced materials, information, and technical assistance regarding noncompliance and the requirements for correction helped to increase LEA knowledge of their duty to correct noncompliance in accordance with OSEP Memo 09-02.

Timely Correction of FFY 2011 Findings of Noncompliance (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified in FFY 2011 (the period from July 1, 2011 through June 30, 2012) (Sum of Column a on the Indicator B15 Worksheet)	2892*
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding) (Sum of Column b on the Indicator B15 Worksheet)	2230
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	662

*OSSE notes that the 2,892 findings reported on line 1 above represents an increase of 9 findings from the last total reported to OSEP in OSSE's special conditions submission of November, 2013. Line 2 also differs from the numbers reported in the special conditions report. The number given on line 2 represents an increase of 14 findings. The increase in these lines is due to OSSE's discovery that findings made through the Indicator 4B self-study process and Indicators 9 and 10 disproportionate representation self-study process had not been included in the original totals. In addition, during the APR clarification period OSSE determined that 1 additional dispute resolution finding was corrected timely.

FFY 2011 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance and/or Not Corrected):

4. Number of FFY 2011 findings not timely corrected (same as the number from (3) above)	662
---	------------

5. Number of FFY 2011 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	620
6. Number of FFY 2011 findings <u>not</u> yet verified as corrected [(4) minus (5)]	42

**Verification of Correction for findings of noncompliance identified in FFY 2011
(either timely or subsequent):**

OSEP Memo 09-02, issued on October 17, 2008, provided guidance regarding the correction of previously identified noncompliance. Specifically, OSEP Memo 09-02 established that States must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification. OSSE used the process described below to verify that each LEA with noncompliance identified in FFY 2011 has corrected each individual case of noncompliance (unless the child is no longer within the jurisdiction of the LEA), and is correctly implementing the specific regulatory requirements based on a review of updated data.

Pursuant to OSEP Memorandum 09-02 dated October 17, 2008 (OSEP Memo 09-02), OSSE accounts for all instances of noncompliance. In determining the steps that the LEA must take to correct the noncompliance and document such correction, OSSE may consider a variety of factors. For any noncompliance concerning a child-specific requirement, OSSE ensures that the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA. In addition, OSSE ensures that each LEA has completed the required action (e.g. completed the evaluation although late).

OSSE makes both student level and LEA level findings of noncompliance through its various monitoring activities. Noncompliance is corrected when the LEA can demonstrate that the required corrections for each student-level finding are implemented, all other required corrective actions are implemented, and that it is correctly implementing the specific regulatory requirement for all students with IEPs based on a subsequent (100% compliant) review of data. After the LEA has certified correction of noncompliance, OSSE verifies the correction of noncompliance.

Prong 1: To verify the correction of individual findings of noncompliance, OSSE reviews the original student files to verify that the required corrective action has been completed unless the child is no longer within the jurisdiction of the LEA. For LEA-level findings (not individual or student level findings), OSSE reviews and verifies that the LEA has made corrections that are compliant with the applicable IDEA regulations.

Prong 2: To verify correction implementation of the regulatory requirement within the LEA, OSSE selects an updated sample of student files to verify that the LEA is properly implementing the regulatory requirement. Correction of noncompliance is complete when the LEA can demonstrate that 100% of files reviewed during this updated data review are compliant with the specific regulatory requirement. OSSE reviews a subsequent sample of updated files to verify correction for Prong 2 based on the total

number of students with IEPs, however, OSSE may choose to review additional files at its discretion.

Pursuant to OSEP Memo 09-02, OSSE must verify the correction of noncompliance within one year of the identification of the noncompliance; therefore, verification activities occur before the conclusion of the one-year timeline.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2011 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):

Each monitoring report outlines the specific student level and LEA level corrective actions that must be taken to correct any identified noncompliance. Following the LEA's submission of documentation of correction of noncompliance, OSSE verified the correction of noncompliance and notified the LEA of the verified correction. Once all individual and/or LEA level findings of noncompliance were verified as corrected, OSSE reviewed additional data to confirm that the LEA was correctly implementing the specific regulatory requirement. If the LEA demonstrated 100% compliance on the regulatory requirement during the review of additional data, then OSSE considered the correction of noncompliance to be complete. In cases where additional noncompliance was found during the additional (Prong II) file review, OSSE required the LEA to correct the additional noncompliance discovered during the subsequent data review prior to proceeding with Prong II verification.

Actions Taken if Noncompliance Not Corrected

OSSE requires submission of documentation showing the correction of noncompliance as soon as possible and in no case longer than one year from notification. In the initial notification of a finding of noncompliance, The DC CATS system includes 30, 60 and 90 day deadlines for the submission of correction from the LEA. If noncompliance is not corrected with the first submission, OSSE monitors follow-up with the LEA to provide technical assistance on the requirements for correction.

OSSE considers continued noncompliance with IDEA regulations when it selects LEAs for on-site monitoring, focused monitoring, or completion of self-assessments, all of which provide targeted opportunities for identification and correction of the root cause of noncompliance. In addition, the timely correction of noncompliance is included in OSSE's rubric for annual LEA determinations. OSSE imposes a series of progressive sanctions for LEAs not meeting requirements.

Correction of Remaining FFY 2010 Findings of Noncompliance:

1. Number of remaining FFY 2010 findings noted in OSEP's FFY 2011 APR response table for this indicator	1,111
2. Number of remaining FFY 2010 findings the State has verified as	469

corrected	
3. Number of remaining FFY 2010 findings the State has NOT verified as corrected [(1) minus (2)]	642

OSSE requires submission of documentation showing the correction of noncompliance as soon as possible and in no case longer than one year from notification. OSSE requires correction to be made in accordance with OSEP Memo 09-02, to include LEA correction and OSSE verification of each individual case of noncompliance (unless the student is no longer within the jurisdiction of the LEA), and that the LEA demonstrate that it is correctly implementing the specific regulatory requirements (achieve 100% compliance) based on a review of updated data. To determine the root cause of continued noncompliance, OSSE compliance monitors reviewed open findings of noncompliance that were more than one year old. Based on consistently late dates of submission of initial correction, OSSE determined that several LEAs were not fully aware that both Prong I corrections and Prong II verification activities had to be made within the one-year timeline.

OSSE took the following step to revise its system of general supervision to ensure timely correction of noncompliance: First, OSSE provided in-depth training on Prong I and Prong II of the correction of noncompliance process to all OSSE compliance monitoring staff. Second, OSSE added language and a flow chart to the 2013-14 monitoring manual that strengthened the description of the timeline for correction of noncompliance including both Prong I and Prong II. Third, in the initial notification of noncompliance through DC CATS, OSSE includes initial deadlines of 30, 60, and 90 days from notification for submission of correction. The initial 90 day submission timeline is recorded in DC CATS, and the dates marking 30, 60, and 90 days from notification are provided to LEA users to encourage timely correction of noncompliance. Finally, in meetings with LEAs at the beginning of the 2013-2014 school year, OSSE's compliance monitors provided technical assistance to LEA staff about their responsibility to ensure that Prong I corrections were made in such time that sufficient time remained to perform Prong II corrections.

OSSE's review of the data revealed an additional root cause of longstanding noncompliance: "Prong II LEA level" findings. Under OSSE's counting system, as LEAs received student level findings, OSSE also recorded a Prong II LEA level finding. Individual student level findings were closed as sufficient evidence of correction was submitted by the LEA, but to clear a Prong II LEA level finding, an LEA must first correct all student level noncompliance, and then demonstrate 100% compliance in a subsequent data pull. Clearing Prong II LEA level findings has proven to be difficult, especially in those areas for which the District of Columbia has special conditions attached to its IDEA funding. For example, the District is still growing the capacity to produce compliant secondary transition plans, and averaged 40% compliance with the regulatory requirements in that area during FFY 2012. While District of Columbia LEAs are making great improvement in their compliance rates, achieving 100% compliance in a subsequent quarterly pull has proven to be difficult for some LEAs. Under OSSE's old system, a new Prong II LEA level finding was issued to the LEA every quarter, leading to higher levels of longstanding

noncompliance for the District, and the loss of points on the District's determination despite continued improvement in special education services. To address this problem, OSSE has taken the following step to revise its system of general supervision to ensure timely correction of noncompliance: starting with FFY 2013, OSSE will no longer use a Prong II placeholder finding. Instead, between quarterly pulls, OSSE will perform a Prong II review on each LEA using 3-5 files, or more files, if the initial compliance review indicates a deeper review is necessary. For monitoring activities that occur annually, or on a schedule that is less frequent than the quarterly data base pulls, OSSE will no longer close findings until the LEA demonstrates 100% compliance on a subsequent review of updated data. OSSE believes that emphasizing the importance of timely closure of noncompliance and additional inter-quarter Prong II file reviews will help the District make significant improvement with closure of findings of longstanding noncompliance.

To determine appropriate enforcement actions to take when an LEA fails to correct longstanding noncompliance, OSSE considers continued noncompliance with IDEA regulations when it selects LEAs for on-site monitoring, focused monitoring, or completion of self-assessments, all of which provide targeted opportunities for identification and correction of the root cause of noncompliance.

Correction of Any Remaining Findings of Noncompliance identified in FFY 2009 or Earlier:

Provide information regarding correction using the same table format provided above for any remaining findings identified in FFY 2009 or earlier.

1. Number of remaining FFY 2009 findings noted in OSEP's FFY 2011 APR response table for this indicator	61
2. Number of remaining FFY 2009 findings the State has verified as corrected	47
3. Number of remaining FFY 2009 findings the State has NOT verified as corrected [(1) minus (2)]	14

OSSE used the same methods described under the correction of remaining findings of noncompliance identified in 2010 to verify correction of noncompliance, analyze the root cause of longstanding noncompliance, and make changes to the system of general supervision to address longstanding findings of noncompliance identified in FFY 2009.

Additional Information Required by the OSEP FFY 2011 APR Response Table for this Indicator:

Statement from the Response Table	State's Response
--	-------------------------

The State must demonstrate in the FFY 2012 APR that the remaining 1,111 findings of noncompliance identified in FFY 2010 and the 61 findings of noncompliance identified in 2009 that were not reported as corrected in the FFY 2011 APR were corrected.	<p>469 of 1,111 outstanding findings of noncompliance identified in FFY 2010 have been closed, leaving 642 open findings from FFY 2010.</p> <p>47 of 61 findings from FFY 2009 have been closed, leaving 14 open findings of noncompliance from FFY 2009.</p>
The State must report that it verified that for each LEA with findings of noncompliance identified in FFY 2011 and for LEAs with remaining findings from FFY 2010 and FFY 2009: 1) is correctly implementing the specific regulatory requirements based on a review of updated data; and 2) has corrected each individual case of noncompliance consistent with OSEP Memo 09-02	OSSE verified correction of noncompliance in accordance with OSEP Memo 09-02, for each LEA with noncompliance identified in FFY 2011 and for each LEA with remaining findings from FFY 2010 and 2009.
The State must use and submit the indicator 15 worksheet.	Indicator 15 worksheet attached.
The State must report on correction of noncompliance described in this table under indicators 4A, 4B, 9, 10, 11, and 13	Correction of noncompliance reported upon in sections 4A, 4B, 9, 10, 11, and 13. As noted in Indicators 4A, 4B, 9 and 10, OSSE did not issue findings in the federal fiscal year contemplated by the APR template; therefore, findings listed for the applicable years of data do not appear in the corresponding year's Indicator 15.

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Provide ongoing technical assistance and support	Ongoing through June 30, 2013	OSSE Quality Assurance & Monitoring staff & OSSE Training & Technical Assistance staff

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
Collect monitoring data	Ongoing through June 30, 2013	OSSE Quality Assurance & Monitoring staff
Monitor and update Indicator 15 tracking system	Ongoing through June 30, 2013	OSSE Quality Assurance & Monitoring staff and technical assistance providers
Conduct professional development and training activities	Ongoing through June 30, 2013	OSSE Quality Assurance & Monitoring staff & OSSE Training & Technical Assistance staff

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

PART B INDICATOR 15 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # of Findings of noncompliance identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of youth with IEPs graduating from high school with a regular diploma.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
2. Percent of youth with IEPs dropping out of high school.	Dispute Resolution: Complaints, Hearings	0	0	0
14. Percent of youth who had IEPs, are no longer in secondary school and who have been competitively employed, enrolled in some type of postsecondary school or training program, or both, within one year of leaving high school.				
3. Participation and performance of children with disabilities on statewide assessments.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	11	143	123
7. Percent of preschool children with IEPs who demonstrated improved outcomes.	Dispute Resolution: Complaints, Hearings	1	2	2
4A. Percent of districts	Monitoring	11	36	19

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # of Findings of noncompliance identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
identified as having a significant discrepancy in the rates of suspensions and expulsions of children with disabilities for greater than 10 days in a school year.	Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
4B. Percent of districts that have: (a) a significant discrepancy, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.	Dispute Resolution: Complaints, Hearings	1	5	5
5. Percent of children with IEPs aged 6 through 21 -educational placements.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site	14	433	341
6. Percent of preschool				

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # of Findings of noncompliance identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
children aged 3 through 5 – early childhood placement.	Visits, or Other			
	Dispute Resolution: Complaints, Hearings	4	199	193
8. Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	15	254	190
	Dispute Resolution: Complaints, Hearings	1	22	21
9. Percent of districts with disproportionate representation of racial and ethnic groups in special education that is the result of inappropriate identification.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	13	118	104
	Dispute Resolution: Complaints, Hearings	1	2	2
10. Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.				

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # of Findings of noncompliance identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
11. Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	31	563	430
	Dispute Resolution: Complaints, Hearings	1	21	20
12. Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2	10	5
	Dispute Resolution: Complaints, Hearings	0	0	0
13. Percent of youth aged 16 and above with 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	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	12	682	553
	Dispute Resolution: Complaints, Hearings	1	11	11

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # of Findings of noncompliance identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
meet those postsecondary goals, and annual IEP goals related to the student's transition service needs.				
Other areas of noncompliance: Dispute Resolution	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	8	3
	Dispute Resolution: Complaints, Hearings	0	0	0
Other areas of noncompliance: Fiscal	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	10	39	11
	Dispute Resolution: Complaints, Hearings	0	0	0
Other areas of noncompliance: Other Data	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site	13	343	196

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # of Findings of noncompliance identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Visits, or Other			
	Dispute Resolution: Complaints, Hearings	1	1	1
Sum the numbers down Column a and Column b			2892	2230
Percent of noncompliance corrected within one year of identification = (column (b) sum divided by column (a) sum) times 100.			(b) / (a) X 100 =	77%

Part B State Annual Performance Report (APR) for FFY 2012

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

Indicators 16 and 17:

As of FFY 2011, state reporting on Indicators 16 and 17 has been eliminated by OSEP. States continue to report on the timeliness of State Complaint Decisions and Due Process Hearing Decisions as part of the data submitted under IDEA section 618.

Part B State Annual Performance Report (APR) for 2012

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 18: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements.

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

Measurement: Percent = (3.1(a) divided by 3.1) times 100.

FFY	Measurable and Rigorous Target
2012	55% - 70%

Actual Target Data for 2012:

10%

The actual target data was calculated as follows: $48/481 \times 100$

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

For FFY 2012, the actual target data represents slippage from the FFY2011 target data. The agency's slippage in this area may be due to limited initial participation rates in the agency's new service offering, facilitated resolution meetings. Additionally, the agency has intentionally redirected resources from promoting its new service offerings to strengthen the facilitated resolution meeting program internally, based on feedback from pilot participants.

In FFY 2013 OSSE plans to address the aforementioned issues by creating a public relations campaign around facilitated resolution meetings to increase awareness of the new service offering among public stakeholders. The agency has also trained its hearing officers, who have a strong foundation in IDEA, to facilitate resolution meetings.

The following improvement activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
OSSE will work with the LEAs to provide contracted facilitators to facilitate resolution sessions for the purpose of raising accountability and increasing the number of resolution session meetings that reach resolve.	Commencing Spring of FFY 2012; ongoing through June, 2013	Director, SHO Unit
Requiring hearing officers, upon assignment to a due process hearing request, to issue a memorandum to all parties requesting information on resolution session activities and immediate notification of any action that results in an adjustment to the 30-day resolution period.	Ongoing through June 30, 2013	Director, SHO Unit
Implementing and training LEAs on the usage of a standard document to timely notice and inform the Student Hearing Office on resolution matters associated with the resolution period.	Ongoing through June 30, 2013	Director, SHO Unit; Director, QAM Unit
Enhancing cooperation and communication between LEAs and the SHO to ensure that the SHO receives timely notice and consistent data on the resolution of due process hearing requests that occur during the resolution period.	Ongoing through June 30, 2013	Director, SHO Unit; Director, QAM Unit

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for 2012

Overview of the Annual Performance Report Development:

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

Indicator 19: Percent of mediations held that resulted in mediation agreements.

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

Measurement:

Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2012	45 - 60%

Actual Target Data for FFY 2012:

72%

The actual target data was calculated as follows: $1+12/18 \times 100$

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

The actual target data represents improvement from the FFY 2011 actual target data of 70%. This could be attributed to the District's focus on increasing opportunities for mediation overall. By contracting with well-experienced mediators trained in special education law, the District has raised the special education community's awareness of the availability of mediation to resolve special education disputes. This effort has been successful, in that the number of mediation requests has increased overall. OSSE has distributed materials and engaged stakeholders on the benefits of mediation and collaborative resolution to special education disputes.

The following activities will be continued based on OSSE's belief that they are critical levers for ensuring the District's continued progress in relation to this indicator:

CONTINUING IMPROVEMENT ACTIVITIES		
Improvement Activities	Timelines	Resources
OSSE will take steps to ensure that the parents of students with IEPs are aware of the availability of mediation as a tool for the timely resolution of disputes.	Ongoing through June 30, 2013	Student Hearing Office staff and Monitoring and Compliance staff
Conduct a multifaceted outreach and public relations campaign to inform parents, students and stakeholders of the processes and procedures of mediation.	Ongoing through June 30, 2013	Student Hearing Office staff and Monitoring and Compliance staff
Provide parents, students and stakeholders with survey tools to provide OSSE with information that can be used to train and evaluate its mediators.	Ongoing through June 2013	Student Hearing Office staff

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012:

No revisions to targets, improvement activities, timelines or resources are proposed for this indicator for FFY 2012.

Part B State Annual Performance Report (APR) for FFY 2012

Monitoring Priority: Effective General Supervision Part B / General Supervision

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

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

Measurement:

State reported data, including 618 data, State Performance Plan, and Annual Performance Reports, are:

- a. Submitted on or before due dates (first Wednesday in February for child count, including race and ethnicity; and educational environments; first Wednesday in November for exiting, discipline, personnel and dispute resolution; December 15 for assessment; May 1 for Maintenance of Effort & Coordinated Early Intervening Services; and February 1 for Annual Performance Reports).
- b. Accurate, including covering the correct year and following the correct measurement.

As stated in the Indicator Measurement Table, States may, but are not required, to report data for this indicator. OSEP will use the Indicator 20 Rubric to calculate the State's data for this indicator. States will have an opportunity to review and respond to OSEP's calculation of the State's data.

FFY	Measurable and Rigorous Target
2012	100%

Actual Target Data for FFY 2012:

Target data for this indicator will be calculated by OSEP.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2012:

This section will be completed upon review of OSEP's calculation.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines /
Resources for FFY 2012:**

This section will be completed upon review of OSEP's calculation.