



Office of the



State Superintendent of Education

OSSE Adult and Family Education Program Year 2011-2012 (PY12) Monitoring Protocol

Introduction

The OSSE Monitoring Protocol has the following goals:

1. Define roles and expectations for all monitoring system stakeholders,
2. Improve the flow of information between OSSE, the monitors, and providers through an agreed-upon timeline and deadlines.
3. Ensure that monitoring process is transparent, and
4. Ensure that continuous program improvement occurs through timely filing of reports and information sharing.

Scheduling Preliminary and Final Monitoring Visits

The schedule for preliminary and final monitoring visits will be determined by the following:

1. Previous final monitoring instrument scores. Providers with the lowest scores will be visited first.
2. New programs. If a program is new to OSSE funding, the provider will have its preliminary and final visits scheduled earlier.
3. Provider has a new program manager or the provider has had key staff turnover.
4. Directive from OSSE that a particular provider must be visited early in the schedule.

The OSSE staff will determine the order in which visits will occur and establish a timeline for these visits. Providers will then be contacted and given a few date options and times for the visit. Providers who receive more than 90% of the points on the final monitoring instrument for the previous program year may not be required to have a preliminary visit. OSSE staff will review, approve and disseminate the schedule to providers.

Scheduling Changes

In the event that a provider needs to change the scheduled date for a monitoring visit, the provider must:

1. Immediately notify OSSE that the originally scheduled date needs to be changed and the reason why.
2. OSSE staff will work with the provider to find an alternative date that, as best as possible, achieves the goals of Section I above.

Data to be reviewed prior to and during the Preliminary and Final Monitoring Visits/Reviews

Prior to the Preliminary and Final Monitoring Visit/Review, the monitoring team will:

1. Review the provider's Quarterly Reports, prior or current year Monitoring Instrument, Checklist (Preliminary/Final), and Desk Reviews to facilitate a discussion about program performance and progress toward resolution of directives, issues or concerns.
2. Review Year-To-Date National Reporting System (NRS) tables
During the Preliminary Monitoring Visit/Review, the monitoring team will:
3. Review the findings and directives from the provider's prior year Final Monitoring Instrument and Report with program staff.
4. Review the provider's Quarterly Report and Desk Reviews with program staff and discuss program performance and progress toward resolution of directives, issues or concerns.

During the Final Monitoring Visit/Review, the monitoring team will:

1. Review and discuss the provider's Preliminary Report, Quarterly Reports, and Desk Reviews
2. Discuss preliminary comments/scoring on Final Monitoring Instrument with program staff.

Monitoring Instrument Completion and Submission Deadlines

Upon completion of the monitoring review/visit, each monitoring team will draft the instrument for review by the State Director.

Upon approval from the State Director, the monitoring instrument will be disseminated to the provider.

Review of Documents and Scoring Prior to Visit

Because documents, data, and other information are available electronically via LACES ,OSSE has the capability to review data prior to the Preliminary and Final Monitoring Visits. Therefore providers must have student data updated and current and information ready for review electronically at least 48-hours prior to the monitoring visit. Reviewing data prior to the visit will improve the visit's efficiency and focus. Information that will be reviewed within 48-hours of the visit includes:

1. NRS Tables
2. OSSE Desk Review (available via LACES)
3. Performance and Requirement Agreement for the current program year
4. Grantee Quarterly Report
5. For the Final Visit, Category A can be scored remotely as the data and information needed to rate Category A measures are available via LACES.

Process for Conducting Preliminary and Final Monitoring Visits

Preliminary Visit Process:

The goals of the Preliminary Visit are to:

1. Determine progress toward resolving any outstanding directives from the previous monitoring visit.
2. Ensure that checklist items are acceptable as required.
3. Ensure that the provider is making progress toward stated objectives in their approved Performance and Requirement Agreement. This will be accomplished in part by reviewing checklist items.
4. Determine the reliability and accuracy of data through folder sampling.
5. Identify technical assistance needs for the provider.

Within 30 days of the preliminary visit, the monitoring team will complete the monitoring Instrument (preliminary monitoring checklist and other applicable sections) and complete folder sampling summary and form for the six folders sampled.

Final Monitoring Visit Process:

The goals of the final visit include all of the above listed for the preliminary visit with the following addition:

1. Rate the provider on all measures on the final monitoring instrument and assign a total score. This score will be used to assess whether or not the provider will receive continuation funding and to identify professional development needs.

Within 30 days of the preliminary visit, the monitoring team will complete and score Final Monitoring Instrument. All folder sampling forms and folder summary sheet that are included in the final instrument document must also be completed. By using NRS reports and the Desk Review, the monitoring team can completely score Category A in the Final Monitoring Instrument before the actual visit.

Final Instrument Rating Flags:

The information in this section is not necessarily comprehensive, however, it raises a couple of issues that monitors, OSSE staff, and providers should consider with regards to scoring the Final Monitoring Instrument.

- A. If a provider loses a significant amount of points in Category A, then it should not be possible for them to get all points in Category B.
- B. If a provider is not following assessment protocol, the provider automatically loses points in several measures in Category A and D.
- C. The reliability of a provider's outcomes used to score Category A should be questioned if a provider loses significant points in Category D. At some point in the future, a provider that does not receive at least 85% of points in Category D will be penalized points from their overall score to adjust for the probability that their score for Category A is likely too high.