



Kentucky Department of

Our Children,



Our Commonwealth

Education

My District Has a CAP, Now What?

Presented By: Alisa Zimmerman
Exceptional Children Consultant
Office of Special Education and Early Learning



September 2019



Monitoring Introduction

- ▶ **Focused**
 - **State Consolidated**
 - **Corrections**
 - **Desk Audits**
 - **Management**
 - **Special**



Number of student files to be reviewed:



District Child Count	#Files to Review (in area of focus)
100 or fewer	10
101 or more	10% up to 100

Student Record Selection

- ▶ Records include a representative sample
 - Each school site, all ages
 - Disability category
 - Gender
 - Race/ethnicity
 - English learners
 - Suspended, expelled, IAES, alternative
 - Characteristics



State Student ID (SSID)



- ▶ District notified of the associated SSID #s
- ▶ Upload files within 10 business days
- ▶ KDE Team lead organizes time and place for audit
 - On and off site
 - Interviews

OSEP Memo 09-02



UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

OCT 17 2008

Contact Person	
Name:	Ruth Ryder
Telephone:	(202) 245-7513

OSEP 09-02

TO : Chief State School Officers
Lead Agency Directors

FROM : William W. Knudsen *William W. Knudsen*
Acting Director
Office of Special Education Programs

SUBJECT : Reporting on Correction of Noncompliance in the Annual
Performance Report Required under Sections 616 and 642 of the
Individuals with Disabilities Education Act.

Introduction

Pursuant to sections 616(d) and 642 of the Individuals with Disabilities Education Act (IDEA), the Department reviews each State's Annual Performance Report (APR) and, based on data provided in the State's APR, information obtained through monitoring visits, including verification visits, and any other public information, determines if the State: Meets Requirements, Needs Assistance, Needs Intervention, or Needs Substantial Intervention. In



Plickers

▶ A-True

▶ B-False



OSEP Memo 09-02



1-States must identify all noncompliance regardless of the source of the data establishing noncompliance?

▶ **A-True**

▶ **B-False**

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2-The State must identify where noncompliance occurred, the percentage level of noncompliance and the root cause?

▶ **A-True**

▶ **B-False**

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3-The State must require the LEA or the Early Intervention Services (EIS) program to change policies, procedures and/or practices that contribute to or resulted in noncompliance?

▶ **A-True**

▶ **B-False**



OSEP Memo 09-02

4-The State is required to verify correction of noncompliance regardless of the specific level of noncompliance?

▶ **A-True**

▶ **B-False**



OSEP Memo 09-02

- ▶ ...account for all instances of non compliance
- ▶ ...where, the percentage level and root cause of the non compliance
- ▶ ...require changes in policies, procedures and/or practices
- ▶ ...determine ongoing correct implementation of regulations



Non compliant? Then What?

- ▶ **Root Cause Analysis**
- ▶ **Corrective Action Plan (CAP)**
- ▶ **OSEP-as soon as possible but in no case greater than one year from notification**



CAP Activity Timeline

- ▶ (1) development
- ▶ (2) training
- ▶ (3) activities
- ▶ (4) comparison folders



Development

- ▶ **Within 10 business days**
 - Provide additional information or clarify
- ▶ **KDE responds within 10 business days**
 - Inform of any changes to report
- ▶ **CAP draft due within 30 business days**
 - Could be completing the root cause analysis and draft
- ▶ **CAP status given within 30 business days**



Root Cause Analysis

- ▶ **Why? OSEP Memo 09-02**
- ▶ **What? Sometimes called the 5 whys; it is a problem solving method**
- ▶ **How? KDE will supply a template if needed but districts can use any format**
- ▶ **When? After the report of findings, while developing the CAP**



Training

- ▶ What issues were cited?
- ▶ Who needs training?
- ▶ Onboarding?
- ▶ Who leads the training?
- ▶ Training materials?
- ▶ Verification?



Activities

- ▶ Extensions of learning
- ▶ Meaningful
- ▶ Systemic change
- ▶ District responsibility
- ▶ Student level change
- ▶ Peer review



Comparison

- ▶ The verification of comparison files continues until 100% compliance
- ▶ As soon as possible but in no case greater than one year
- ▶ Use the same method of measurement as the original review



Comparison Files



Level of Compliance (per Issue)	# of Identified IDEA Students (in area reviewed)	# of Comparison Files to Review (per issue)
100%	NA	0
90-100%	100 or less	3
	101-1,000	10
	1,001 or more	20
0-89%	100 or less	10
	101-1000	20
	1,001 or more	30

Contact Information

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