



**U.S. DEPARTMENT OF EDUCATION  
OFFICE OF SPECIAL EDUCATION PROGRAMS**

INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)  
PART B SPECIAL CONDITIONS  
PROGRESS REPORT #3  
REPORTING PERIOD: JANUARY 1, 2013 – MARCH 31, 2013

SUBMITTED: MAY 1, 2013

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HOSANNA MAHALEY JONES  
STATE SUPERINTENDENT

## **I. Reporting Requirements**

The Office of the State Superintendent of Education (OSSE) is pleased to submit this third progress report pursuant to the special conditions imposed by the USDE Office of Special Education Programs (OSEP) on OSSE's FFY 2012 IDEA Part B grant award.

As outlined in Enclosure E of OSEP's FFY 2012 grant award notice to OSSE, OSSE is required to submit specific data and information related to:

- Demonstrated compliance with secondary transition requirements,
- Evidence that it has a general supervision system that is reasonably designed to effectively correct noncompliance in a timely manner,
- Demonstrated compliance with the requirement to implement Hearing officer Determinations (HODs) in a timely manner,
- Demonstrated compliance with the requirement to conduct timely initial evaluations and reevaluations, and
- Demonstrated compliance with the requirement that children referred by Part C prior to age three, who are found eligible for Part B, have an IEP developed and implemented by their third birthdays.

OSEP has also required the District to reduce the backlog of overdue initial evaluations and re-evaluations each reporting period. Specifically, for this reporting period, OSEP has required the District to reduce the percentage of students remaining in the backlog at the end of the February 1, 2013 progress report by 75%.

OSEP has similarly required the District to improve its overall rate of compliance with secondary transition requirements. Specifically, for this reporting period, OSEP has required the state to demonstrate that of the student records reviewed, 95% of youth aged 16 and above had IEPs that included the required secondary transition content.

OSEP requires that OSSE report on the status of the FFY 2010 State-level Directed Use of Funds (DUF) under IDEA section 611 (e), DCPS' FFY 2011 IDEA Part B IDEA DUF funds, and OSSE's use of its FFY 2012 IDEA Part B DUF funds to support the reduction in the backlog of overdue initial evaluations and reevaluations and the improvement of secondary transition requirements. These reporting elements continue to be addressed via OSSE's FFY 2012 Corrective Action Plan (CAP) Progress Report, submitted for the same reporting period.

OSSE submits this third progress report to satisfy the above reporting requirements.

OSSE notes that this report represents both progress and slippage across key performance indicators. OSSE is pleased to note that the District's rate of timeliness for initial evaluations, reevaluations, and early childhood transition continues to be at 90% or above. In addition, the rate of timeliness for early childhood transition has reached an unprecedented 100% for this reporting period. OSSE is also pleased to note significant progress in its rate of HOD backlog reduction during this reporting period.

At the same time, the District did not meet its targets for initial evaluation, reevaluation and HOD backlog reduction. The District's rates of timeliness related to Hearing Officer Determinations (HODs) remained steady across reporting periods, and the District saw a decrease in secondary transition compliance.

OSSE expects to see continued improvement in outcomes over subsequent reporting periods as it implements the next phase of its SY 2012-2013 targeted technical assistance plan over the course of the next reporting period. In addition, OSSE continues to implement a robust system of general supervision, which is being strengthened via the release of an online tracking system which will allow LEAs to track required actions and submit evidence of correction with greater ease.

OSSE looks forward to continuing to report on its accomplishments and improved outcomes throughout FFY 2012.

## 1. Compliance with the Requirement to Conduct Initial Evaluations

Summary of Data for this Reporting Element:

Initial Evaluations		1/1/2013 – 3/31/2013
<b>A</b>	<b>The number of children who, as of the end of the previous reporting period, had been referred for, but not provided, a timely initial evaluation:</b>	<b>38</b>
	1. Previous Report Untimely <sup>1</sup>	<b>57</b>
	2. Late Data Entry Adjustment	<b>-19</b>
<b>B</b>	<b>The number of children referred for initial evaluation whose initial evaluation became overdue during the reporting period</b>	<b>52</b>
<b>C</b>	<b>The number of children from (A) and (B) above, who were provided initial evaluations during the reporting period</b>	<b>64</b>
<b>D</b>	<b>The number of children who had not been provided a timely initial evaluation at the conclusion of the reporting period</b>	<b>26</b>
<b>E</b>	<b>The percent by which the State reduced the number of children with overdue initial evaluations reported in the State’s previous progress report. <math>[(a) - (d)] / (a) \times 100</math></b>	<b>32%</b>
<b>F</b>	<b>The percent of initial evaluations provided to children whose initial evaluation deadlines fell within the reporting period that were conducted in a timely manner. The state must also report actual numbers for the following:</b>	
	1. The number of children whose initial evaluation deadlines fell within the reporting period	<b>876</b>
	2. The number of those children who were provided a timely initial evaluation	<b>812</b>
	3. The number of children, if any, for whom the exceptions in 34 CFR Section 300.301 (d) applied	<b>12</b>
	<b>To calculate the percent of initial evaluations provided in a timely manner use the data reported in #2 divided by [1 minus 3] times 100</b>	<b>94%</b>
<b>G</b>	<b>The average number of days the initial evaluations that had not been provided in a timely manner were overdue</b>	<b>25</b>

<sup>1</sup> Prior to FFY 2012, OSEP required OSSE to report on timeliness rates related to initial evaluations and placements. Beginning in FFY 2012, OSEP requires OSSE to report on timeliness rates related to initial evaluations. Therefore, the “Previous Report Untimely” rate was calculated utilizing the new metrics required by OSEP.

### Discussion of Reported Data:

*Timeliness:* **94%** of initial evaluations provided to children with disabilities whose initial evaluation deadlines fell within the reporting period were conducted in a timely manner. The calculation used to derive that percentage is  $812/(876-12)*100$ . This rate of timeliness represents progress compared to the **92%** rate of timeliness reported in the second FFY 2012 progress report submitted to OSEP on January 31, 2013.

*Progress Related to the Reduction of the Backlog:* In order to reduce the backlog by **75%**, **12 29** evaluations in the backlog would need to be completed in this reporting period, which would leave 9 in the backlog. Based on the above calculation, the total number of students currently in the backlog is 26.

*Reasons for Delays in Conducting Initial Evaluations in a Timely Manner:* The reasons for delay for Initial evaluations not held in a timely manner fell into two categories: LEA delay (81%) and parental delay (19%). In instances of parental delay, the LEA made reasonable efforts to complete the evaluation process in accordance with OSSE's Initial Evaluation and Reevaluation Policy dated March 22, 2010 and the exceptions in 34 CFR Section 300.301 (d) applied.

The primary reasons for LEA delay included: delayed action taken related to initial referral, delayed action related to accessing records from the previous LEA, and delays in scheduling meetings.

*Actions the State is taking to Address Noncompliance:* As noted in its second progress report, OSSE launched a targeted technical assistance effort during the course of this reporting period.

This effort was launched via two prongs: 1) a student-level review of backlog data to discern the underlying reasons students were in the backlog, and specifically to disaggregate practice challenges from data entry or data system issues, and 2) a District-wide targeted technical assistance plan with graduated tiers of intervention and support.

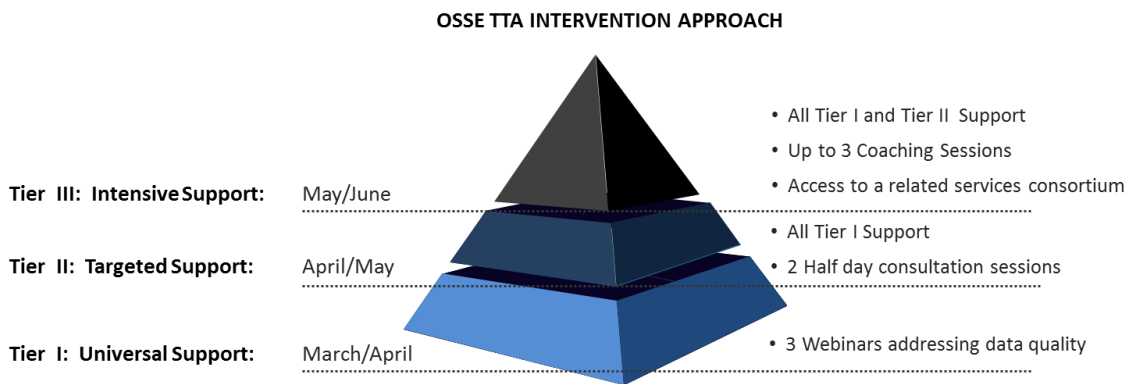
The student-level review of backlog data resulted in OSSE's ability to identify a significant number of records that were erroneously categorized as backlog cases due to errors in data system use. In these instances, OSSE worked with each LEA to verify the status of the record and assist the LEA in appropriately correcting the record. When challenges with user fluency were identified, OSSE provided one-to-one coaching to LEA staff as needed. OSSE supported LEA users in appropriately updating records and student status.

As noted above, OSSE has also identified circumstances in which the delay was caused by underlying practice challenges. This information is being used to inform training and technical assistance approaches and data system updates that will improve outcomes.

OSSE's launch of a targeted technical assistance initiative further augments ongoing technical assistance efforts to support LEAs. Through this initiative, LEAs have been placed in three tiers

of intervention based on their performance on several data elements, which include U.S. Department of Education special education compliance indicators and results from the District’s first annual Blackman Jones Data Accuracy Audit. The first tier of intervention, universal support, was initiated in March and will continue through Mid-May. This tier consists of mandatory webinars on data quality, special education quality review self-assessments, and root cause analysis.

Tiers II and III of the targeted intervention approach are designed to further accelerate improvements for LEAs needing targeted or intensive support. During the months on May and June, LEAs placed in Tier II will receive two half-day consultation sessions related to furthering the root cause analysis and improvement planning work begun via the webinar series. LEAs placed in Tier III will also receive the Tier II supports, but will additionally receive access to a consortium of related service providers to ensure that resources are available to further address the remaining backlog of overdue initial and reevaluations. An overview of the approach is depicted below:



## 2. Compliance with the Requirement to Conduct Reevaluations

Summary of Data for this Reporting Element:

Reevaluations		1/1/2013-3/31/2013
<b>A</b>	<b>The number of children who, as of the end of the previous reporting period, had been referred for, but not provided, a timely triennial evaluation:</b>	<b>67</b>
	1. Previous Report Untimely	<b>122</b>
	2. Late Data Entry Adjustment	<b>-55</b>
<b>B</b>	<b>The number of children whose triennial reevaluation became overdue during the reporting period</b>	<b>90</b>
<b>C</b>	<b>The number of children from (A) and (B) who were provided triennial reevaluations during the reporting period</b>	<b>95</b>
<b>D</b>	<b>The number of children who had not been provided a timely triennial reevaluation at the conclusion of the reporting period</b>	<b>62</b>
<b>E</b>	<b>The percent by which the State reduced the number of children with overdue triennial reevaluations reported in the State's previous progress report [(a)-(d)]/(a) *100</b>	<b>7%</b>
<b>F</b>	<b>The percent of triennial reevaluations provided to children whose triennial reevaluation deadlines fell within the reporting period that were conducted in a timely manner. The state must report actual numbers for the following:</b>	
	1. The number of children whose triennial reevaluation deadlines fell within the reporting period	<b>1066</b>
	2. The number of children who were provided a timely triennial reevaluation	<b>976</b>
	<b>To calculate the percent of triennial reevaluations provided in a timely manner use the data reported in #2 divided by #1 times 100</b>	<b>92%</b>
<b>G</b>	<b>The average number of days the triennial evaluations that had not been provided in a timely manner were overdue</b>	<b>50</b>

Discussion of Reported Data:

*Timeliness:* **92%** of reevaluations provided to children with disabilities whose reevaluation deadlines fell within the reporting period were conducted in a timely manner. The calculation used to derive this percentage is  $(976/1066)*100$ . This rate of timeliness represents progress compared to the **91%** rate of timeliness reported in the second FFY 2012 progress report submitted to OSEP on January 31, 2013.

*Progress Related to the Reduction of the Backlog:* In order to reduce the backlog by **75%**, **7 50** reevaluations in the backlog would need to be completed in this reporting period, which would

leave 17 in the backlog. Based on the above calculation, the total number of students in the backlog is 62.

As a result of a student-level case analysis conducted by OSSE, OSSE noted that 5 out of the 62 cases in the current reevaluation backlog are cases in which the LEA made reasonable efforts to complete the evaluation process in accordance with OSSE's Initial Evaluation and Reevaluation Policy dated March 22, 2010. Given this fact, 57 of the 62 cases in the current reevaluation backlog are due to LEA delay. Accounting for cases of parent delay would result in a rate of reevaluation backlog reduction of 15% (using the formula  $(a-d)/a$ ).

*Reasons for Delays in Conducting Reevaluations in a Timely Manner:* The reasons for delay for reevaluations not held in a timely manner fell into two categories: LEA delay (87%) and parental delay (13%).

In instances of parental delay, as noted above, the LEA made reasonable efforts to complete the evaluation process in accordance with OSSE's Initial Evaluation and Reevaluation Policy dated March 22, 2010.

The primary reasons for LEA delay in completing reevaluations included: delayed action related to accessing records from the previous LEA and delays in scheduling meetings.

*Actions the State is taking to Address Noncompliance:* As noted above, OSSE launched a targeted technical assistance effort during the course of this reporting period.

This effort was launched via two prongs: 1) A student-level review of backlog data to discern the underlying reasons students were in the backlog, and specifically to disaggregate practice challenges from data entry or data system issues, and 2) A District-wide targeted technical assistance plan with graduated tiers of intervention and support.

The student-level review of backlog data resulted in OSSE's ability to identify a significant number of records that were erroneously categorized as backlog cases due to errors in data system use. In these instances, OSSE worked with each LEA to verify the status of the record and assist the LEA in appropriately correcting the record. When challenges with user fluency were identified, OSSE provided one-to-one coaching to LEA staff as needed. OSSE supported LEA users in appropriately updating records and student status.

As noted above, OSSE has also identified circumstances in which the delay was caused by underlying practice challenges. This information is being used to inform training and technical assistance approaches and data system updates that will improve outcomes.

OSSE's launch of a targeted technical assistance initiative further augments ongoing technical assistance efforts to support LEAs. Through this initiative, LEAs have been placed in three tiers of intervention based on their performance on several data elements, which include U.S. Department of Education special education compliance indicators and results from the District's



first annual Blackman Jones Data Accuracy Audit. The first tier of intervention, universal support, was initiated in March and will continue through Mid-May. This tier consists of mandatory webinars on data quality, special education quality review self-assessments, and root cause analysis.

Tiers II and III of the targeted intervention approach are designed to further accelerate improvements for LEAs needing targeted or intensive support. During the months on May and June, LEAs placed in Tier II will receive two half-day consultation sessions related to furthering the root cause analysis and improvement planning work begun via the webinar series. LEAs placed in Tier III will also receive the Tier II supports, but will additionally receive access to a consortium of related service providers to ensure that resources are available to further address the remaining backlog of overdue initial and reevaluations.

### 3. Compliance with the Requirement to Implement Hearing Officer Determinations (HODs) in a Timely Manner

Hearing Officer Determinations		1/1/2013-3/31/2013
A	The number of children whose hearing officer determinations, as of the end of the previous reporting period, had not been implemented within the time frame established by the hearing officer or by the State	28
B	The number of children whose hearing officer determinations had not been implemented within the time frame established by the hearing officer or by the State (became overdue) during the reporting period	6
C	The number of children from (a) and (b) above whose hearing officer determinations were implemented during the reporting period	22
D	The number of children whose hearing officer determinations had not been implemented in a timely manner at the conclusion of the reporting period	12
E	The percent by which the State reduced the number of children whose hearing officer determinations had not been implemented in a timely manner reported in the State's previous progress report $(a - d) / (a) * 100$	57%
F	The percent of hearing officer determinations that were implemented in a timely manner during the reporting period	80%

#### Discussion of Reported Data:

In accordance with OSEP requirements for this benchmark, the data above reflects HODs and does not include settlement agreements. The benchmark is also calculated on a per child basis, not per HOD, in cases where the same child has more than one HOD. A student with multiple HODs within the reporting period is only counted once. If the student has both timely and untimely/overdue HODs, he or she is only counted once as having been overdue.

*Timeliness of HODs:* **80%** of HODs were implemented in a timely manner during the reporting period. This indicates an improvement from the **77%** rate of timeliness reported in the progress report submitted to OSEP on January 31, 2013. The calculation used to derive this percentage is  $(35/44) * 100$ .

*Implementation of Backlog of HODs:* **57%** of children (a) who, as of the end of the previous reporting period had HODs that had not been implemented within the required time frame (28), and children (d) whose HODs had not been implemented within the required time frame during the reporting period (12), had HODs implemented during the reporting period. The

calculation used to derive the percentage is  $[(28-12)/28] * 100$ . This percentage represents progress from the **0%** in the progress report submitted to OSEP on January 31, 2013.

*Reasons for Delays:* The reasons for the delays in implementing HODs in a timely manner were found to be LEA delay and parental consent.

*Actions the State is taking to Address Noncompliance:* OSSE's compliance team continued to take multiple steps to achieve improved results during this reporting period. First, as noted in the previous report, OSSE continued to take measures acceptable to the Court to close cases in a way which ensured compliance with the Jones consent decree while also ensuring that students that remain within the District receive the relief awarded them.

In addition, OSSE has continued to provide intensive training and technical assistance to LEAs with HODs and SAs. Last, OSSE has recently developed and released a dashboard in the Blackman Jones Database, the online tool used to track and document HOD and SA implementation. This real-time dashboard assists users in reviewing implementation status, supporting more effective management of HOD and SA requirements.

OSSE believes that this combination of activities has led to the accelerated progress noted in this reporting period.

#### 4. Demonstration of General Supervision System Reasonably Designed to Correct Noncompliance

Summary of Data for this Reporting Element:

Reporting Period for Verification of Noncompliance		1/1/13-3/31/13
A	The number of any remaining findings of noncompliance identified in FFY 2009 and FFY 2010 that were not corrected under Indicator 15 in the FFY <del>2010</del> 2011 APR, for which the State verified the noncompliance was corrected more than one year after the State's identification of the noncompliance (i.e., "subsequent correction").	Total = <del>40</del> 50 FFY 2009 = <del>16</del> 0 FFY 2010 = <del>24</del> 50
B	The number of findings of noncompliance DC made during FFY 2011 (July 1, 2011 through June 30, 2012).	2883
C	The number of findings in FFY 2011 for which the State verified that noncompliance was corrected as soon as possible and in no case later than one year after the State's identification of noncompliance.	<del>1982</del> 2106
D	The number of findings identified in FFY 2011 for which the State verified that noncompliance was corrected more than one year after the State's identification of the noncompliance (i.e. "subsequent correction").	167
E	The number of findings identified in FFY 2011 for which the one year timeline for correction has not yet expired.	424

Discussion of Reported Data:

As of April 18, 2013, OSSE verified that ~~1982~~ 2106 of 2883 findings of noncompliance made during FFY 2011 (July 1, 2011 through June 30, 2012) were corrected pursuant to Memo 09-02 within one year of the date of issuance of the finding. 167 findings of noncompliance were verified as corrected more than one year after the State's identification of noncompliance. Of the ~~734~~ 610 findings of noncompliance that the State has not yet been able to verify as corrected pursuant to Memo 09-02, the one year timeline for correction has not yet expired for 424 findings.

In the 2011 Annual Performance Report (APR), OSSE reported a total of 4,400 findings of noncompliance for FFY 2010. In this report, 2,883 findings of noncompliance are reported for FFY 2011. The large difference in the number of findings is attributed to several factors. The largest decrease in findings is in the area of initial evaluations and reevaluations. In FFY 2010, OSSE issued 1,262 findings related to initial evaluations and reevaluations, while in FFY 2011, OSSE made 586 findings related to initial evaluations and reevaluations. This decrease is attributed to dramatic increases in the State's overall rate of timely evaluations between FFY 2010 and 2011.

OSSE also made fewer findings in FFY 2011 in the area of procedural safeguards related to parent notification and participation in meetings. In FFY 2010, OSSE made 649 findings through the ~~non-dispute-resolution~~ compliance monitoring process. In FFY 2011, OSSE made 278 findings. OSSE attributes the decrease to the improved use of the SEDS system, which supports LEAs in generating and tracking the distribution of documents that ensure that parents are able to participate in the IEP process, such as procedural safeguard notices, letters of invitation to IEP meetings, and prior written notice forms.

There are fewer on-site monitoring findings in FFY 2011 as well. In FFY 2010, OSSE made ~~1,473~~ 2,395 findings through on-site monitoring, while in FFY 2011, ~~1,353~~ 1,366 findings were made through on-site monitoring.

Approximately 9% (263 of 2883) of the State's FFY 2011 findings of noncompliance resulted from dispute resolution activities. The State's compliance monitoring activities accounted for 91% (2620 of 2883) of all FFY 2011 findings of noncompliance. This is the same as in FFY 2010, when 91% of all findings of noncompliance were discovered through compliance monitoring activities. This distribution of findings is reflective of the State's efforts to develop a robust monitoring system and of the significant decreases in the number of HODs issued in the State between FFY 2008 and FFY 2011, both of which have led to an increase in the proportion of findings issued to LEA that are based on monitoring activities. For example, in FFY 2008, less than 1% of all findings of noncompliance came from monitoring activities, while in FFY 2009, roughly 71% of the State's findings of noncompliance came from monitoring activities.

#### *F. Actions Taken to Verify the Correction of Noncompliance in FFY 2009, 2010, and 2011 Consistent with OSEP Memo 09-02*

To ensure that noncompliance is corrected timely, and in accordance with OSEP Memo 09-02, OSSE provides technical assistance to LEAs through the Special Education Monitoring and Compliance Manual (revised in September, 2012). The manual provides LEAs with specific details about how the State identifies noncompliance using data captured through all aspects of its general supervision system, including data received through on-site monitoring, LEA self-assessments, the statewide database, State complaints, and due process hearings. The manual clearly establishes the responsibility each LEA has to correct all noncompliance as soon as possible, and in no case later than one year of the State's written identification of noncompliance to the LEA.

The manual outlines the process for identification and correction of noncompliance in accordance with OSEP Memo 09-02. Specifically, the process ensures that when the State finds information indicative of noncompliance, the State will: (1) make a finding of noncompliance; or (2) confirm whether the data demonstrate noncompliance and issue a finding if the State concludes that noncompliance is demonstrated; or (3) verify that the LEA has corrected the noncompliance, using Prong 1 and Prong 2 of OSEP Memo 09-02 before determining that the LEA has corrected both student level and LEA level noncompliance.

OSSE verifies correction of noncompliance to ensure that each LEA is: (1) has corrected each student level case of noncompliance, unless the child is no longer within the jurisdiction of the LEA consistent with OSEP Memo 09-02; and (2) correctly implementing the specific regulatory requirements (i.e. achieved 100% compliance) based on a review of updated data, such as data collected from subsequent on-site visits or from additional/updated review of data collected in the State database system. Procedures for verifying that an LEA is correctly implementing a particular regulatory requirement vary based on the type of monitoring activity through which noncompliance was identified.

#### *Correction of Findings Identified through On-site Monitoring*

To verify correction of student level findings identified through on-site monitoring, OSSE re-examines each of the original student files reviewed to verify that a required correction has been completed. To verify subsequent correct implementation of the regulatory requirement by the LEA, OSSE selects a sample of student files that were not included in the original review or generates a report from the District's Special Education Data System to verify that the LEA is complying with regulatory requirements. Correction of noncompliance is complete when the LEA demonstrates that all corrections are made and that 100% of files reviewed in a subsequent sample are compliant with the regulatory requirement(s) in question.

OSSE has established a minimum number of files to review to verify Prong 2 correction. For LEAs with 150 or more students with IEPs, the State reviews at least 5 student files to verify Prong 2 correction. For LEAs with fewer than 150 students with IEPs, the State reviews at least 2 student files to verify correction for Prong 2. OSSE may choose to review additional files at its discretion.

#### *Correction of Findings Identified through Database Monitoring*

To verify the correction of findings made through monitoring of the State database system (i.e. evaluations and secondary transition findings) OSSE reviews the database to ensure each student level finding is corrected and requires the LEA to demonstrate that it is correctly implementing the specific regulatory requirement by achieving 100% compliance on a subsequent quarterly review.

To verify correction of LEA level findings, OSSE reviews LEA evidence of correction and, where applicable, selects a sample of student files that were not originally reviewed to verify correction. OSSE works with LEAs to determine, on a case-by-case basis, whether an LEA's policies and procedures lead to noncompliance. If policies and procedures are found to lead to noncompliance, the LEA must review and change those policies and practices to ensure compliance. OSSE also reviews all corrective actions associated with LEA level findings, and may assign additional corrective actions if necessary to fully correct noncompliance.

To verify dispute resolution findings are corrected, OSSE reviews all corrective actions performed by the LEA and determines, on a case-by-case basis whether additional data are required to verify correction.

*G. Actions Taken to Address Findings of Noncompliance in FFY 2009, 2010, and 2011 that were not Corrected within One Year*

To address findings of noncompliance that are not corrected by the LEA within one year of the State's identification of noncompliance, OSSE's Quality Assurance and Monitoring team assesses each LEA's need for training and technical assistance, and arranges for the provision of comprehensive training as necessary. OSSE also provides technical assistance to LEAs attempting to correct noncompliance identified through dispute resolution activities by providing LEAs with a monthly round-up and discussion of corrective actions associated with State complaints, and by providing technical assistance with the implementation of Hearing Officer Determinations. Finally, OSSE uses the annual LEA Determinations process to levy sanctions as appropriate. OSSE considers information collected for or during APR reporting, other US Department of Education reporting, on-site monitoring, record and database review, audits, dispute resolution processes, and rates of timely correction when making LEA determinations.

## 5. Compliance with Secondary Transition Requirements

### Summary of Data Reported for this Element:

<b>Secondary Transition Compliance Item</b>	<b>7/1/12 - 9/30/12</b>	<b>10/1/12 - 12/31/12</b>	<b>1/1/13 - 3/31/13</b>
Total Number of Files with All Items Compliant	38	45	34
Percent of Files with All Items Compliant	38%	45%	34%
Total Number of LEAs Reviewed	11	11	11
Number of LEAs in Compliance	2	1	4

### Discussion of Reported Data:

OSSE reviewed a sample of 100 IEPs to determine whether all secondary transition requirements were met. The review was completed on April 19, 2013. OSSE will notify LEAs of the findings by July 19, 2013.

Four (4) of 11 LEAs had files that were fully compliant with all secondary transition requirements, which is an increase in LEA-wide compliance when compared to the prior review period of October 1, 2012 – December 31, 2012, when only 1 LEA was fully compliant. Thirty-four percent (34%) of IEPs reviewed for the period of January 1, 2013- March 31, 2013 were compliant with all secondary transition requirements. This represents slippage as compared to the prior review period of October 1, 2012 – December 31, 2012, when 45% of IEPs reviewed included all required secondary transition content.

Only 53% of files were in compliance with the requirement to invite a participating agency representative with the prior consent of the parent. Based on a review of the data, OSSE has taken several actions to improve compliance. First, OSSE has further expanded its efforts related to education and training LEA staff to ensure that they are aware of secondary transition obligations. These expanded efforts are being supported by a focused review of secondary transition compliance data, which is supported by the State secondary transition Community of Practice (CoP) and the support of the National Secondary Transition Technical Assistance Center (NSTTAC), with whom OSSE is partnering via a successful targeted technical assistance proposal.

Of note is the District's specific efforts to engage representative sister agencies in the District, such as the Rehabilitative Services Agency (RSA) and the Office of Disability Rights (ODR) in



developing a comprehensive menu of District services available to students of transition age and their families.

Through these efforts OSSE is developing a cross-agency training series that will be rolled out via a summer institute on secondary transition. Through the institute, LEAs will have access to a series of core trainings which will then be made available on-line for continued use in the 2013-2014 SY. In addition, OSSE plans to finalize a Secondary Transition Toolkit which will be aligned with the training modules and will also be made available on-line. OSSE is also continuing to expand its Secondary Transition webpage to ensure that all stakeholders have access to a robust set of resources to support best practice.

In addition, as OSSE institutionalizes use of the District of Columbia Corrective Action Tracking System (DC CATS) for release of the secondary transition report, OSSE anticipates an increase in the percentage of compliant files. As discussed in the Progress Report #2, OSSE is transitioning to an entirely web-based compliance monitoring system. As noted in the District's Corrective Action Plan (CAP) third progress report, the quarterly reports will be released immediately after the DC CAS testing period ends, in May of 2013.

OSSE continues to train LEAs on use of the new system and will include an update on the previous reporting periods in the next quarterly progress report. OSSE continues to provide targeted technical assistance to LEAs regarding secondary transition content and remains committed to doing so until District LEAs are in compliance with the secondary transition requirements.

## 6. Compliance with Early Childhood Transition Requirements

	Early Childhood Transition	1/1/2013 – 3/31/2013
<b>A</b>	Number of children who have been served in Part C and referred to Part B for Part B eligibility determination	<b>60</b>
<b>B</b>	Number of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays	<b>10</b>
<b>C</b>	Number of those found eligible who have an IEP developed and implemented by their third birthdays	<b>45</b>
<b>D</b>	Number 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	<b>3</b>
<b>E</b>	Number of children determined to be eligible for early intervention services under Part C less than 90 days before their third birthdays	<b>2</b>
	Number of children included in A but not included in B, C, D, or E.	<b>0</b>
	Range of days beyond the third birthday when eligibility was determined and the IEP developed and the reasons for the delays	<b>N/A</b>
	Percent = [(C) divided by (A-B-D-E)] x 100	<b>100%</b>

### Discussion of Reported Data:

A review of the data from this reporting period indicates an overall rate of timeliness of **100%**. OSSE is pleased to note that this rate of timeliness represents progress as compared to **91%** reported in the second FFY 2012 progress report submitted to OSEP on January 31, 2013 and is a significant milestone for the District of Columbia.

*Actions the State is taking to Address Noncompliance:* To sustain progress, OSSE continues to facilitate meetings between the leadership of the Part C team and the Early Stages Center Leadership Team at the District of Columbia's Public Schools. Staff members that support State level activities for both Part C and Part B 619 grant obligations have also engaged all stakeholders in updating guidance documents regarding the transition process and associated responsibilities during this reporting period. OSSE expects these ongoing activities will continue to sustain the District's performance related to this compliance indicator.

### **Certification**

This report reflects OSSE's good faith efforts to report accurate and reliable data and ensure a full and comprehensive submission. The District of Columbia's Assistant Superintendent of Specialized Education, Amy Maisterra, hereby certifies that this report is complete and appropriate for submission to the Office of Special Education Programs.