

**Data Driven Enterprises Evaluation Recommendations
NHDOE Response
Progress Report, dated June 30, 2014**

A. Use of Data in Focused Monitoring and Program Approval		
1. Expand the use of data to guide the selection of district for Focused Monitoring reviews.		
Date of Entry	Response	Status
Fall 2012	Districts are selected annually to participate in Focus Monitoring based on a review of each district's State assessment results. Districts are placed in a cohort group based on total student enrollment. Once the districts are selected in the cohort group, a review of each district's data is conducted to determine the district which has the largest gap based on the proficiency level for all students compared to students with disabilities.	Completed
December 2012	During the forum group held on December 20, 2012 a request was made of the NHDOE to consider expanding the selection process to include other areas. The NHDOE will convene a group of stakeholders in March 2013 to discuss expanding the selection process to include other areas for selection to participate in Focus Monitoring process.	<p>The U.S. Department of Education's Office of Special Education Programs (OSEP) recently changed its approach to monitoring and supporting States with the goal of improving educational and functional outcomes for children with disabilities. To place a greater emphasis on monitoring for results, OSEP has added a new indicator (B-17) to the State Performance Plan (SPP) and Annual Performance Report (APR) that requires States to develop a State Systemic Improvement Plan (SSIP) focused on improving results for children with disabilities. The Bureau of Special Education will be submitting the first component of the SSIP beginning with the FFY 2013 SPP/APR due in February 2015.</p> <p>June 30, 2014- The Bureau of Special Education is preparing for the submission of the FFY 2013 SPP/APR due in February 2015.</p>
February 2013	Prior to June 30, 2013 the NHDOE will convene a stakeholder group to consider the current use of the achievement gap as the Key Performance Indicator (KPI) and other factors, such as compliance history (prevalent/gravity of IDEA complaint decisions and due process hearing results) and performance on State Performance Plan Indicators (especially 1, 2, 3c and 5) to be utilized in the selection process to participate in Focused Monitoring.	<p>There will be stakeholder input to develop the State Systemic Improvement Plan (SSIP). The Bureau of Special Education intends to convene stakeholders in the Spring of 2014.</p> <p>June 30, 2014 - The Northeast Regional Resource Center (NERRC) collaborated with the Office of Special Education Program (OSEP) to sponsor the State Systemic</p>

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		<p>Improvement Plan (SSIP) regional meeting on March 19th and 20th. NH's State Director of Special Education was a member of the planning team for this meeting. NH's Bureau of Special Education staff, Parent Information Center (PIC) staff and a representative from a district also participated in this two day conference.</p> <p>As part of the identification of the focus area for the State Systemic Improvement Plan (SSIP) of the State Performance Plan (SPP), the Bureau of Special Education conducted a data and infrastructure analysis. Based on current research around improving educational outcomes, a Governor Association briefing on early literacy, the NH Comprehensive Strategic Plan for Early Childhood (developed with broad stakeholder input) and data from the past several years, the Bureau has determined that preschool special education will be the broad area of focus for the SSIP.</p> <p>The Bureau of Special Education presented to the State Advisory Committee (SAC) during the December and May meetings. Ruth Littlefield will also be seeking input from SAC during the September retreat regarding the identification of the State Identified Measurable Result (SIMR) for the State Systemic Improvement Plan (SSIP).</p> <p>The Bureau of Special Education presented preliminary data to the NH Interagency Coordinating Council (ICC) for the State Identified Measurable Result (SIMR) on June 6, 2014 and will continue to seek input from that group moving forward. Information on the SSIP and SIMR were shared with Spark-NH (the NH State Early Childhood Advisory Council) on June 26, 2014.</p>
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2. Expand the use of data to guide Focused Monitoring and Program Approval methodologies in districts and facilities being visited.		
Date of Entry	Response	Status
Fall 2012	<p>The NHDOE has addressed this for the 2012-2013 Focused Monitoring process. FM team leaders and districts are not only reviewing the achievement gap but also considering district data profiles and district determinations, as well as other district generated data such as district assessments, attendance, discipline, teacher staffing, etc. The district data profiles highlight district’s compliance and performance on the fourteen indicators determined by the Office of Special Education Programs (OSEP) as outlined in the New Hampshire State Performance Plan.</p>	<p>The 2013-2014 Focused Monitoring Process continues to address this. FM team leaders and districts are not only reviewing the achievement gap plus district data profiles and district determinations but also district assessments, attendance, discipline, teacher staffing, etc. The district data profiles highlight district’s compliance and performance on the indicators required by the Office of Special Education Programs (OSEP) as outlined in the New Hampshire State Performance Plan (SPP).</p> <p>June 30, 2014- The contract with Focused Monitoring will terminate on June 30, 2015. The Bureau of Special Education is investigating how to fiscally support the efforts of the SSIP.</p> <p>The Bureau of Special Education monitors all districts in the State through a variety of mechanisms as part of the State Performance Plan (SPP), including both compliance and performance monitoring. This data is published annually on the Department’s website and compare district performance to targets as well as to the overall State performance.</p> <p>New Hampshire was one of two States selected to partner with the OSEP-funded Early Childhood TA Center (ECTAC) to receive intensive TA over two years regarding the implementation, scale-up and sustainability of evidenced-based practices for</p>

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		improving outcomes for infants, toddlers and preschool children with or at risk for delays or disabilities and their families. Cross-sector support was garnered for this initiative and ongoing input from a broad range of stakeholders is built into this process. This initiative has a strong data and evaluation component.
3. Create purposeful samples of students for each compliance hypothesis.		
Date of Entry	Response	Status
Fall 2012	The NHDOE has revised the IEP selection process to include a total of eight students per school. Eight students per school were selected to ensure that if each of the eight files reviewed had a child specific finding of noncompliance the district would be able to adhere to the federally mandated 45 days to correct the noncompliance. The process for the IEP review to determine compliance was revised for the 2012-2013 school year. The process for the IEP review to determine compliance has two review methods; the FM IEP review which involves participation of district staff, peer review and FM team member, as well as an onsite IEP file review for compliance which is done by the NHDOE and NHDOE representatives.	NHDOE has addressed this recommendation Completed
January 8, 2013	The NHDOE continues through the Focused Monitoring IEP Review Process to use a representative selection process that is purposeful. Specifically the NHDOE is intentionally insuring that the selection includes differing disabilities, grade levels, case managers, and gender/race/ethnicity. Equally important is that the IEPs selected are representative of students who have been in the district for at least two–three years in order to ensure that the district can provide a longitudinal review of student data.	NHDOE has addressed this recommendation Completed

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B. Focused Monitoring and Program Approval Instruments and Methodology.		
1. Ensure proper training in IDEA and State special education requirements prior to an individual's participation in Focused Monitoring or Program Approval.		
Date of Entry	Response	Status
Fall 2012	The Focused Monitoring/Program Approval project has a project manager to organize and oversee all aspects of the project. The project manager communicates weekly by teleconference or in meetings on all program approval matters including but not limited to budget, maintenance of the onsite schedule, status of corrective actions activities, correction of child specific noncompliance, updating of new special education programs seeking approval, and State issued memos. The NHDOE staff member who coordinates the Focused Monitoring/Program Approval project meets monthly with the project manager and other team member to discuss the project and update the team on any new special education requirements.	NHDOE has addressed this recommendation Completed
November 2012	There is training for individuals who have applied and been selected to be a Focused Monitoring IEP Review Facilitator. The training discusses the key characteristics of a good facilitator as well as a round table discussion of problem solving solution for facilitators. The second half of the training consists of reviewing the Focused Monitoring IEP Review-Data Collection form. The FM team discusses each component of the form.	Completed
January 8, 2013	The majority of the NHDOE Program Approval Team members are certified in the field of special education and are experienced teachers/related service providers and/or systems administrators. The general educators on the team are not charged with facilitating the IEP Reviews, nor are they responsible for conducting file reviews of any kind. Protocols for the NHDOE Program Approval Team members are in place, templates and documents are reviewed on a yearly basis to ensure accuracy and alignment to State and federal special education rules and regulations. To insure consistency among team members, all processes, protocol and documents are reviewed and discussed periodically. On occasion, there is cause for recruiting visiting team members who serve as IEP Review Facilitators. These individuals are recruited and selected by the NHDOE Program Approval Team, and provided with yearly training, as well as on-site training immediately prior to the Focused Monitoring IEP Reviews.	Completed The Bureau of Special Education is conducting special education compliance monitoring visits for the second year. The special education compliance monitoring is conducted by NHDOE staff.

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2. Eliminate “one-size-fits-all” compliance review documents.		
Date of Entry	Response	Status
Fall 2012	IDEA does not mandate a compliance hypothesis for determining monitoring activities. However, the FM process is designed so that schools will develop compliance hypothesis regarding the performance of students with disabilities on the State assessment during the year- long processes. This includes a root cause analysis of performance on the State assessment.	NHDOE has addressed this recommendation Completed
3. Ensure that Focused Monitoring and Program Approval compliance review instruments accurately reflect federal and State requirements.		
Date of Entry	Response	Status
Fall 2012	NHDOE has revised our IEP review forms to include administrative rules and IDEA citations (federal and State regulations). NHDOE has clearly stated within the forms what is and is not a federal or State regulations question.	NHDOE has addressed this recommendation Completed
February 2013	NHDOE will review the forms and work towards the elimination of any items that cannot be cited back to a federal or State regulation for compliance review.	<p>The Bureau of Special Education has created a self-assessment data collection form which districts are asked to complete prior to the special education compliance monitoring visit. The data collection identifies whether the compliance area is mandated by the Individuals with Disabilities Education Act (IDEA) and/or the New Hampshire Rules for the Education of Children with Disabilities.</p> <p>June 30, 2014- The Bureau of Special Education has revised the self-assessment data collection form with feedback from the districts. For the 2014-2015 school year, the Bureau of Special Education is requiring all district forms regarding the special education process to be provided to the Bureau of Special Education prior to the onsite monitoring visit.</p>

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		<p>The Special Education Compliance Monitoring Review Report contains the following components:</p> <ul style="list-style-type: none"> • Overview of the Special Education Monitoring Process • Policies, Procedures and Effective Implementation <ul style="list-style-type: none"> ○ Effective Implementation of Practices • Recommendations to address problematic practices that do not represent noncompliance • Special Education Personnel • Monitoring Special Education Process • Compliance Summary for the district • Findings of Noncompliance <p>The 2014-2015 report will also include an appendix with the district's approved special education instructional programs.</p>
4. Separate Focused Monitoring and Program Approval from other school improvement and/or accreditation activities.		
Date of Entry	Response	Status
January 8, 2013	The Focused Monitoring IEP Review Process is now intentionally scheduled and completed earlier in the school year; with additional onsite compliance reviews of IEPs completed by the NHDOE Bureau of Special Education staff. Findings and results of both these reviews are summarized and reported to the school district. Data from the Focused Monitoring IEP reviews are now contained in a stand-alone report, which has timelines and processes for reporting and providing evidence of corrective actions.	NHDOE has addressed this recommendation Completed

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5. Increase the sample size for file reviews and case studies.		
Date of Entry	Response	Status
January 8, 2013	The number of IEPs to be reviewed in the Focused Monitoring process has been increased to a minimum of eight per school. There were no changes to the number of case studies conducted in private school settings.	NHDOE has addressed this recommendation Completed
6. Increase the amount of time allocated for compliance reviews and case studies.		
Date of Entry	Response	Status
January 8, 2013	Increased time has been allocated for compliance review activities. Additionally, the NHDOE FM and Program Approval Teams are responsible for the review of all special education policy/procedures/staff credentials and the data required in the submission of application materials. Such activities extend well beyond the two days that are spent reviewing IEPs. All of these activities, combined with extensive consultation with the Bureau of Special Education, are estimated to be a minimum of 8-10 days per District directed solely to the review of compliance.	NHDOE has addressed this recommendation Completed
7. Employ additional strategies in the identification of noncompliance.		
Date of Entry	Response	Status
Fall 2012	Through the IDEA requirements of general supervision, the NHDOE does employ a variety of strategies in the determination of noncompliance. The NHDOE employs onsite visits, file reviews, desk audits and investigations to determine noncompliance.	NHDOE has addressed this recommendation Completed
January 8, 2013	The protocol and process used by the NHDOE, Bureau of Special Education has always required submission of evidence when determining compliance, such as documentation in NHSEIS, evidence from onsite file reviews, district submission of desk audit data, review of policies and procedures, and interviews with staff based on specific areas of compliance. Furthermore, OSEP monitors the Bureau annually to ensure that these protocols and processes are sufficient to meet the requirements of IDEA.	NHDOE has addressed this recommendation Completed
Fall 2012	The NHDOE FM and Program Approval Teams have assured the NHDOE that they have always required submission of evidence when determining compliance.	NHDOE has addressed this recommendation Completed
February 2013	The NHDOE annually reviews and updates the processes for monitoring and identifying noncompliance in NH school districts based on new information from OSEP or NERRC. The FM Process is only one method the NHDOE uses to identify	NHDOE has addressed this recommendation Completed

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	noncompliance. Numerous indicators, such as 11, 12 and 13 are monitored separately from the FM process. NHDOE is always looking at ways of streamlining its monitoring processes.	
8. Increase the involvement of NHDOE in the Focused Monitoring and Program Approval compliance reviews.		
Date	Response	Status
Fall 2012	<ul style="list-style-type: none"> • The NHDOE guides the compliance review activities for the onsite visits and is the final arbitrator in the finding of non-compliance. • The NH Department of Education continues to be responsible for verification of correction of non-compliance and reporting to OSEP. • The NHDOE continues to take an active role in the FM and Program Approval onsites. The NHDOE Special Education Bureau staff has begun to conduct additional onsite IEP file reviews for compliance. • The NHDOE continues to assist in answering any questions and providing technical assistance regarding the implementation of IDEA and/or State regulations. • The NHDOE involvement allows the State to guide compliance review. 	NHDOE has addressed this recommendation Completed
C. Focused Monitoring and Program Approval Reports and Corrective Action Plans.		
1. Eliminate Achievement Team (in Focused Monitoring) and accreditation information (Program Approval) from IDEA compliance reporting.		
Date of Entry	Response	Status
January 8, 2013	As a result of the recommendation, the Focused Monitoring IEP Review Summary Report is a stand-alone document and is no longer incorporated into the Year End Focused Monitoring Report. Compliance activities are separate from Achievement Team Activities. IEP Review Summary reports no longer contain information related to "improvement activities." The reporting is directed to findings of noncompliance and required corrective actions. While the Achievement Team is informed of the data collected during the IEP Review Process, there are two distinct reports generated.	NHDOE has addressed this recommendation Completed

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2. Improve the clarity with which findings are reported.		
Date of Entry	Response	Status
Fall 2012	Based on the recommendation of DDE, the NHDOE's FM compliance reports carefully delineate the following: 1) the specific areas of compliance reviewed, 2) the specific results of the compliance file review, and 3) the State's determination regarding noncompliance in each area of review, including whether there is an individual instance of noncompliance and if the district is correcting implementing State and federal regulations. Improvement plans are addressed in a separate report.	NHDOE has addressed this recommendation Completed
3. Eliminate the practice of including "suggestions" related to IDEA compliance in Focused Monitoring and Program Approval reports.		
Date of Entry	Response	Status
Fall 2012	As a result of this recommendation, the NHDOE has eliminated the practice of including "suggestions" in the written findings of the noncompliance report.	NHDOE has addressed this recommendation Completed
4. Within each Corrective Action Plan, include an appropriate description of acceptable evidence of correction for each finding.		
Date of Entry	Response	Status
February 2013	Written findings of noncompliance made by the NHDOE, Bureau of Special Education include a description of what is required of the district in order to demonstrate timely correction of the noncompliance. Corrective action plans are required only in certain circumstances. They are used as part of the year-long Focused Monitoring process, which includes both school improvement as well as compliance. The Bureau also uses corrective action plans as needed to organize and support districts with understanding the requirements for providing evidence of correction of noncompliance. Corrective action plans include timelines, required actions and necessary documentation to demonstrate correction. Each corrective action plan has built in action steps, timelines and responsibilities. Since Focused Monitoring is a year-long process, the FM Technical Assistance team works with districts to develop the district's corrective action plan. The timelines in the plan detail what evidence is required for correction and federally mandated timelines are met. The NHDOE includes the description of acceptable evidence of correction of noncompliance in the written finding of noncompliance. This process is consistent	NHDOE has addressed this recommendation Completed

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	<p>with OSEP guidance (see the “FREQUENTLY ASKED QUESTIONS REGARDING IDENTIFICATION AND CORRECTION OF NONCOMPLIANCE AND REPORTING ON CORRECTION IN THE STATE PERFORMANCE PLAN (SPP)/ANNUAL PERFORMANCE REPORT (APR) SEPTEMBER 3, 2008.”) In determining the steps that the district or facility must take to correct the noncompliance and to document such correction, the NHDOE considers a variety of factors, including: (1) whether the noncompliance was extensive or found in only a small percentage of files; (2) whether the noncompliance showed a denial of a basic right under IDEA (e.g., a long delay in initial evaluation beyond applicable timelines with a corresponding delay in the child’s receipt of FAPE, or a failure to provide any services in accordance with the IEP); and (3) whether the noncompliance represents an isolated incident in the district or facility, or reflects a long-standing failure to meet IDEA or NH State requirements. Thus, while the NHDOE may determine the specific nature of the required corrective action, the NHDOE ensures that any level of noncompliance is corrected as soon as possible, and in no case later than one year after the NHDOE's identification.</p> <p>1. Clear expectations of the required actions and necessary documentation for demonstration of correction of noncompliance including:</p> <ul style="list-style-type: none"> • <i>Identification by the district of possible root cause(s) of the noncompliance;</i> • <i>Changes to any policies, procedures or practices that contributed to the noncompliance;</i> • <i>For any noncompliance concerning a child-specific requirement, evidence that the district has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district;</i> • <i>For timeline requirements, the district must provide evidence that the required action has been completed, though late; and</i> • <i>Updated data, collected after the identification of noncompliance that demonstrate that the district is correctly implementing the specific requirement.</i> • <i>Provide the district with the specific timeline for them to demonstrate correction of the noncompliance. This must allow the</i> 	
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	<p><i>NHDOE to verify correction as soon as possible but in no case later than one year from the date of the written finding(s). Emphasis on as soon as possible; set the State established deadline as earlier as is reasonable and keep going until corrected. If data are not submitted within NHDOE required timelines there may be additional enforcement actions, and it will be considered as part of determination of the district's implementation of IDEA.</i></p> <ul style="list-style-type: none"> • <i>Any enforcement actions taken as a result of the noncompliance. This may vary depending on the severity and frequency of the noncompliance.</i> • <i>Reporting requirements specifying if periodic data reports are required or just one report to demonstrate that the noncompliance is corrected. Also, indicate if data are to be submitted to the NHDOE, can be collected through other sources (such as NHSEIS) or if there will be an onsite file review.</i> 	
5. Eliminate use of the "Assurance Form: to address child-specific findings of noncompliance.		
Date of Entry	Response	Status
Fall 2012	Based on DDE's recommendation, the NHDOE has eliminated the use of the assurance forms for child specific noncompliance that were previously used in the focused monitoring process. The NHDOE ensures that both prongs of OSEPs Memorandum 09-02 are being addressed. The NHDOE reports on both prongs annually in the APR, including findings not related to specific APR indicators, such as measurable annual goals and personnel. The NH DOE is monitored by OSEP on this issue.	NHDOE has addressed this recommendation Completed
6. Ensure that both prongs of OSEP's Memorandum 09-02 are satisfied when conducting activities to verify correction of noncompliance.		
Date of Entry	Response	Status
February 2013	The NHDOE verifies that each district and facility (nonpublic special education program) with a written finding of noncompliance (1) is correctly implementing the specific regulatory requirements, (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring, State data system or desk audit; and (2) has corrected each individual case of noncompliance or in the case of a timeline-specific requirement, completed the	NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation Completed

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	<p>required action, although late, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memorandum 09-02. Each finding of noncompliance is required to be verified by the Bureau as corrected as soon as possible but in no case greater than one year from the date of the finding. Districts and/or facilities that demonstrate correction noncompliance (for each individual instance of noncompliance and through updated data) within the NHDOE established timelines are verified as corrected without further enforcement action. The NHDOE takes additional enforcement action as needed when districts or facilities are not able to demonstrate correction of noncompliance within timelines.</p> <p>FFY 2011 APR Indicator 15 (due February 15, 2013): For the 189 findings identified in 2010-2011, the NHDOE used the following process to verify correction as soon as possible but no later than one year from identification. The State verified the correction of the noncompliance either through on-site visit and file review and/or through a NHDOE desk audit monitoring review of district-submitted written documentation of the correction of the noncompliance. The NHDOE verified correction of noncompliance to ensure that the LEA had corrected each individual case of noncompliance, unless the child was no longer in the jurisdiction of the LEA. Specifically, the NHDOE reviewed files for correction or required LEAs to submit data demonstrating individual correction.</p> <p>In addition, the NHDOE verified that the LEA was correctly implementing the specific regulatory requirements related to the findings through the review of subsequent data demonstrating 100% compliance. The verification was accomplished through an on-site monitoring visit with a review of a representative selection of student files, policies and procedures and other evidence to ensure that the LEA is implementing the specific regulatory requirements. The NHDOE file review includes a representative selection of student files to ensure confidence that the LEA has implemented the regulations with 100% compliance. In responding to indicators 4B, 11, 12 and 13 in the FFY 2011 APR, the NHDOE reported on the correction of noncompliance as described in the NH Part B FFY 2010 SPP/APR Response Table.</p>	
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<p>The findings reported in this indicator reflect all noncompliance identified through monitoring, data collections, and dispute resolution. Written findings were made consistent with OSEP Memorandum 09-02 that identified the LEAs where noncompliance occurred and their levels of noncompliance and included the regulatory citations. All noncompliant practices were addressed through root cause analyses and improvement activities. Policies and procedures were revised as necessary.</p> <p>In addition, details regarding the verification of correction of noncompliance for specific indicators are described below.</p> <p>FFY 2011 APR Indicator 4B: For each of the 2 districts that had significant discrepancies by race or ethnicity in the rates of suspensions and expulsions, the NHDOE conducted an on-site visit to review the district’s policies, procedures and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that these policies, procedures, and practices comply with IDEA. The NHDOE conducted the review required by 34 CFR §300.170(b) by permitting the districts to provide data and information to the NHDOE during the on-site visit based on the <i>New Hampshire Department of Education Indicator 4 Self-Assessment Checklist</i>. These on-site reviews occurred prior to the February 15, 2013 submission of the APR.</p> <p>Based on these reviews, the NHDOE was able to determine that <u>2</u> of the 2 districts had areas of noncompliance with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.</p> <p>Of these 2 districts, one district was determined to have policies and procedures in place to implement IDEA relative to this indicator, however; local practices regarding the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards contributed to the significant discrepancy. In order to effectively change these practices, the district has plans for systemic professional development and support for</p>	
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<p>administration and staff in the high school regarding the appropriate implementation of the procedures, specifically with respect to students with IEPs who have challenging behaviors, including issues related to drug and alcohol abuse. The other district had a policy specific to manifestation determination that contributed to the significant discrepancy, which cascaded into issues regarding related procedures and practices. This district is working with the local administration and the school board to correct this policy and to develop the appropriate procedures related to this policy. Once this is done, training will be provided for staff around appropriate practices. Written findings of noncompliance, consistent with OSEP Memorandum 09-02, were made based on these data. The NHDOE will report on the correction of noncompliance as required in the next APR.</p> <p>FFY 2011 APR Indicator 9: 0% of districts had disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.</p> <p>FFY 2011 APR Indicator 10: 0% of districts had disproportionate representation of racial and ethnic groups in specific disability categories that are the result of inappropriate identification.</p> <p>No districts were identified with overrepresentation with the measurement for Indicator 9 or Indicator 10. If any districts had been determined to have overrepresentation in the identification of students with disabilities (or in the specific subgroups), the NHDOE would have utilized the following monitoring process to determine whether the disproportionate representation was the result of inappropriate identification. The NHDOE would examine the districts' child find, evaluation, eligibility and other related policies, procedures and practices to ensure an equitable consideration for special education and related services for all racial and ethnic groups and that those eligibility determinations were conducted appropriately. For each district with overrepresentation of identification, the State would have consulted with the local Director of Special Education regarding the data and reviewed local policies, procedures and practices related to this indicator. In addition, the NHDOE would have reviewed the data for complaints and due process hearings for any issues regarding inappropriate identification that may have been found in either of these dispute resolution mechanisms.</p>	
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FFY 2011 APR Indicator 11: Timeliness of Initial Evaluations. In FFY 2010, the NHDOE made written findings of noncompliance relative to Indicator 11 based on FFY 2009 data. The level of compliance for FFY 2009 was 95%. In FFY 2010, the NHDOE made a finding for each individual instance of noncompliance. Written findings of noncompliance based on the FFY 2010 data were made in FFY 2011. For each finding, the NHDOE verified the correction of noncompliance, consistent with OSEP Memorandum 09-02, as follows:

(1) The NHDOE verified that each district was correctly implementing 34 CFR §300.124(b), (i.e., achieved 100% compliance) based on a review of data subsequently collected through a desk audit monitoring process. During the correction period, the NHDOE reviewed local policies and procedures and supported districts with accurate data collection and entry in order to ensure districts were providing timely evaluations.

(2) The NHDOE, through a data review of the desk audits submitted by districts and additional data as needed, verified that each district had completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child was no longer within the jurisdiction of the LEA. Therefore, the NHDOE has verified that, for each of these individual cases, the district had completed the required action, although late, unless the child was no longer within the jurisdiction of the LEA, prior to the identification of findings, as reported in the FFY 2010 APR.

These findings reflect all noncompliance identified with this indicator through monitoring and data collections and written findings were made consistent with OSEP Memorandum 09-02 that identified the LEAs where noncompliance occurred and their levels of noncompliance and included the regulatory citations. All noncompliant practices were addressed through root cause analyses and improvement activities. Policies and procedures were revised as necessary.

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<p>FFY 2011 APR Indicator 12: Timeliness of Transitions from Early Intervention to Preschool Special Education. For each finding, the NHDOE verified the correction of noncompliance, consistent with OSEP Memo 09-02, as follows:</p> <p>(1) The NHDOE verified that each district was correctly implementing 34 CFR §300.124(b), (i.e., achieved 100% compliance) based on a review of data subsequently collected through a desk audit monitoring process. During the correction period, SSECT reviewed local policies and procedures and supported districts with accurate data collection and entry in order to ensure districts were providing timely and quality transitions.</p> <p>(2) Prior to issuing written findings of noncompliance, the NHDOE, through a data review, verified that each district had developed and implemented the IEP, although late, for any child for whom implementation of the IEP was not timely, unless the child was no longer within the jurisdiction of the LEA. Therefore, the NHDOE has verified that, for each of these individual cases, the district had completed the required action, although late, unless the child was no longer within the jurisdiction of the LEA, prior to the identification of findings, as reported in the FFY 2010 APR.</p> <p>These findings reflect all noncompliance identified with this indicator through monitoring and data collections and written findings were made consistent with OSEP Memorandum 09-02 that identified the LEAs where noncompliance occurred and their levels of noncompliance and included the regulatory citations. All noncompliant practices were addressed through root cause analyses and improvement activities. Policies and procedures were revised as necessary.</p> <p>FFY 2011 Indicator 13: Secondary Transitions. For each finding identified in FFY 2010, the NHDOE verified the correction of noncompliance, consistent with OSEP Memo 09-02, as follows:</p> <p>(1) The NHDOE verified that 13 of the 14 districts with a finding of noncompliance were correctly implementing 34 CFR §300.124(b), (i.e., achieved 100% compliance) based on a review of data subsequently collected through a desk audit monitoring process and/or through an on-site file review.</p>	
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	<p>(2) The NHDOE, through a desk audit data review, verified that each individual instance of noncompliance was corrected, unless the student was no longer within the jurisdiction of the LEA. The data that were reviewed included the individual student's updated and signed IEP and any other necessary documentation such as meeting invitations and age-appropriate transition assessments.</p> <p>For the one district with ongoing noncompliance, the NHDOE has verified that each individual instance of noncompliance identified in 2010-2011 has been corrected. The NHDOE has taken additional enforcement actions with this district requiring monthly reporting to the NHDOE including updated evidence of implementation of the regulations of IDEA relative to this indicator and mandatory trainings. The NHDOE has redirected a portion of the district's federal funds to engage in specific actions to remedy the noncompliance.</p>	
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7. Formalize the State's tracking and follow-up procedures for districts and facilities that are in Corrective Action Plans, and apply the procedures uniformly across the State.		
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Date of Entry	Response	Status
February 2013	<p>The NHDOE, Bureau of Special Education has in place and implements formalized tracking and follow-up procedures for districts and facilities (nonpublic special education programs) that have been issued a written finding of noncompliance. These procedures are implemented consistently across the State. When a finding of noncompliance is made in a nonpublic facility that includes an individual instance of noncompliance, the district of liability is also cited for that noncompliance.</p> <p>Written findings of noncompliance, based on guidance from OSEP, are generally made within 90 days of discovery. As required by OSEP, written findings of noncompliance include:</p> <ul style="list-style-type: none"> • <i>The State's conclusion that the LEA is in noncompliance;</i> • <i>The citation of the applicable statute or regulation;</i> • <i>A description of the quantitative and/or qualitative data supporting the State's conclusion that there is noncompliance (accounting for all instances of noncompliance and including the percentage or level of noncompliance). This should include both child-specific instances as well as noncompliance in the implementation of the regulations.</i> 	<p>NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation</p> <p style="text-align: center;">Completed</p>

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	<p>Corrective actions plans are required only in certain circumstances. They are used as part of the year-long Focused Monitoring process, which includes both school improvement as well as compliance. The Bureau also uses corrective action plans as needed to organize and support districts with understanding the requirements for providing evidence of correction of noncompliance. This includes timelines, required actions and necessary documentation to demonstrate correction. Each corrective action plan has built in action steps, timelines and responsibilities.</p> <p>The NHDOE verifies that each district and facility (nonpublic special education program) with a written finding of noncompliance (1) is correctly implementing the specific regulatory requirements, (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring, State data system or desk audit; and (2) has corrected each individual case of noncompliance or in the case of a timeline-specific requirement, completed the required action, although late, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memorandum 09-02. Each finding of noncompliance is required to be verified by the Bureau as corrected as soon as possible but in no case greater than one year from the date of the finding. Districts and/or facilities that demonstrate correction noncompliance (for each individual instance of noncompliance and through updated data) within the NHDOE established timelines are verified as corrected without further enforcement action. The NHDOE takes additional enforcement action as needed when districts or facilities are not able to demonstrate correction of noncompliance within timelines.</p> <p>For example, in Indicator 15 of the FFY 2011 APR, due February 15, 2013, the Bureau explains:</p> <p style="padding-left: 40px;">For the 189 findings identified in 2010-2011, the NHDOE used the following process to verify correction as soon as possible but no later than one year from identification. The State verified the correction of the noncompliance either through on-site visit and file review and/or through a NHDOE desk audit monitoring review of district-submitted written documentation of the correction of the noncompliance. The NHDOE verified correction of noncompliance to ensure that the LEA had corrected each individual case of</p>	
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	<p>noncompliance, unless the child was no longer in the jurisdiction of the LEA. Specifically, the NHDOE reviewed files for correction or required LEAs to submit data demonstrating individual correction.</p> <p>In addition, the NHDOE verified that the LEA was correctly implementing the specific regulatory requirements related to the findings through the review of subsequent data demonstrating 100% compliance. The verification was accomplished through an on-site monitoring visit with a review of a representative selection of student files, policies and procedures and other evidence to ensure that the LEA is implementing the specific regulatory requirements. The NHDOE file review includes a representative selection of student files to ensure confidence that the LEA has implemented the regulations with 100% compliance. In responding to indicators 3B, 11, 12 and 13 in the FFY 2011 APR, the NHDOE reported on the correction of noncompliance as described in the NH Part B FFY 2010 SPP/APR Response Table.</p> <p>The findings reported in this indicator reflect all noncompliance identified through monitoring, data collections, and dispute resolution. Written findings were made consistent with OSEP Memorandum 09-02 that identified the LEAs where noncompliance occurred and their levels of noncompliance and included the regulatory citations. All noncompliant practices were addressed through root cause analyses and improvement activities. Policies and procedures were revised as necessary.</p> <p>General supervision components for monitoring and the identification of findings of noncompliance include a variety of mechanisms or processes including Focused Monitoring, onsite reviews and self-assessments (which may include file reviews or reviews of local policies, procedures and practices), data and desk audit reviews, and dispute resolutions (complaints and due process hearings).</p> <p>The US Department of Education, Office of Special Education (OSEP) monitors the NHDOE Bureau of Special Education’s timely correction of findings of noncompliance through Indicator 15 on the Annual Performance Report. Here are the data for the last 3 years:</p>	
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FFY Note: Findings are monitored based on correction in subsequent year	Number of Findings of Noncompliance Identified	Number of findings of noncompliance for which correction was verified no later than one year from identification	Percentage of Compliance	Number of Findings Subsequently verified as corrected (beyond one year from identification)
FFY 09 APR due 2/1/11	168	167	99.40%	1 of 1 100%
FFY 10 APR due 2/1/12	268	259	96.94%	9 of 9 100%
FFY 11 APR due 2/15/13	189	177	93.65%	11 of 12 92%

The review of Indicator 15 data for last 3 years demonstrates a high level of timely correction of noncompliance as well as subsequent correction for noncompliance that is not timely corrected. There is one remaining finding of noncompliance that has not been subsequently corrected prior to the submission of this APR. This finding was for Indicator 13: Secondary Transition. The Bureau has taken additional enforcement actions, including mandatory technical assistance, monthly reporting and the redirection of funds to address the root cause of the noncompliance.

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	<p>Each year OSEP makes a determination of the implementation of the requirements of IDEA for each State. The determination is based on the totality of the State's data and information including the State's FFY APR and revised State Performance Plan, other State-reported data, and other publicly available information. For the last three years in the letters which establish this determination, OSEP has noted New Hampshire has a high level of performance. These letters from OSEP confirm that NH reported valid and reliable data for all indicators and has a high level of compliance with Indicator 15, among other indicators. The NHDOE, Bureau of Special Education will continue to follow the established process for tracking and following up on noncompliance, consistent with OSEP guidance.</p> <p>As required by the Individuals with Disabilities Education Act (IDEA), 34 CFR section 300.600, the NHDOE makes determinations annually on the performance of each public school district regarding the implementation of IDEA. These determinations are made in consideration of information obtained through the NHDOE general supervision system (such as on-site monitoring visits, desk audits and other public information made available) including any audit findings and whether the data submitted by the local district is valid, reliable, and timely. Based upon this information, the NHDOE determines whether the district:</p> <ul style="list-style-type: none"> • meets the requirements and purposes of the IDEA; • needs assistance in implementing the requirements of the IDEA; • needs intervention in implementing the requirements of the IDEA; or • needs substantial intervention in implementing the requirements of the IDEA. (300.603) 	
8. For districts and facilities that are in danger of failing to correct noncompliance in a timely manner, establish a formal process allowing the State to intervene appropriately before the correction timeframe expires.		
Date of Entry	Response	Status
February 2013	Written findings of noncompliance made by the NHDOE, Bureau of Special Education include a description of what is required of the district in order to demonstrate timely correction of the noncompliance. The NHDOE provides the district with the specific timeline for them to demonstrate correction of the noncompliance. This timeline is based on the actual area of compliance and may be comprised of multiple steps. For example, if a School Board needs to adopt a	NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation Completed

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	<p>revised policy in order to address an area of noncompliance, the NHDOE might require the district to complete the policy review and development of proposed revisions within one timeline with evidence that the policy is on the docket for the School Board meeting the following month. Once the policy has been adopted, the NHDOE verifies if the noncompliance has been corrected. Timelines established by the NHDOE for correction allow the NHDOE to verify correction as soon as possible but in no case later than one year from the date of the written finding(s). The NHDOE timelines are based on the earliest possible date for correction which allows for additional opportunities for the district or facility to provide evidence of correction and for the NHDOE to take additional enforcement actions if needed to ensure timely correction. The timeliness of corrections is reported in the APR Indicator 15. Timeliness of correction of noncompliance is considered as part of annual determination of the district's implementation of IDEA (see #7. above). Reporting requirements specifying if periodic data reports are required or just one report to demonstrate that the noncompliance is corrected.</p>	
D. Enforcement Actions		
1. Develop a set of decision rules used to determine appropriate enforcement actions based on the four criteria contained in State statute.		
Date of Entry	Response	Status
February 2013	<p>Requirements related to monitoring, technical assistance, and enforcement are found in 34 CFR §§300.600 through 300.609 and include: (1) the Secretary's responsibility to establish and enforce particular procedures for monitoring, technical assistance, and enforcement actions; and (2) the State's responsibility to monitor including implementing, enforcing, and annually reporting on the performance of LEAs under the <i>IDEA</i> through a State Performance Plan (SPP) and Annual Performance Reports (APRs) under that SPP. This is discussed in the OSEP document "Question and Answers on Monitoring, Technical Assistance and Enforcement." As described in the Q&A: "Changes in the State's responsibilities include the requirements to: (1) submit an SPP to the Secretary that includes measurable and rigorous State-established targets for indicators established by the Secretary (34 CFR §300.601(a)); (2) monitor its LEAs under the priority areas related to the provision of a free appropriate public education (FAPE) in the least restrictive environment (LRE), exercise of general supervision (including child find, effective</p>	<p>NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation</p> <p style="text-align: center;">Completed</p>

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<p>monitoring, the use of resolution meetings, mediation and a system of transition services), and disproportionate representation of racial and ethnic groups in special education and related services, to the extent the representation is the result of inappropriate identification (34 CFR §300.600(d)); (3) collect valid and reliable data to report annually to the Secretary on the State’s performance on the indicators in the SPP (34 CFR §300.601(b)); (4) report to the public on the performance of each of its LEAs on the targets in the SPP (34 CFR §300.602(b)(1)(i)(A)); and (5) carry out enforcement actions against those LEAs not meeting the requirements of Part B of the <i>IDEA</i> (34 CFR §§300.600(a) and 300.608)”.</p> <p>The NHDOE, Bureau of Special Education carries out enforcement actions against those districts that do not meet the requirements of Part B of the <i>IDEA</i> (34 CFR §§300.600(a) and 300.608). Decision rules for determining the appropriate enforcement action for written findings of noncompliance are aligned with IDEA. The level of enforcement action is based on a variety of factors such as the severity and the frequency of the noncompliance.</p> <p>Enforcement actions: All enforcement actions are designed to correct the noncompliance. The level of enforcement action is based on the severity and frequency of the noncompliance. The NHDOE works with the district to determine the root cause of the noncompliance to maximize the effectiveness of the enforcement actions. All enforcement actions include specific timeframes and required evidence of correction. 1) The district is able to correct the noncompliance within a reasonable timeframe: no additional enforcement action required however TA may be recommended. 2) The district requires technical assistance in order to correct the noncompliance: the district may be able to select preferred TA or the NHDOE may mandate the TA. TA must occur within NHDOE specified timelines and must result in evidence of correction. 3) The NHDOE redirects the district IDEA funds to address the noncompliance. This occurs only after longstanding noncompliance with limited evidence of progress. This is generally a portion of the funds and rarely exceeds 10% of the allocation. 4) The NHDOE withholds the districts IDEA funds. This is used as a last resort when the district has longstanding and severe noncompliance. The NHDOE would use funds that were withheld to ensure the correction of the noncompliance.</p>	
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2. Develop and implement more meaningful enforcement actions for districts placed in the Needs Substantial Intervention determinations category and those failing to correct noncompliance within one year.		
Date of Entry	Response	Status
February 2013	<p>When the NHDOE, through monitoring activities, determines that a district has a finding of noncompliance or is in need of substantial intervention, a staff member of the NHDOE, Bureau of Special Education is appointed to monitor the execution of the orders of compliance and to oversee the provision of the substantial intervention with the implementation of the regulations of IDEA.</p> <p>Needs Substantial Intervention: If the NHDOE determines, at any time, that the district needs substantial intervention, the NHDOE shall take one or more of the following enforcement actions, consistent with section 616(e)(3) and provide an opportunity for a hearing (ED 1125.03):</p> <ul style="list-style-type: none"> ○ Recover funds. ○ Withhold any further payments to the district. ○ Refer the case to the Office of the Attorney General. ○ Refer the matter for appropriate enforcement action <p>The NHDOE works with the district to develop a corrective action plan to address the identified areas of concern. The plan includes timelines and people responsible for the actions within the plan. The plan will include any identified root causes that may be impacting the district’s ability to implement the regulations of IDEA. The district must provide the NHDOE with periodic progress reports once the plan is approved, including updates on potential root causes that impact the district progress. If the district does not comply with this enforcement action and does not demonstrate progress in a timely manner, the NHDOE will take additional enforcement actions, such as the redirection of IDEA funds. Because the determination that a district is in need of substantial intervention regarding the implementation of IDEA may be based in part or in whole on previously identified areas of noncompliance, this plan will need to acknowledge noncompliance that has already been corrected and coordinate any corrective actions that are</p>	<p>NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation</p> <p style="text-align: center;">Completed</p>

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	<p>District Failure to Correct Noncompliance within One Year Indicator 15 monitors that the general supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification. See information on enforcement actions above.</p>	
<p>E. Annual LEA Determinations</p>		
<p>1. Use performance and compliance indicators from the State Performance Plan in making annual LEA determinations.</p>		
Date of Entry	Response	Status
February 2013	<p>The NHDOE complies with OSEP requirements regarding the use of compliance indicators for making annual LEA determinations. The NHDOE plans to align the use of performance indicators for making determinations with the direction from OSEP regarding Results- Driven Accountability. OSEP is currently re-thinking its accountability system in order to shift the balance from a system-focused primarily on compliance to one that puts more emphasis on results. The NHDOE is cautious about over-burdening districts with requirements that exceed IDEA. The NHDOE has initially established a system that ensures compliance prior to looking at performance.</p> <p>Currently, in making our determination for each district, the NHDOE considers the totality of the information we have about each district. This includes the district performance on the factors.</p> <p>State Performance Plan Indicator 4B: The district does not have a significant discrepancy by race or ethnicity in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs. Data were timely and accurate.</p> <p>State Performance Plan Indicator 9: The district does not have a disproportionate representation of racial and ethnic groups in special education and related services that is a result of inappropriate identification. Data were timely and accurate.</p> <p>State Performance Plan Indicator 10: The district does not have a disproportionate representation, by disability category, of racial and ethnic groups in specific disability categories that is a result of inappropriate identification. Data were timely and accurate.</p>	<p>NHDOE has addressed this recommendation Completed</p>

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	<p>State Performance Plan Indicator 11: Initial evaluations for special education are completed within State established timelines. Data were timely and accurate.</p> <p>State Performance Plan Indicator 12: Children referred from Family-Centered Early Supports & Services to special education have a determination of eligibility prior to the third birthday. Children who were found eligible have an IEP developed and implemented (signed by the parent) on or before the third birthday. Data were timely and accurate.</p> <p>State Performance Plan Indicator 13: The district met the requirements for compliance with effective transition for students aged 16 and above. Data were timely, accurate and reliable.</p> <p>State Performance Plan Indicator 15: General Supervision findings of noncompliance identified in 2009-2010 through monitoring, complaints and due process hearings are corrected within required timelines.</p> <p>State Performance Plan Indicator 7: Preschool special education child progress data were timely and accurate.</p> <p>Coordinated Early Intervening Services (CEIS): Federal Table 8. Data were timely and accurate.</p> <p>Audit: Audit findings regarding special education funds are corrected within timelines.</p> <p>IDEA Grant Management: The district completes reporting for IDEA funds within timelines. All grants must be closed within 90 days of the project end date.</p> <p>Maintenance of Effort (MOE): Data were timely and accurate.</p> <p>IDEA Grant Management: Federal Assurances are submitted as required in the online grant system.</p> <p>The criteria may change from year to year based on the federal requirements and State data.</p>	
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2. Solicit stakeholder input into the development of a formula by which LEA determinations will be made.

Date of Entry	Response	Status
February 2013	When the OSEP Results-Driven Accountability is in place, the NHDOE will solicit stakeholder input regarding the determination process.	NHDOE will be bringing a team to the Northeast Regional Resource Center (NERRC) State Systemic Improvement Plan (SSIP) Meeting in Springfield, MA on March 19 – March 20, 2014. This meeting will take the State Department of Education from “where they are” and

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		<p>provide the States with State Team planning time as well as opportunities for cross-State sharing and consultation with national experts. The objective of the meeting is to have State Teams ready to develop their State Systemic Improvement Plan (SSIP) for the FFY 2013 SPP/APR due in February 2015.</p> <p>June 30, 2014 - The Northeast Regional Resource Center (NERRC) collaborated with the Office of Special Education Program (OSEP) to sponsor the State Systemic Improvement Plan (SSIP) regional meeting on March 19th and 20th. NH's State Director of Special Education was a member of the planning team for this meeting. NH's Bureau of Special Education staff, Parent Information Center (PIC) staff and a representative from a district also participated in this two day conference.</p> <p>The Office of Special Education, USDOE, has engaged in a lengthy and comprehensive stakeholder process to implement a Results Driven Accountability component of the 2014 State Determination of Implementation of IDEA. Based on this comprehensive new process, NH was determined to meet requirements of IDEA. The Bureau of Special Education will share this new federal process with stakeholders to gain input on implications for adjusting the process currently employed as NHDOE makes determinations regarding district's implementation of IDEA.</p>
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F. Verifying Accuracy of LEA Data and Ensuring Effectiveness		
1. Develop a system for verifying the accuracy of the indicator data collected from districts.		
Date of Entry	Response	Status
February 2013	<p>NHSEIS has accuracy verification built into it. The Bureau continues to work with NHSEIS stakeholders and to provide training and technical assistance to districts in order to ensure that local district staff enters data correctly.</p> <p><i>Submission of SPP/APR Data</i> The NHDOE ensured that data submitted in the SPP/APR are valid and reliable through a variety of means. Data tied to the 618 data reporting requirements have data quality checks built into the data collection process. Data collected through a desk audit monitoring process and statewide surveys are reviewed by the NHDOE and verified through cross-checks for data accuracy and completeness. The NHDOE verifies the timely correction of noncompliance, consistent with OSEP memorandum 09-02, through a review of a representative selection of students, policies and procedures and other evidence as needed to ensure that the LEA is implementing the specific regulatory requirements.</p> <p><i>Submission of 618 data (Federal Tables)</i> The NHDOE used different databases for the collection of the 618 data for the federal tables and submitted through EDFacts. Table 1, 3, 4, and 5 are generated using information from the New Hampshire Special Education Information System (NHSEIS). Table 2 was generated using information from the NHDOE Bureau of Special Education through a survey sent to all districts and signed by the appointing authority. Table 6 was generated using information from the NHDOE Bureau of Accountability, Table 7 was generated using the database from the NHDOE Office of Legislation and Hearing and Bureau of Special Education, Complaint Officer, and Table 8 was generated using the data collected through a desk audit process by the Bureau of Special Education.</p> <p>NHSEIS was designed as a data collection instrument which ensures through its business rules that data entered into the system were valid and reliable. NHSEIS provides error message with explanation when data are entered that are incorrect</p>	<p>NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation</p> <p style="text-align: center;">Completed</p>

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	<p>giving districts an opportunity to reenter correct data. The NHDOE offered continuous technical assistance and training to districts including monthly forums, on-site training and phone/e-mail support as well as a training manual. NHDOE staff members were available to assist districts on a daily basis with NHSEIS.</p> <p>The NHDOE worked with EDFacts to verify and agree with Part B Report that all report and error messages that were sent to the NHDOE had been submitted and responded in a timely and accurate data for FFY 2012.</p>	
2. Related to Recommendation 1, a special effort should take place to verify the accuracy of Indicator 5 data.		
Date of Entry	Response	Status
February 2013	<p>NHSEIS has accuracy verification built into it.</p> <p>The Bureau continues to work with NHSEIS stakeholders and to provide training and technical assistance to districts in order to ensure that local district staff enters data correctly.</p>	<p>NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation</p> <p style="text-align: center;">Completed</p>
2012	<p>The Bureau of Special Education resubmitted data through EDEN for table 3 because the calculation for table 3 did not include the amount of time student removed from related services. We did this in conjunction with OSEP funded DAC (3 year project).</p> <p>Data reported in the federal Annual IDEA Data Report, <i>Table 1 Report of Children with Disabilities receiving Special Education under Part B of the Individuals with Disabilities Education Act</i> and <i>Table 3 Part Individuals with Disabilities Education Act Implementation of FAPE Requirements</i> were used for this indicator. The NHDOE based the numbers for the calculation of this indicator on the data entered by districts into the special education statewide data system (NHSEIS): 26,264 children with IEPs ages 6-21 with data points in NHSEIS on 10/1/2011. As in the past, the NHDOE has not included the non-duplicated counts for youth in correctional facilities and children parentally placed in private schools in the reported data for this indicator.</p> <p>These figures reflect data submitted through EDEN by the NHDOE for Table 3 for October 1, 2011 and are consistent with the 618 data reported by the NHDOE. The NHDOE used a number of district entered data points from NHSEIS to calculate the amount of time a student was in the regular class (part A. and part B. of the</p>	<p>NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation</p> <p style="text-align: center;">Completed</p>

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	<p>measurement). The data points include the type of service, the setting in which the service was to be provided, the length of time for the service and length of the school day for the student. The NHDOE calculated the amount of time the child was inside the regular class by taking the length of the school day less the time the child was in a special education setting. In other words, if the length of the school day for a child was 6 hours and the child had 1 hour of services in a special education setting, the child was considered to be in the regular class for 5 hours a day or 83.33% of the time. The NHDOE included students enrolled in public academies and joint management agreement (JMA) schools in the same manner as students enrolled in public schools.</p> <p>The NHDOE data analysis to determine the amount of time the child was in special education settings did not include time when a child was receiving transportation, in a regular education class, or overlapping services. When the NHDOE calculated the data, if the length of school day for the child did not correspond with the total hours of services identified in the IEP, the NHDOE used the length of school day for the school the child was attending. The length of school day for the school was entered by the district in the reference site in NHSEIS.</p>	
3. Examine the effectiveness of the Focused Monitoring process on the monitored districts.		
Date of Entry	Response	Status
January 8, 2013	<p>As a result of this recommendation, the NHDOE Program Approval Team has developed and is piloting a new tool, Program Approval Focused Monitoring Indicators, which is currently being used with the 2012-2013 Focused Monitoring school districts. The data collection tool is designed specifically to determine whether or not the Focused Monitoring process is resulting in the desired outcomes of increased student achievement. The use of the tool provides a deeper level of information about whether the focused monitoring action plan has been implemented as intended and the overall program effectiveness. The key results areas were identified based on research on school improvement and references to the literature used to identify and support the importance of each key result area are included in the document. (A similar tool will be developed for out-of-district private providers.)</p>	<p style="text-align: center;">Ongoing</p> <p>June 30, 2014- For both 2012-2013 and 2013-2014 school years, the contractor has been providing services for the Focused Monitoring process. Whereas, the Bureau of Special of Education has been conducting the special education compliance monitoring process. With the contract ending June 30, 2015, the Bureau of Special Education will begin monitoring the approved private special education schools beginning July 1, 2015.</p>

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	Existing longitudinal achievement data collected from the Focused Monitoring Districts reflect improved proficiency rates for all students with disabilities as compared to non-monitored districts. Because the Focused Monitoring Process has been designed to be a systemic school improvement model, the impact has been improved results for all other learners as well; consequently the achievement gap has not always been affected.	
4. Identify the “high –performing” focused monitored districts and determine why the Focused Monitoring process worked well for them.		
Date of Entry	Response	Status
	For new districts who are selected to participate in the FM process the NHDOE brings back past districts who have already participated in the FM process to highlight their successes and challenges in narrowing the achievement gap. NHDOE will explore other avenues for highlighting their successes.	NHDOE has addressed this recommendation Completed
G. Staffing and Resources		
1. Increase review team members’ effectiveness by developing mandatory IDEA pre-visit training.		
Date of Entry	Response	Status
December 2012	On December 20, 2012, the FM Project Coordinator indicated that SERESC did provide their staff with additional IDEA training over the summer. As the Project Coordinator of the FM and Program Approval team indicated during the forum, the staff received additional training.	NHDOE has addressed this recommendation Completed
January 8, 2013	The NHDOE Program Approval Team has refined all training tools and provided visiting IEP Review Facilitators additional professional development. Refresher trainings have been designed and are provided immediately prior to the FM IEP Reviews. All IEP Review Facilitators are provided with a copy of the NH Rules in addition to training packets/resources.	NHDOE has addressed this recommendation Completed

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2. Reconsider the practice of contracting out the Focused Monitoring and Program Approval processes in general, and reconsider contracting with SERESC.		
Date of Entry	Response	Status
Fall 2012	<p>The NHDOE does not have the staff to perform the responsibilities in the Focused Monitoring and Program Approval process. The State of NH provides \$0 in support of Bureau personnel. All Bureau staff are federally funded. Based on the lack of Bureau staff, the NHDOE issued a Request for Proposal for Focused Monitoring and Program Approval. A contract went through Governor and Council in July of 2012. The contract is from July 2012 to June 2015.</p> <p>The NHDOE is reviewing the overall process for conducting Focused Monitoring and Program Approval as part of our review of our general supervision responsibilities, including the potential conflict of contracting out certain responsibilities.</p>	<p>The NHDOE has assumed the responsibility for the special education compliance monitoring of districts. The NHDOE assumed this responsibility during the 2012-2013 school year and will continue the special education compliance monitoring of districts.</p> <p>June 30, 2014- A program specialist has been hired in May of 2014 to assist with the responsibilities of the special education compliance monitoring process.</p>
December 2012	<p>During the forum group held on December 20, 2012 a request was made of the NHDOE to have discussions to possibly redesign the NH monitoring process to ensure it addresses both Federal and State statues emphasizing monitoring and looking at results. OSEP currently only makes determinations based on compliance but they are working on defining a results-driven accountability for States. When the OSEP Results-Driven Accountability is in place, the NHDOE will solicit stakeholder input regarding the determination process and possibly redesigning the monitoring process.</p>	<p>The U.S. Department of Education’s Office of Special Education Programs (OSEP) recently changed its approach to monitoring and supporting States with the goal of improving educational and functional outcomes for children with disabilities. To place a greater emphasis on monitoring for results, OSEP has added a new indicator (B-17) to the State Performance Plan (SPP) and Annual Performance Report (APR) that requires States to develop a State Systemic Improvement Plan (SSIP) focused on improving results for children with disabilities. The Bureau of Special Education will be submitting the first component of the SSIP beginning with the FFY 2013 SPP/APR due in February 2015. NHDOE will be bringing a team to the Northeast Regional Resource Center (NERRC) State Systemic Improvement Plan (SSIP) Meeting in Springfield, MA on March 19 – March 20, 2014. This meeting will take the State Department of Education from “where they are” and provide the States with State Team planning time as well</p>

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NHDOE Response
Progress Report, dated June 30, 2014**

		as opportunities for cross-State sharing and consultation with national experts. The objective of the meeting is to have State Teams ready to develop their State Systemic Improvement Plan (SSIP) for the FFY 2013 SPP/APR due in February 2015.
3. Review state restrictions on filling vacancies in the Bureau, and pursue state funding support of additional staff if warranted.		
Date of Entry	Response	Status
Fall 2012	The NHDOE has requested additional education consultants for Fiscal Years 2014 and 2015 budgets. As part of the budget process, these positions are requested under the Change Budgets using federal funds, which may or may not be approved by the legislature. No new positions were requested with additional State funds. All current vacancies are in the process of being filled. These vacancies do not include education consultant positions. In the past five years the NH legislature has only approved the addition of one education consultant position using federal funds.	Completed/Ongoing