Special Education

GENERAL SUPERVISION SYSTEM

MONITORING AND RESULT-BASED ACCOUNTABILITY

OKLAHOMA STATE DEPARTMENT OF
EDUCATION
— CHAMPION EXCELLENCE —

Contents

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 5 describes the required activities associated with each of the four levels of support.
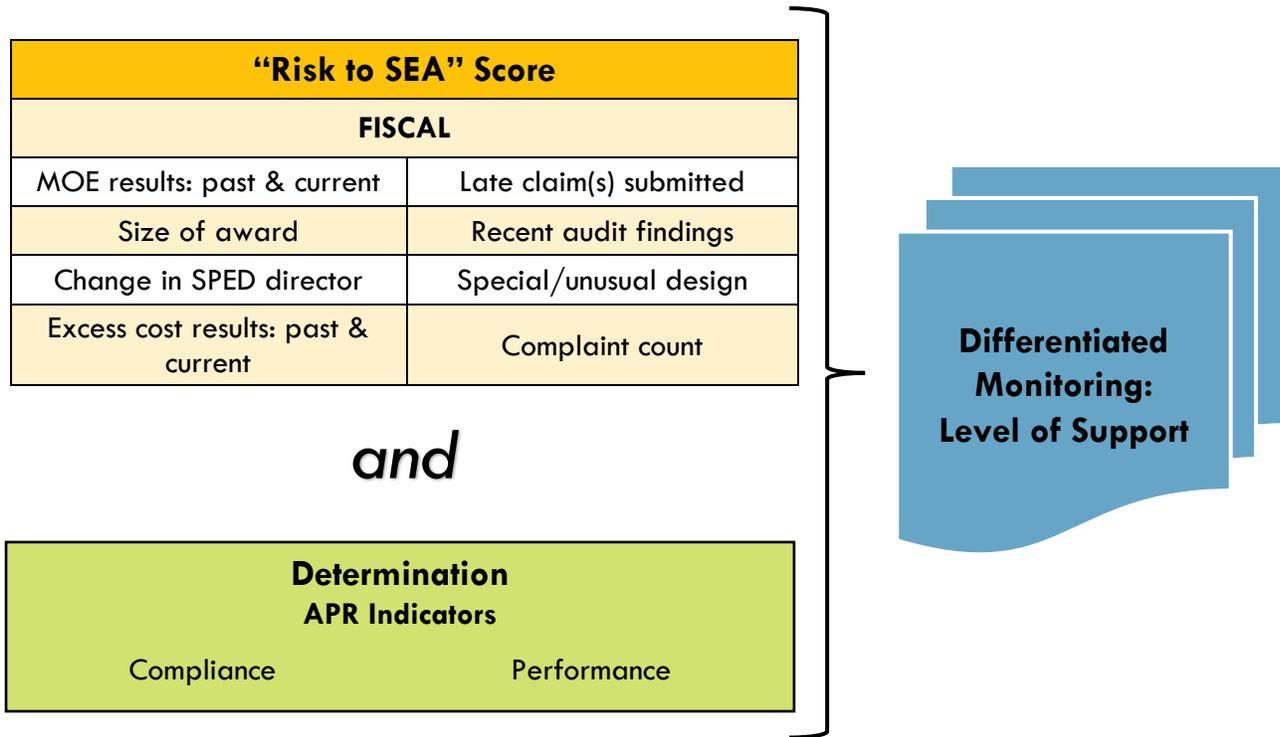
The OSDE-SES is incorporating a risk assessment into the calculation of the DMR in order to meet federal Uniform Grant Guidance requirements (2 CFR §200.331). This risk assessment must gauge the risk any LEA poses to the SEA (state education agency) in fiscal and other matters. Further, the SEA monitoring plan should be based on the results of the risk assessment. In 2017, the "Risk to SEA" score ("risk score") consisted solely of fiscal measures. In 2018, this risk score will incorporate other factors for concern such as complaint counts, directors' experience, and average caseload size. Each year, the factors in the risk assessment will be evaluated for their usefulness in measuring risk to the SEA.

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 risk score or determination rating that demonstrates the greater need in the district. The determination and risk assessment are discussed in further detail in the following paragraphs.

Determinations

Determinations identify each LEA's quality of compliance and performance for several indicators that the SEA reports to OSEP. The indicator data used are reported annually in the District Data Profile document to districts. Based on the quality of its compliance and performance data, the OSDE-SES will assign an LEA a determination tier: Meets Requirements, Needs Assistance, Needs

Diagram 1: Differentiated Monitoring

"Risk to SEA" Score	
FISCAL	
MOE results: past & current	Late claim(s) submitted
Size of award	Recent audit findings
Change in SPED director	Special/unusual design
Excess cost results: past & current	Complaint count

and

Determination
APR Indicators
Compliance   Performance

Differentiated Monitoring: Level of Support

Determinations are made annually in November via notification directly to directors and superintendents. 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 20 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 (34). Bonus points are available for meeting various criteria. If a district's score falls close to 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. Please refer to the determination template in Appendix B for the list of indicators included and the points allotted to each, as well as a description of the possible bonus points.

Note that districts' compliance with the rigorous 100% targets set by OSEP for indicators 4, 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. Substantial noncompliance may also result in a low determination tier, requiring additional improvement activities.

Determination tiers

Each determination level corresponds to a total percentage rating measuring the district's achievement in the compliance and performance indicators. Table 1 shows which percentage ratings correspond to each determination tier. The LEA's tier may 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 to 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	85% to 100%
Tier 2: Needs Assistance	70% to 84.9%
Tier 3: Needs Intervention	55% to 69.9%
Tier 4: Needs Substantial Intervention	less than 55%

Calculation of risk

The risk score is a measure of an LEA's risk to the SEA. Each LEA is assigned a risk category based on its risk score that may establish the district's DMR and corresponding level of support. Table 2 lists the eleven factors included in the 2018 fiscal risk score and their factor weights. Table 3 lists three mitigating factors used to decrease district's overall fiscal risk. 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

- <u>MOE Results: Current and Past</u> – 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.
- <u>Size of Award</u> – The higher the award amount, the higher the financial risk to the SEA.
- Change in SPED Director (Current) – Districts are at greater fiscal risk when the special education administrative duties are being conducted by a new director.
- <u>Excess Cost Results: Current and Past</u> – 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.
- <u>Recent Audit Findings</u> – Any Independent Audit findings related to special education will be reviewed for financial risk.
- <u>Special Design</u> – Districts that are in COOPs or Interlocals, or are Charter Schools.
- <u>Late Claim Submitted in FY18</u> – Claims must be submitted by August 1st. Any claim submitted after the due date must go before the board for approval.

- Complaint Count in FY18 – Higher numbers of complaints that resulted in findings against districts increase its risk to the SEA.

Table 2: Risk Factor Scoring

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

Table 3: Mitigating Factors to Reduce Risk

	Scoring Elements	
Attended "Hands on Budget" Training in 2018	No	Yes
	0	-1
Budget Application submitted by November 1	No	Yes
	0	-1
Attended First Year Director's Training	No	Yes
	0	-1

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 37, which OSDE-SES would interpret as imminent failure. A score of zero would be interpreted as extremely low risk.

Table 4: Risk Categories

Risk Category	Risk Score
	FY18
Category 1: Very Low Risk	0 – 8 points
Category 2: Low Risk	9 – 16 points
Category 3: Moderate Risk	17 – 24 points
Category 4: High Risk	25 – 37 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 outcome demonstrates higher need 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 "Level 3." If LEA Y receives tier 1 and category 1 ratings, its DMR is "Level 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 listed in the table are explained in the following sections. A brief reference list follows Table 5.

Table 5: Levels of Support

Level of Support	Corresponding…		Required Activities												
	Risk	Determination	Improvement						Monitoring			Response to Noncompliance			
			A	B	C	D	E	F	G	H	I	W	X	Y	Z
1	VL	MR	x									x	x	x	x
2	L	NA	x	x	x	x						x	x	x	x
3	M	NI	x	x	x	x	x	x	x			x	x	x	x
4	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. Data retreat
    F. Improvement plan
    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 if the district is substantially below target)
    Z. Data verification (prong 2)

Compliance activities

Required improvement activities

A. *Front-loaded technical assistance for improvement activities*

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

Self-assessments are required of all districts assigned to levels of support 2, 3 and 4. The goal is to encourage districts to consider their strengths and weaknesses related to one or more indicators on the determination or risk. They are meant to give an accurate picture of district, school and teacher practice supported by documentation. 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. Honest self-assessment lays the groundwork for reflective practice that is focused on improving outcomes. 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). It must be related to one of the indicators on the determination that needs improvement. 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. 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 how to conduct root cause analyses and using data to inform program improvement. The retreat will be open to personnel in districts assigned 'lower' levels of support, as space permits.

F. Improvement plan

The improvement plan is required of districts in levels of support 3 and 4. It is intended to serve as a tool for districts to use to guide improvement in risk, compliance and/or student performance. OSDE-SES will assist the district in defining what should be included in the improvement plan, deadlines, and support. OSDE-SES will support and monitor the implementation of the improvement plan over time.

Required monitoring activities

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 will include: 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 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.

Required activities in response to noncompliance

As stated previously, each state is required to report all findings of noncompliance on APR indicators 4a, and 9 through 13. Any district that is not 100 percent compliant must resolve all noncompliance in student records and confirm its resolution ("prong 1" activities) and then be monitored for continuous compliance ("prong 2" activities). These are federally required monitoring activities.

W. Letter of assurance

Districts found in noncompliance are required to provide the OSDE-SES with a letter of assurance. The purpose of the letter is for the LEA to inform the OSDE-SES that 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.

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 is also required to submit an improvement plan for the indicator(s). The improvement plan will identify current areas of strengths, improvement areas, barriers, SMART goal(s), action steps, person(s) responsible, a timeline for completion, and expected outcomes.

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 chance 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

	State Timeframe	District Timeframe
District Data Profile (DDP)	Draft issued each fall by October 15 using data collected during prior school years. Final version is sent with the Differentiated Monitoring (DMR) packet.	May respond within two weeks with questions and concerns.
Differentiated Monitoring Results (DMR)	Result is issued each fall by November 15 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.
Risk Assessment	Issued each fall by November 15 in the DMR packet.	May respond within two weeks with questions and concerns.
Determination	Issued each fall by November 15 in the DMR packet.	See above.
Noncompliance Findings*	Issued each fall by November 15, after DDP is finalized, with the DMR packet.	Noncompliance must be corrected within 45 days.
Prong 2 Review	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 2018 District Risk Score Example

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

FACTOR (FY)	District Result	District Score
Current MOE Results (2017)	Not met	4
Past MOE Results (2016)	Met	0
Size of Award (2019)	$100K to $500K	1
Change in SPED Director (2019)	More than 2 years	0
Current Excess Cost Results (2017)	Met	0
Past Excess Cost Results (2016)	Met	0
Recent Audit Findings (2017-18)	No	0
Special or Unusual Design (2019)	No	0
Late Claim Submitted (2018)	Yes	3
Complaint Count (2017-18)	Two	3
BONUS: Budget Training (2019)	No	0
BONUS: Timely Budget Application (2019)	Yes	-1
BONUS: 1st Year Director Training Partic. (2019)	Yes	-1
TOTAL RISK SCORE		**9**

Risk Category	Risk Score
Category 1: Very Low Risk	0 – 8 points
Category 2: Low Risk	9 – 16 points
Category 3: Moderate Risk	17 – 24 points
Category 4: High Risk	25 – 37 points

Appendix B: FY 2018 District Determination Example

District: **EXAMPLE DISTRICT**
Determination: **TIER 2: NEEDS ASSISTANCE**

Part B Compliance Matrix: 2017-2018			
Compliance Elements	**District**	**Target Met**	**Score**
Indicator 4A: Risk Ratio for students with disabilities with long-term suspensions/expulsions	1.6	Yes	2 (2 possible)
Indicator 9: Disproportionate representation of racial and ethnic groups in special education and related services due to inappropriate identification.	Not identified	Yes	2 (2 possible)
Indicator 10: Disproportionate representation of racial and ethnic groups in specific disability categories due to inappropriate identification	Not identified	Yes	2 (2 possible)
Indicator 11: Child Find; timely initial evaluation	92.2%	No	0 (2 possible)
Indicator 12: Early Childhood Transition; Individual Education Program developed/implemented by third birthday	93.0%	No	0 (2 possible)
Indicator 13: Secondary Transition Documented	100.0%	Yes	2 (2 possible)
Timely Complaint Decisions	NA	NA	2 (2 possible)
Timely Due Process Hearing Decisions	NA	NA	2 (2 possible)
Timely Completion of Monitoring Requirements	Not Timely		0 (2 possible)
Longstanding Noncompliance	Compliant		2 (2 possible)
Bonus: Timely on Child Count & End of Year Data Submissions & Certification	Yes		2 (2 possible)
Bonus: Attendance at Child Count *and* End of Year Training	No		0 (1 possible)
Compliance Points Earned	**Total Points Possible**		**Rating**
16	**20**		**80.0%**

Part B Results Driven Accountability Matrix: 2017-2018			
Student Assessment Elements	**District**	**Target Met**	**Score**
Indicator 3C: Percent of students with disabilities across all grades participating in Regular Statewide Assessments who achieve Proficient or Advanced scores			
Reading	12.05	No	0 (2 possible)
Math	11.42	No	0 (2 possible)
Other Results Elements	**District**	**Target Met**	**Score**
Indicator 1: Percent of youth with IEPs, in Cohort Year 2016, who graduated with a diploma	91.0%	Yes	2 (2 possible)
Indicator 2: Percentage of students with disabilities dropping out of high school	4.5%	Yes	2 (2 possible)
Indicator 7: 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…			
Outcome 7A: Positive social-emotional skills	93.0%	Yes	2 (2 possible)
Outcome 7B: Acquisition and use of knowledge and skills	90.2%	Yes	2 (2 possible)
Outcome 7C: Use of appropriate behaviors to meet their needs	92.4%	Yes	2 (2 possible)
Bonus: 50% or greater parent response rate on parent survey or annual response increase of 5%	No		0 (1 possible)
Bonus: District-driven improvement activities to enhance student outcomes or district processes*	Yes		1 (2 possible)
Results Points Earned	**Total Points Possible**		**Rating**
11	14		78.60%

* A district may earn one bonus point for each improvement activity (up to two) such as a program self-assessment, assistive technology training, and/or special education training that includes general education teachers (training must be at least ½ day and be linked to indicators, student outcomes, or a district improvement plan).

DETERMINATION DATA SUMMARY		
Compliance Points Available	Compliance Points Earned	Compliance Performance
20	16	80.0%
Results Points Available	Results Points Earned	Results Performance
14	11	78.6%
TOTAL POINTS AVAILABLE	TOTAL POINTS EARNED	**PERCENT TARGETS MET**
34	27	**79.4%**
TIER 2: NEEDS ASSISTANCE		

Percentage of Points Earned	Level of Determination
85% to 100%	Tier 1: Meets Requirements
70% to 84.9%	Tier 2: Needs Assistance
55% to 69.9%	Tier 3: Needs Intervention
less than 55%	Tier 4: Needs Substantial Intervention

History of Determinations for District	
2014 - 2015:	*Meets Requirements*
2015 – 2016:	*Needs Assistance*
2016 – 2017:	*Needs Assistance*

NA: Indicates that the indicator does not apply for the district but still receives full credit for ease in calculations.

NR: Indicates that the district did not submit data to calculate compliance or performance. District receives no credit.

For more information, the FFY 2017 *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