

# Special Education

## **GENERAL SUPERVISION SYSTEM**

**MONITORING AND RESULT-BASED ACCOUNTABILITY**



OKLAHOMA STATE DEPARTMENT OF  
**EDUCATION**  
— CHAMPION EXCELLENCE —

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## Overview

States have a responsibility under federal law to have a system of general supervision to monitor the implementation of the Individuals with Disabilities Education Improvement Act (IDEA) of 2004. The main purpose of the system is to monitor the implementation of IDEA by local education agencies (LEAs). Using this system, states are accountable for enforcing requirements and ensuring continuous improvement. This system is designed to: a) ensure compliance with federal and state regulations and b) improve services and results for students with disabilities. These correspond to the monitoring and results-based accountability elements of the General Supervision System in Oklahoma.

The Oklahoma General Supervision System (GSS) consists of several components: district monitoring and enforcement for compliance to IDEA and fiscal health, data management and reporting, fiscal governance, and dispute resolution. All components have been developed according to the high standards set by OSEP. This document outlines the monitoring and enforcement component of the Oklahoma GSS. Please refer to the Oklahoma State Department of Education, Special Education Services (OSDE-SES) website at <http://ok.gov/sde/special-education> for associated documents.

## Guiding Policies and Procedures

States are required to have policies and procedures that are aligned with IDEA [34 CFR §300.100](#). Oklahoma's special education policies and procedures support state and local implementation of IDEA.

Agencies responsible for special education and related services must abide by Oklahoma State law, policies, procedures, and the federal regulations for IDEA Parts B and C. Agencies having these responsibilities are: LEAs, educational service agencies (ESA), public charter schools not otherwise included as LEAs or ESAs, other public agencies (e.g., State schools for students with deafness and blindness and State and local juvenile and adult correctional facilities), and accredited private schools and facilities as described in the applicable federal regulations and established by Oklahoma State laws.

In an effort to assist LEAs and other entities providing special education and related services in Oklahoma, the OSDE-SES has outlined specific strategies for implementation of IDEA in the Oklahoma Special Education Handbook. Additional information about Oklahoma's policies and procedures are included in the Oklahoma Special Education Policies and the Oklahoma Special Education Process Guide, all of which are available on the OSDE-SES website.

LEAs are also responsible for developing policies and procedures and ensuring effective implementation. LEAs are required annually to complete the *Local Education Agency Assurances* and the *LEA Agreement for Special Education in Oklahoma* which ensure that all eligible students in the LEA have access to a free and appropriate public education (FAPE) ([34 CFR §300.17](#)). It is important for LEAs to also have policies and procedures in place to ensure that IDEA is implemented in accordance with the federal regulations. Failure to complete these requirements can directly affect approval of budget applications and other financial-related issues, as well as factor into decisions related to the level of support assigned a district.

## IDEA State Performance Plan and Annual Performance Report

In accordance with IDEA, states are required to have a performance plan in place that evaluates the state's implementation of Part B and describes how the state will improve such implementation. This plan has been called the Part B State Performance Plan (SPP), now incorporated into the Annual Performance Report (APR). IDEA also requires states to report annually to the public and OSEP on the state's and districts' performance on a set of compliance and performance indicators through the APR every February. The district report in Oklahoma is called the District Data Profile (DDP) and is issued annually in middle fall. The SPP/APR and DDP reports are available on the OSDE-SES website at <http://ok.gov/sde/special-education>.

The indicators used in the reports measure compliance and performance in the areas of graduation and dropout rates, school environments and services, child find (including disproportionate representation by race/ethnicity that is the result of inappropriate identification), assessment and early childhood outcomes, dispute resolution, and transition services. States must use the indicator targets established in the State Performance Plan (SPP) under [34 CFR §300.601](#) and the priority areas described in [34 CFR §300.600\(d\)](#) to analyze the performance of each LEA. The annual targets for state improvement are set periodically by a group of statewide stakeholders and the IDEA B State Advisory Panel.

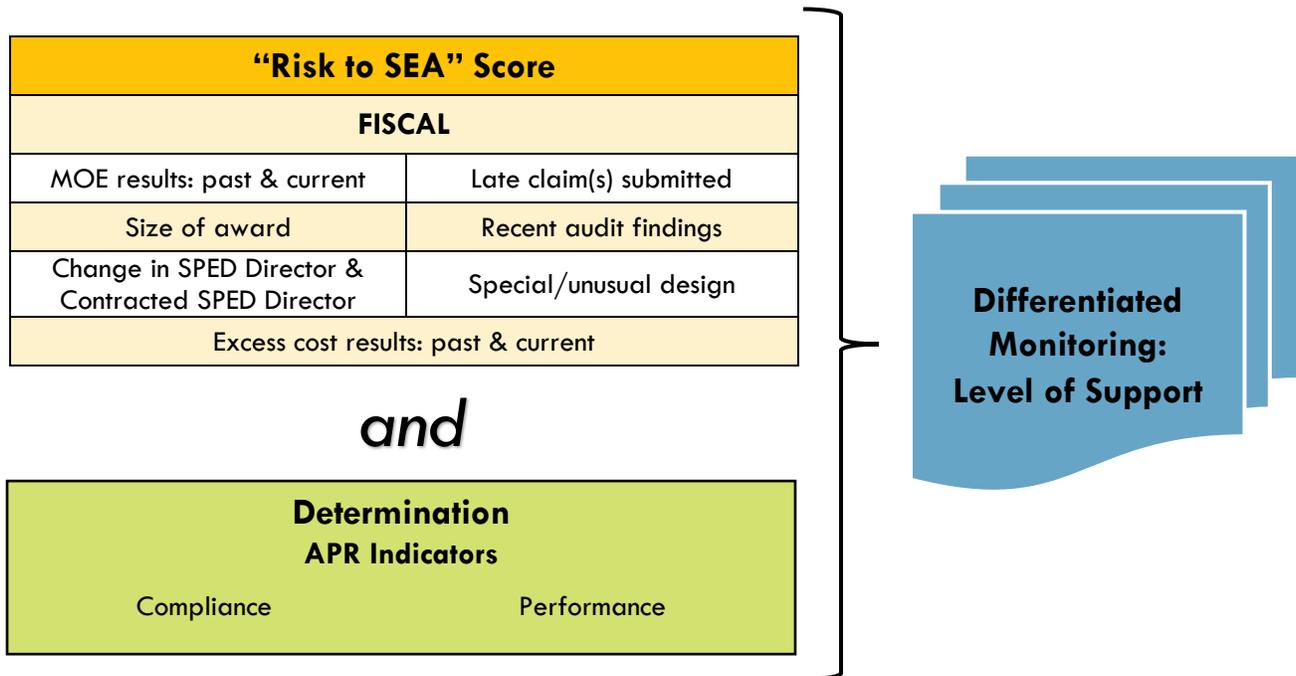
## Differentiated Monitoring and Levels of Support

OSDE-SES identifies a differentiated monitoring result (DMR) for each LEA in Oklahoma based on an assessment of risk and the district's determination rating. This DMR initiates a series of integrated monitoring and improvement activities required to be completed by the LEA. These activities correspond with a "level of support" that the OSDE-SES determines is necessary for the LEA to meet requirements and mitigate risk in subsequent years. Diagram 1 displays the overall model of the DMR, while table 4 describes the required activities associated with each of the four levels of support.

The OSDE-SES is incorporating a risk assessment into the calculation of the DMR in order to meet federal Uniform Grant Guidance requirements ([2 CFR §200.331](#)). This risk assessment must gauge the risk the LEA poses to the SEA (state education agency) in fiscal and other matters. Additionally, the SEA monitoring plan should be based on the results of the assessment. In 2017, the "Risk to SEA" score ("risk score") consists solely of fiscal measures. Beginning in 2018, this risk score will incorporate other factors for concern such as complaint counts, identification rates, and caseload size. How these additional factors affect the overall risk score will be determined in the 2017-2018 school year with stakeholder input and released to districts in the fall of 2018.

An LEA's DMR and associated level of support are determined through a comparison of the LEA's risk score and determination rating: an LEA will be placed in the level of support that corresponds to the one demonstrating the greatest need (risk or determination).

## Diagram 1: Differentiated Monitoring



### Determinations

Determinations identify each LEA's quality of compliance and performance for several indicators that the SEA reports to OSEP. The indicator data used is reported annually in the District Data Profile document. Based on the quality of this compliance and performance data, the OSDE-SES will assign each LEA a determination tier: Meets Requirements, Needs Assistance, Needs Intervention, or Needs Substantial Intervention. Determinations are made annually and directors and superintendents are notified of those results. The district data profile and determination documentation that is distributed annually consists of a set of instructions for interpreting the data, the calculation matrix, and scores from the current and prior years. Please see Appendix B for a sample determination to view the calculation matrix and reporting template.

The calculation matrix has two parts, one focusing on compliance indicators and the other on performance (results-based) indicators. Compliance has a value of 18 points, while performance has a value of 14 points. The determination is made by adding the points together that the district has earned by meeting the indicator targets and dividing by the total possible points (32). Bonus points are available for meeting various criteria. If a district's score falls within 5 percent of the target ("approaching" the target), it will receive 1 point instead of 2. District targets align with state APR targets as shown on the District Data Profile.

Note that the rigorous 100% compliance targets set by OSEP for indicators 4b, 9, 10, 11, 12 and 13 will be reviewed annually by the OSDE-SES through a separate process. LEAs that are in noncompliance for these will be notified in writing and required to fix all records, regardless of the determination tier or DMR. The requirements for addressing indicator noncompliance are described in the "Compliance activities" section.

## Determination tiers

Each determination level corresponds to a total percentage rating measuring the compliance and performance indicators. Table 1 shows which percentage ratings correspond to each determination tier. The LEA's tier will partially establish its DMR and corresponding level of support. LEAs identified as *Meets Requirements* demonstrate adequate compliance and performance on targeted indicators for the implementation of IDEA. An LEA assigned any other tier does not adequately meet indicator targets and will be required to engage in various monitoring and/or improvement activities, as described by its overall DMR and level of support.

**Table 1: Determination Tiers**

Determination Rating	Rating Percentage
Tier 1: Meets Requirements	90 – 100 percent
Tier 2: Needs Assistance	70 – 89 percent
Tier 3: Needs Intervention	50 – 69 percent
Tier 4: Needs Substantial Intervention	Less than 50 percent

## Calculation of risk

The risk score is a measure of an LEA's risk to the SEA. An LEA is assigned a risk category based on its risk score that will partially establish the district's DMR and corresponding level of support. In 2017, this score consists solely of fiscal factors. Table 2 lists the eight factors included in the 2017 fiscal risk score (2 factors are reserved for FY18 implementation) and their factor weights. Table 3 lists three mitigating factors used to decrease district's overall fiscal risk (one of these will be incorporated into the calculation in FY 2018). Districts whose personnel participate in state-provided training and which submit timely budgets are a lower risk to the SEA (negative scores reduce risk). See Appendix A for the reporting template for the District Risk Score and Category.

## Risk Factor definitions

- MOE Results: Current and Past – Districts must expend an equal amount of state and/or federal funds year to year. Districts not meeting MOE are subject to a citation for failure and funds could be withheld from State aid.
- Size of Award – The higher the award amount, the higher the financial risk.
- Excess Cost Results: Current and Past – Excess Costs are costs over and above what the LEA spends on average for students enrolled at the elementary or secondary level. Any district found not meeting excess cost could incur a penalty requiring districts to pay back a portion of funds.
- Recent Audit Findings – Any Independent Audit findings related to special education will be reviewed for financial risk.
- Special or Unusual Design – COOPs, Interlocal, and Charter Schools.
- Late Claim Submitted in FY17 – Claims must be submitted by August 1st. Any claim submitted after the due date must go before the board for approval.
- See the OSDE Finance Webpage at <http://sde.ok.gov/sde/finance> for more information.

**Table 2: Risk Factor Scoring**

<b>Factors</b>	<b>Scoring Elements</b>			
<b>MOE Results: Current</b>	Met	Not met, no exception		
	0	4		
<b>MOE Results: Past</b>	Met past year	2nd year: not met, no exception	2-3 year: not met, no exception	3+ years: not met, no exception
	0	2	3	4
<b>Size of Award</b>	<\$100,000	\$100,000 to 500,000	\$500,000 to 900,000	>\$900,000
	0	1	2	3
<b>Change in SPED Director For FY18 Implementation</b>	No Change in Two+ Years	Second Year	First Year/New Change	
	0	2	4	
<b>Contracted SPED Director For FY18 Implementation</b>	No	Yes		
	0	6		
<b>Excess Cost Results: Current</b>	Met	Not met		
	0	4		
<b>Excess Cost Results: Past</b>	Met past year	2nd year: not met		
	0	4		
<b>Recent Audit Findings</b>	No	Other/No SPED	SPED (with or without Other)	
	0	3	6	
<b>Special or Unusual Design</b>	No	Yes		
	0	3		
<b>Late Claim Submitted in FY17</b>	No	Yes		
	0	3		

<b>Table 3: Mitigating Factors to Reduce Risk</b>	<b>Scoring Elements</b>	
<b>Attended "Hands on Budget" Training in 2017</b>	No	Yes
	0	-2
<b>Budget Application completed by November 1</b>	No	Yes
	0	-1
<b>Attended First Year Director's Training For FY18 Implementation</b>	No	Yes
	0	-2

**Risk categories**

Table 4 describes the risk categories and associated point spread for each. LEAs in risk category 1 are considered very low risk. An LEA assigned any other risk category does not adequately meet risk targets and will be required to engage in various monitoring and/or improvement activities, as described by its overall DMR and level of support. The risk factors are scored according to the values listed in Table 2, then all factor values are summed. The total possible risk score is 40, which OSDE-SES would interpret as imminent failure. A score of zero would be interpreted as extremely low risk.

Because two factors are not included in the risk score for FY 2017, the risk points ranges are narrower in 2017: very low risk will be assigned to districts with scores between 0 and 5, low risk will be assigned to scores between 6 and 10, moderate risk will be assigned to scores between 11 and 18, and high risk will be assigned to scores between 19 and 30.

**Table 4: Risk Categories**

Risk Category	Risk Score	
	FY17	FY18
Category 1: Very Low Risk	0 – 5 points	0 – 6 points
Category 2: Low Risk	6 – 10 points	7 – 12 points
Category 3: Moderate Risk	11 – 18 points	13 – 20 points
Category 4: High Risk	19 – 30 points	21 – 40 points

**Differentiated monitoring result**

The DMR is the state’s tool for identifying LEAs’ required level of support and associated monitoring and/or improvement activities. Determinations and risk categories are designated according to the formulas outlined previously. Each LEA receives one determination tier and one risk category. Whichever number is higher is the DMR. For example, if LEA X is rated a tier 2 on its determination and a category 3 on its risk, its DMR is “3.” If LEA Y receives tier 1 and category 1 ratings, its DMR is “1.” This DMR directly corresponds to the level of support assigned to it during the next fiscal year.

**Levels of support**

When an LEA is assigned a level of support, “integrated monitoring” activities are required of the LEA and the state that are intended to improve district compliance and/or performance. The activities associated with each level of support are listed in Table 5. Note that responses to findings of noncompliance in certain APR indicator data may be required regardless of the level of support assigned to a district. The alphabet letters contained in the table are explained in the following sections. A brief reference list follows Table 5.

**Table 5: Levels of Support**

			Required Activities												
Level of Support	Corresponding...		Improvement						Monitoring			Response to Noncompliance			
	Risk	Determination	A	B	C	D	E	F	G	H	I	W	X	Y	Z
<b>1</b>	VL	MR	x									x	x	x	x
<b>2</b>	L	NA	x	x	x	x						x	x	x	x
<b>3</b>	M	NI	x	x	x	x	x	x	x			x	x	x	x
<b>4</b>	H	NSI	x	x	x	x	x	x		x	x	x	x	x	x

**List of required activities**

- A. Front-loaded technical assistance
- B. Targeted technical assistance
- C. Self-assessment
- D. Professional development modules
- E. Improvement plan
- F. Data retreat
- G. Targeted on-site monitoring
- H. Comprehensive on-site monitoring
- I. Withheld funds

**Integrated monitoring activities**

- W. Letter of Assurance
- X. Data correction (prong 1)
- Y. Improvement plan (only necessary for data compliance if the district is substantially below target)
- Z. Data verification (prong 2)

**Compliance activities**

**Integrated monitoring activities**

**A. Front-loaded technical assistance**

Front-loaded technical assistance provides LEAs with upfront training and skills prior to a monitoring activity to allow for better understanding of the broad expectations, related best practices, and the potential impact of results. This type of TA is a proactive opportunity and the frequency can vary based upon need. Front-loading TA can:

- Help build capacity within an LEA;
- Problem solve to determine areas of need;
- Determine benchmarks and expectations;
- Obtain baseline data; and
- Facilitate conversations within the LEA regarding different Indicators and how they can relate to instructional practices.

## **B. Targeted technical assistance (TTA)**

Targeted technical assistance (TTA), in the form of an integrated monitoring activity, is a purposeful and planned series of activities. TTA activities are identified and coordinated by the OSDE-SES. The LEA then carries out these activities at the school or districtwide level with continued support from the OSDE-SES. As a result, these activities increase the capacity of the LEA to support desired outcomes for students.

The OSDE-SES makes available for all LEAs Technical Assistance (TA) in the form of meetings with LEAs, research-based professional development opportunities, webinars to support compliant implementation of the IDEA, updates via email, and training on the Oklahoma Special Education Handbook and other OSDE-SES manuals. However, TTA activities are concern specific, highly focused, and supported by data. Examples of data the OSDE-SES may use when creating TTA for an LEA include the LEA's level of IDEA compliance, the LEA's performance on results-based indicators, the LEA's performance on compliance-based indicators or a combination of any of these components. Ultimately, TTA is designed to build the capacity of individuals, schools and LEAs to plan, implement and support desired outcomes for their students with Individualized Education Programs.

## **C. Self-assessment**

The use of self-assessments is an important part of the TTA process described above. They are also an important part of improving teaching and learning in schools. The self-assessments provided by OSDE-SES are meant to give an accurate picture of district, school and teacher practice supported by documentation. Honest self-assessment lays the groundwork for reflective practice that is focused on improving outcomes. Some LEAs will be required to conduct self-assessments related to OSEP Indicators or other areas of special education. However, OSDE-SES encourages all LEAs, schools, and teachers to use the self-assessments to improve local practice.

## **D. Professional development modules**

LEAs required to conduct this activity will work with an OSDE-SES program specialist to determine the appropriate module(s). LEAs may utilize professional development modules created by the OSDE-SES, modules available on the web-based professional development platform (PEPPER), or identify other modules approved by the OSDE-SES for this activity. OSDE-SES created professional development modules may be found here: <http://ok.gov/sde/professional-development-directory>.

## **E. Improvement plan**

OSDE-SES has created two improvement plan templates intended for use with the self-assessments and as part of the broader general supervision system. You can access them at <http://ok.gov/sde/ses-tech-assistance>. The improvement plan templates identify current areas of strengths, improvement areas, barriers, SMART goal(s), action steps, person(s) responsible, a timeline for completion, and expected outcomes.

## **F. Data retreat**

Districts assigned levels of support of 3 and 4 are required to send personnel responsible for data management to a data retreat. These training events will be held annually, and will guide personnel through the state's data collection, management and reporting requirements and best practices. The

format will be determined by early 2018. The retreat will be open to personnel in districts assigned 'lower' levels of support, as space permits.

### ***G. Targeted on-site monitoring***

Targeted on-site monitoring activities are administered with the intent to assess how an LEA is implementing certain requirements of the IDEA. An entire review of the LEA's special education program is not the main focus; instead, the goal is to target an area needing improvement and review appropriate sources of information to determine root causes. This type of monitoring activity may include (but is not limited to) such actions as: 1) IDEA Part B fiscal reviews; 2) review of all relevant IDEA administrative records; 3) review of student records; 4) data verification review; 5) interviews with LEA personnel; 6) individual student tracking; 7) parent interviews; and/or 8) other activities as needed. A finding is issued for each area of noncompliance identified. OSDE-SES may also prescribe a Corrective Action Plan (CAP) or Improvement Plan that addresses identified areas of non-compliance and improvement strategies to ensure correction. All documents related to the On-Site Review are located at <http://ok.gov/sde/compliance>.

### ***H. Comprehensive on-site monitoring***

Comprehensive On-Site monitoring activities are administered with the intent to assess how an LEA is implementing the full set of requirements of the IDEA. To review the LEA's special education program in its entirety, this type of monitoring activity may include (but is not limited to) such actions as: 1) IDEA Part B fiscal reviews; 2) review of LEA policy and procedure (administrative records); 3) review of student records; 4) data verification review; 5) interviews with LEA personnel; 6) individual student tracking; 7) parent interviews; and/or 8) other activities as needed. A finding is issued for each area of noncompliance identified. OSDE-SES may also prescribe a Corrective Action Plan (CAP) or Improvement Plan that addresses identified areas of non-compliance and improvement strategies to ensure correction.

### ***I. Withheld funds***

The OSDE-SES may withhold funds, in whole or in part, in accordance with the federal regulations at 34 CFR §§ 300.604 and 300.605.

## Compliance activities

As stated previously, each state is required to report all findings of noncompliance on APR indicators 9 through 13. Any district that is not 100 percent compliant must resolve all noncompliance and confirm its resolution (“prong 1” activities) and then be monitored for continuous compliance (“prong 2” activities).

### **W. Letter of assurance**

Districts found in noncompliance are required to provide the OSDE-SES with a letter of assurance within 45 days from the date the district is notified of a finding of noncompliance. The purpose of the letter is for the LEA to inform the OSDE-SES how they will correct its noncompliance to 100%. In accordance with 34 CFR 300.600(e), noncompliance must be corrected as soon as possible, and in no case later than one year from the date on which the district is notified of a finding of noncompliance. A letter template with recommended language can be provided to districts that request it.

### **X. Prong 1: data correction**

Districts with identified noncompliance must correct all records in noncompliance. For example, if a student does not have a compliant secondary transition plan in his or her IEP, that plan and IEP must be updated and finalized. Districts will be notified of all findings of noncompliance in the fall of each year, in conjunction with the distribution of the District Data Profile. All data corrections must be reported to OSDE-SES by the deadline provided. Districts that do not correct noncompliance in a timely manner will face additional sanctions and monitoring, including a possible increase in its level of support.

### **Y. Improvement plan for noncompliance**

If a district is substantially below the 100 percent target on one or more indicators, the district will be required to submit an improvement plan for the indicator(s). If the district is designated as needing a level of support 1 or 2, the improvement plan will stand alone. If the district has a designated level of support of 3 or 4, the improvement plan for compliance will be completed as an integrated monitoring activity.

### **Z. Prong 2: continuous compliance**

OSEP requires states to review “prong 1” districts within one year of any finding of noncompliance to ensure that districts have not maintained noncompliance in the indicator(s) of interest. OSDE-SES will conduct continuous compliance reviews through a random sampling process, by which student records will be randomly selected for compliance. If all records are compliant, the district will be resolved and removed from the compliance watch-list for the fiscal year. If noncompliance is found, additional sanctions may be applied and the level of support may increase.

The random samples of student records selected to complete prong 2 reviews for indicators 11, 12, and 13, will be pulled from the district’s full set of student records relevant to the indicator. For example, only records of students with initial evaluations in the most recent fiscal year will be sampled for indicator 11. Thus, the number of records sampled depends on the number of relevant records as listed here in Table 6. If the total number of relevant district records is in the left column, then the number of records sampled is in the right column.

The sample sizes are determined using the following assumptions:

1. Margin of error of 10 percent: this is the likelihood of missing (not finding) noncompliance in the sample when it exists.
2. Confidence level of 95 percent: this is the level of confidence that results found are true and representative.
3. Expected response distribution of 90% compliance.

**Table 6: Sampling Sizes**

Full Record Count	Sample Size
10 and under	Same
11 - 15	11
16 - 20	13
21 - 25	15
26 - 30	17
31 - 40	19
41 - 50	21
51 - 75	24
76 - 100	26
101 - 150	29
151 - 300	32
301+	34

## Selective Reviews

When issues of concern are brought to OSDE-SES’s attention regarding an LEA’s implementation of IDEA, a selective review may be conducted to determine the level of concern and assistance needed. For example, OSDE-SES may determine an LEA needs a comprehensive on-site review or targeted technical assistance, depending on the information provided, the source of that information, and other relevant factors. Selective reviews take into account (but are not limited to) the following data elements: stakeholder concerns, phone log information, complaint log information, due process hearing requests or hearing results, mediation, email correspondence, and critical and/or special investigative audits and findings related to special education. These may happen at any time and are unrelated to the differentiated monitoring process, except that a selective review may be deemed necessary as a result of the DMR process.

## Timeline and Deadlines

The state’s timeline for issuing risk scores and determinations, assigning levels of support, and district fulfillment of requirements is described in Table 7. Some target deadlines are flexible, depending on the available of data. Others are firm deadlines to align with federal reporting requirements.

**Table 7: Timeline of Deadlines**

	<b>State Timeframe</b>	<b>District Timeframe</b>
<b>District Data Profile (DDP)</b>	Issued each fall by October 15 using data collected during the prior school year.	May respond within two weeks to issued documentation with questions and concerns.
<b>Risk Assessment</b>	Issued each fall by November 15.	See above.
<b>Determination</b>	Issued each fall by November 15.	See above.
<b>Differentiated Monitoring Results (DMR)</b>	Result is issued alongside the Risk Assessment and Determination via a letter dictating the assigned level of support and all required district activities.	All required activities must be completed by June 30, though specific activities may have earlier deadlines.
<b>Noncompliance Findings*</b>	Issued each fall by November 15, after DDP is finalized.	Noncompliance must be corrected within 45 days.
<b>Prong 2 Review</b>	Conducted by May 1. Results issued by May 15 by letter.	If continued noncompliance, additional district activities will be assigned by May 15.

\*Noncompliance may also be found during monitoring activities. If found, additional correction will be required on a different timeframe.

## Appendix A: FY 2017 District Risk Score Template

District: **EXAMPLE DISTRICT**  
RISK CATEGORY 2: **LOW RISK**

<b>FACTOR</b>	<b>District Result</b>	<b>District Score</b>
<b>Size of Award (2017)</b>	\$100K to \$500K	1
<b>Current MOE Results (2016)</b>	Not met	4
<b>Past MOE Results (2015)</b>	Met	0
<b>Current Excess Cost Results (2016)</b>	Met	0
<b>Past Excess Cost Results (2015)</b>	Met	0
<b>Recent Audit Findings (2016)</b>	No	0
<b>Special or Unusual Design (2017)</b>	No	0
<b>Late Claim Submitted (2017)</b>	Yes	3
<b>BONUS: Budget Training (2017)</b>	No	0
<b>BONUS: Timely Budget Application (2017)</b>	Yes	-1
<b>TOTAL RISK SCORE</b>		<b>7</b>

<b>Risk Category</b>	<b>Risk Score</b>
Category 1: Very Low Risk	0 – 5 points
Category 2: Low Risk	6 – 10 points
Category 3: Moderate Risk	11 – 18 points
Category 4: High Risk	19 – 30 points

## Appendix B: FY 2017 District Determination Template

**District:** EXAMPLE DISTRICT

**Determination:** TIER 2: NEEDS ASSISTANCE

**Total Student Enrollment:** xxxx

**Enrollment Cluster:** x\*

**Child Count (students with disabilities) TOTAL:** xxxx

Part B Compliance Matrix: 2016-2017			
Part B Compliance Indicator	Performance	Indicator Met	Score
<b>Indicator 4A:</b> Risk Ratio for students with disabilities with long-term suspensions/expulsions	1.6	Yes	2 (2 possible)
<b>Indicator 9:</b> Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	Not identified	Yes	2 (2 possible)
<b>Indicator 10:</b> Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification	Not identified	Yes	2 (2 possible)
<b>Indicator 11:</b> Child Find, timely initial evaluation	97.2%	Approaching	1 (2 possible)
<b>Indicator 12:</b> Early Childhood Transition, Individual Education Program developed/implemented by third birthday	93.0%	No	0 (2 possible)
<b>Indicator 13:</b> Secondary Transition	100.0%	Yes	2 (2 possible)
<b>Timely Complaint Decisions</b>	NA	Yes	2 (2 possible)
<b>Timely Due Process Hearing Decisions</b>	NA	Yes	2 (2 possible)
<b>Longstanding Noncompliance</b>	Compliant		2 (2 possible)
<b>Bonus: Timely on Child Count &amp; End of Year Report</b>	Yes		1
<b>Bonus: Attendance at Child Count <i>and</i> End of Year Training</b>	No		0

Compliance Points Earned	Total Points Possible	Rating
16	18	88.9%

<b>Part B Results Driven Accountability Matrix: 2016-2017</b>			
<b>Reading Component Elements</b>	<b>Performance</b>	<b>Indicator Met</b>	<b>Score</b>
<b>Indicator 3C:</b> Performance of students with disabilities participating in Regular Statewide Assessments	<b>50.5</b>	<b>Approaching</b>	<b>1 (2 possible)</b>
<b>Math Component Elements</b>	<b>Performance</b>	<b>Indicator Met</b>	<b>Score</b>
<b>Indicator 3C:</b> Performance of students with disabilities participating in Regular Statewide Assessments	<b>54.4</b>	<b>Approaching</b>	<b>1 (2 possible)</b>
<b>Other Results Driven Elements</b>	<b>Performance</b>	<b>Indicator Met</b>	<b>Score</b>
<b>Indicator 1:</b> Percent of youth with IEPs, in Cohort Year 2016, who graduated with a diploma	<b>50.0%</b>	<b>No</b>	<b>0 (2 possible)</b>
<b>Indicator 2:</b> Percentage of students with disabilities dropping out of High School	<b>4.5%</b>	<b>Yes</b>	<b>2 (2 possible)</b>
<b>Indicator 7:</b> For each Outcome listed, the percentage of students with disabilities who improved functioning to a level nearer to same-aged peers, improved functioning to a level comparable to same aged peers, or maintained functioning at a level comparable to same-aged peers in regards to...			
<b>Outcome 7A:</b> Positive social-emotional skills	<b>93.0%</b>	<b>Yes</b>	<b>2 (2 possible)</b>
<b>Outcome 7B:</b> Acquisition and use of knowledge and skills	<b>89.2%</b>	<b>Yes</b>	<b>2 (2 possible)</b>
<b>Outcome 7C:</b> Use of appropriate behaviors to meet their needs	<b>91.2%</b>	<b>Yes</b>	<b>2 (2 possible)</b>
<b>Bonus: 50% or greater parent response rate on parent survey or annual response increase of 5%</b>	<b>No</b>		<b>0</b>
<b>Bonus: District-driven improvement activities for enhancing student outcomes or district processes*</b>	<b>Yes</b>		<b>1</b>

\* A district may earn one bonus point for engaging in any one or more improvement activities such as a program self-assessment, assistive technology training, and/or special education training (training must be at least 2 hours and linked to indicators, student outcomes, or a district improvement plan).

<b>Results Points Earned</b>	<b>Total Points Possible</b>	<b>Rating</b>
<b>11</b>	<b>14</b>	<b>78.60%</b>

<b>Compliance Total Points Available</b>	<b>Compliance Points Earned</b>	<b>Compliance Performance</b>
<b>18</b>	<b>16</b>	<b>88.9%</b>
<b>Results Total Points Available</b>	<b>Results Points Earned</b>	<b>Results Performance</b>
<b>14</b>	<b>11</b>	<b>78.6%</b>
<b>TOTAL POINTS AVAILABLE</b>	<b>TOTAL POINTS EARNED</b>	<b>PERFORMANCE RATING</b>
<b>32</b>	<b>27</b>	<b>84.4%</b>
<b>FINAL DETERMINATION</b>		
<b>NEEDS ASSISTANCE</b>		

<b>Determination Scoring Matrix</b>		
<b>Percentage of Points Earned</b>	<b>Level of Determination</b>	<b>Other Findings</b>
85% to 100%	Tier 1: Meets Requirements	
70% to 84%	Tier 2: Needs Assistance	
55% to 69%	Tier 3: Needs Intervention	
less than 55%	Tier 4: Needs Substantial Intervention	

#### **History of Determinations for District**

**2013 - 2014:** *Needs Assistance*

**2014 - 2015:** *Meets Requirements*

**2015 - 2016:** *Needs Assistance*

NA: indicates that the indicator does not apply for the district (may be a new district or charter school) but still receives full credit for ease in calculations.

\* The Oklahoma State Department of Education (OSDE), Special Education Services (SES), identified six clusters of total student enrollment for comparison/reporting purposes: 1) 9,000 students and above, 2) 3,000 to 8,999 students, 3) 1,000 to 2,999 students, 4) 500 to 999 students, 5) 250 to 499 students, and 6) 1 to 249 students.

For more information, the 2016 *Oklahoma Annual Performance Report (APR)* can be located on the OSDE-SES website: <http://ok.gov/sde/documents/2012-10-01/special-education-data-and-reporting-part-b-children-ages-3-through-21>