

Program Evaluation and Quality Assurance Review

Prepared for:

New Hampshire Department of Education
Bureau of Special Education
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Table of Contents

Executive Summary	1
Background.....	5
Components of an Effective General Supervision System	8
Component 1. State Performance Plan (SPP)	9
Component 2. Integrated Monitoring Activities	19
Component 3. Policies, Procedures, and Effective Implementation.....	30
Component 4. Data on Processes and Results.....	31
Component 5. Targeted Technical Assistance and Professional Development	32
Component 6. Improvement, Correction, Incentives and Sanctions	35
Component 7. Effective Dispute Resolution	37
Component 8. Fiscal Management.....	40
Additional Components of the NH General Supervision System	41
Appendix A: Summary of Statewide Performance by SPP Indicator.....	A-1
Appendix B: Summary of Onsite Stakeholder Sessions	B-1
Appendix C: Survey Results.....	C-1
Appendix D: Review of Recommendations from Previous Evaluation	D-1
Appendix E: Recommendation Summary Table	E-1

Executive Summary

The Individuals with Disabilities Education Act (IDEA) requires that all State Education Agencies (SEA) in acceptance of Federal education funding, maintain a system of General Supervision. General Supervision can be described as a set of activities connected together to provide program management to local education agencies throughout a state. SEAs are given the flexibility to establish a customized system based on federal and state requirements, but it must be a comprehensive system that adheres to the federal regulations and state rules to ensure proper program implementation.

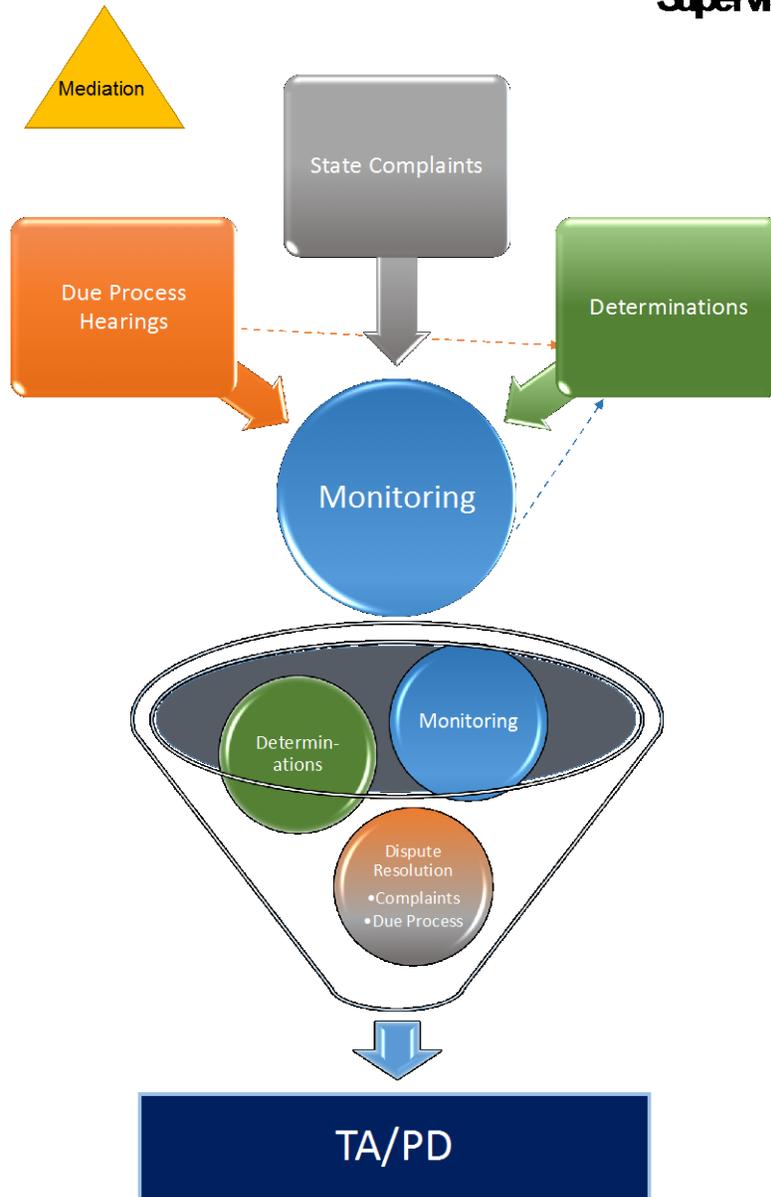
Each State is responsible for special education general supervision pursuant to the IDEA. The IDEA, at 34 C.F.R. §300.149, defines an SEA's responsibility for general supervision:

- (a) The SEA is responsible for ensuring—
 - (1) That the requirements of this part are carried out; and
 - (2) That each educational program for children with disabilities administered within the State, including each program administered by any other State or local agency (but not including elementary schools and secondary schools for Indian children operated or funded by the Secretary of the Interior)—
 - (i) Is under the general supervision of the persons responsible for educational programs for children with disabilities in the SEA; and
 - (ii) Meets the educational standards of the SEA (including the requirements of this part).
 - (3) In carrying out this part with respect to homeless children, the requirements of subtitle B of title VII of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11431 *et seq.*) are met.
- (b) The State must have in effect policies and procedures to ensure that it complies with the monitoring and enforcement requirements in §§ 300.600 through 300.602 and §§ 300.606 through 300.608.
- (c) Part B of the Act does not limit the responsibility of agencies other than educational agencies for providing or paying some or all of the costs of FAPE to children with disabilities in the State.
- (d) Notwithstanding paragraph (a) of this section, the Governor (or another individual pursuant to State law) may assign to any public agency in the State the responsibility of ensuring that the requirements of Part B of the Act are met with respect to students with disabilities who are convicted as adults under State law and incarcerated in adult prisons.

An integrated system of general supervision connects discrete components and creates information pathways between systems to fully inform general supervision. All parts of the system provide critical information to the SEA as it supervises the provision of special education on a statewide basis.

The following graphic is a visual representation of the pathways between systems necessary for an integrated system of general supervision.

System of General Supervision



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History

On October 1, 2015, Pingora Consulting, LLC (Pingora) was awarded the contract to conduct the legislated Independent Program Evaluation and Quality Assurance Review of the New Hampshire Department of Education (NHDOE), Bureau of Special Education (Bureau), pursuant to RSA 186-C5:5 (IX). This report is presented to the Bureau and New Hampshire stakeholders and represents a synthesis of the data collected during this program evaluation. It includes, as appropriate, recommendations, regarding the Bureau's system of general supervision.

As a component of the current program evaluation, Pingora reviewed the report from the prior program evaluation conducted in 2012. The resulting report identified areas of noncompliance, strategies for improvement, and specific recommendations to improve the SEA's general supervision. The Bureau implemented applicable recommendations consistent with the 2012 report. A summary of the recommendations and the Bureau's response to each recommendation is provided in Appendix D.

Pingora acknowledges that the Bureau has made significant changes and improvements as a result of the 2012 program evaluation, and commends the Bureau for its collaborative work with stakeholders in developing a blueprint for system improvements. The results of the current evaluation reflect this evolving system. It is evident that the Bureau was responsive to the recommendations and focused its resources on developing an improved system. Most notably, monitoring activities are now conducted and verified by an internal monitoring team. Significant time and effort has been spent on developing the internal capacity (within budgetary constraints) and implementing this labor intensive activity.

As a result of this ongoing transition, many of the current practices have been implemented for a relatively short period of time. Although the changes represent positive beginnings of a more robust system of general supervision, the infancy of the new system places limits on the trend data available for this evaluation.

During the same time the Bureau was restructuring its monitoring approach, the U.S. Department of Education, Office of Special Education Programs (OSEP) also introduced a new approach to monitoring. Results Driven Accountability (RDA), which is the newly defined approach for evaluating state's compliance with the IDEA. According to OSEP, RDA is shifting the focus of monitoring from compliance to outcomes. RDA represents a shift from compliance-based monitoring to an accountability system based on differentiated monitoring support. With RDA, it is very clear that compliance is not forgotten. However, it is noteworthy that outcomes must become more of a focus when states are developing and implementing general supervision systems. OSEP guidance indicates that the monitoring and support can no longer be a "one size fits all" approach. Rather state monitoring resources need to ensure IDEA implementation while focusing on improved student outcomes. It is with this guidance that many of the recommendations provided in this evaluation focus the Bureau's system on ensuring improvement in outcomes for students with disabilities. (April 2016 OSEP National TA Call)

In 2013, OSEP determined that NHDOE meets the requirements and purposes of the IDEA. The NHDOE has received similar determinations in 2014 and 2015. The 2016 Determinations are due to be issued in the next few weeks. Although there have been several changes to the standards OSEP has used to make these determinations, including adding outcome indicators, the Bureau and many other states have continued to meet requirements. In order to continue on the path of improvement and build on the momentum of changes already implemented, the Bureau must continue to refine its internal capacity and improve its system of general supervision to ensure improved outcomes for students with disabilities.

Process

Pingora used a low-impact, collaborative process to gather, analyze, and share data as it worked with the Department and the Bureau staff to evaluate the special education program approval and program monitoring systems. Data was garnered from multiple points to root out specific organizational, programmatic, and/or delivery weaknesses that potentially impede the optimum performance of the Bureau's program approval and program monitoring processes.

Because Pingora understood and was sensitive to the critical communication needs of the Bureau, it committed to using a collaborative, reflective, and transparent process in conducting its systematic evaluation of the effectiveness of New Hampshire's special education program approval and program monitoring systems, including the Bureau's response to recommendations made during the 2012 program evaluation.

The following is a general overview of how Pingora conducted this evaluation:

- Review of Current Concerns and Related Data
- Discovery
- Data Review and Quality Assurance
- Draft Report and Comment Period
- Final Report and Recommendations

The *Timeline of Activities* in the Background section of this report provides more detail on Pingora's approach.

Pingora acknowledges the time and effort the Bureau and stakeholders contributed to provide information and data during the evaluation.

Background

Pingora undertook the activities outlined in the timeline in order to look for areas where data convergence existed. Data was analyzed to determine the potential strengths and identify opportunities for improvement. Observations came from document reviews, interviews, stakeholder meetings, and survey results. Single pieces of data were not used as the sole basis for recommendations, rather observations were reviewed and recommendations were developed to address areas of potential improvement.

As a part of this review, Pingora systematically gathered and analyzed data in areas that are consistent with the IDEA, OSEP guidance, and New Hampshire Statutes and Administrative Rules for Special Education, amended as of May 15, 2014. In gathering this data, Pingora used a number of collection strategies and tools, including those listed in the **Timeline of Activities** chart below:

Timeline of Activities

Activity	Description	Date
Onsite Visit	Pingora met with Bureau special education staff on the first day of the onsite visit. On the second day, members of the NH State Advisory Committee on the Education of Students/Children with Disabilities (SAC) were invited to attend a morning session with Pingora. Seven SAC members attended.	11/18/2015 – 11/19/2015
Telephone Interviews	Pingora conducted follow up targeted discussions with Bureau special education and dispute resolution staff regarding data collection related to monitoring and dispute resolution processes. Pingora held a teleconference again with the members of the SAC who attended the morning session during the onsite visit on 11/19/2015.	12/09/2015 12/10/2015 12/14/2015
Formative Assessment: Data Sources	<ul style="list-style-type: none"> • 2015-2016 Compliance and Improvement Monitoring (CIM) Manual; • Approval of Private Provider Programs (AP³s) Manual; • District Selection Rubric for CIM; • 2015-2016 CIM Report template; • AP³s Application and Appendices; • FFY 2013 Part B State Performance Plan/Annual Performance Report; • FFY 2013 APR (July 1, 2013 – June 30, 2014) District Data Profiles; • NHSEIS Manual, July 2015 	11/01/2015 – 04/01/2016

Timeline of Activities

Activity	Description	Date
Formative Assessment: Data Sources	<ul style="list-style-type: none"> • NH State Rules for Education of Children with Disabilities, Amended as of May 15, 2014; • District Monitoring Reports; • Program Approval Summary Reports; • Information on NH Dispute Resolution Processes; • NHDOE Website; • NHDOE Response to 2012 Data Driven Enterprises (DDE) Program Evaluation and Quality Assurance Report Evaluation and Recommendations 	11/01/2015 – 04/01/2016
Formative Assessment: Stakeholder Meetings	<p>Pingora facilitated onsite meetings with stakeholders on March 2 - 4, 2016. Pingora collaborated with the NH DOE on developing the list of invited stakeholders from the following groups:</p> <ol style="list-style-type: none"> (1) State Advisory Committee (SAC) Members/Parent Information Center (PIC)/Disability Rights Center NH/NH Kids Count/NH Council on Developmental Disabilities/Department of Health & Human Services (14 attendees); (2) Directors of Local Educational Agencies (LEAs) who had recent experience (past three years) with the NH monitoring systems (7 attendees); (3) Stakeholders who had participated and assisted the Bureau with re-visioning the monitoring process (6 attendees); and (4) Stakeholders from Private Program – Non Public Agencies (10 attendees). <p>For additional information about stakeholder meetings, including a summary of the information the stakeholder groups provided, see Appendix B: Summary of Onsite Stakeholder Sessions.</p>	03/02/2016 – 03/04/2016
Formative Assessment: Staff Interviews	Pingora interviewed select Bureau special education and dispute resolution staff with responsibilities related to CIM, Public/Private Approvals, etc.	03/02/2016 & 03/04/2016
Formative Assessment: Survey	<p>Pingora conducted an online survey to gather broad stakeholder input. Three hundred business cards containing links to the online survey were disseminated at the March onsite meetings with stakeholders. Stakeholders were encouraged to share the cards with their constituencies. For example, directors of local education agencies shared the link to the survey with their peers at their statewide conference. 69 individuals responded to the online survey (70% Public School Staff, 10% Parent, 10% Other (Administrators, Consultants, Education Organization), 9% Private Program Staff, 1% Service Providers).</p> <p>For additional information about the survey, see Appendix C: Survey Results.</p>	03/02/2016 – 03/24/2016

Timeline of Activities

Activity	Description	Date
Resource and Data Review	Additional resources and data identified after stakeholder meetings and staff interviews.	03/02/2016 – 04/01/2016
Summative Assessment: Convergence of Data and Information	Pingora analyzed data convergence and assessed compliance with IDEA and New Hampshire laws and rules.	03/02/2016 – 04/01/2016
Draft Report Submission	Pingora submitted an electronic version of the draft report to the Bureau, opening the Bureau's comment period.	04/27/2016
Draft Report Presentation	Pingora met onsite with the Bureau to present both a written and oral draft report on the evaluation data, analysis, and resulting recommendations.	05/02/2016
Stakeholder Meeting	The Bureau convened a stakeholder group to review and provide feedback on the draft report.	05/18/2016
Draft Report Comments	Pingora received written comments and feedback from the Bureau of Special Education and made necessary revisions to the draft report based on the Bureau's response to the draft report.	06/02/2016
Final Report Presentation	Pingora presented the final report onsite to the Department of Education and identified stakeholders.	06/17/2016

Components of an Effective General Supervision System

As reflected in the Timeline of Activities on page 5, Pingora reviewed resources, met with Bureau staff, facilitated focus group meetings, and conducted a survey in order to gain a big picture view of the State's General Supervision system.

New Hampshire has a responsibility, under federal law, to have a system of general supervision that monitors the implementation of the Individuals with Disabilities Education Act (IDEA) by school districts. The general supervision system is accountable for identifying and correcting noncompliance with IDEA and the New Hampshire Rules for the Education of Children with Disabilities and for promoting continuous improvement.

As stated in section 616 of 2004 amendments to the IDEA, "The primary focus of Federal and State monitoring activities described in paragraph (1) shall be on –

- (A) Improving educational results and functional outcomes for all children with disabilities; and*
- (B) Ensuring that States meet the program requirements under this part, with a particular emphasis on those requirements that are most closely related to improving educational results for children with disabilities."*

There are eight components that comprise NH's general supervision system. It is important to note that although the components are presented separately here, they each connect, interact and articulate requirements to form a comprehensive system.

The general supervision system for NH has the following components.

- 1. State Performance Plan (SPP)*
- 2. Integrated Monitoring Activities*
- 3. Policies, Procedures, and Effective Implementation*
- 4. Data on Processes and Results*
- 5. Targeted Technical Assistance and Professional Development*
- 6. Improvement, Correction, Incentives and Sanctions*
- 7. Effective Dispute Resolution*
- 8. Fiscal Management*

Source: FFY 2013 Part B State Performance Plan/Annual Performance Report

The evaluation of the Bureau's General Supervision system begins with Component One: The State Performance Plan. The State Performance Plan is critical to the State's focus on "Improving educational results and functional outcomes for all children with disabilities."

Component 1. State Performance Plan/Annual Performance Report

Each state is required to develop a performance plan that evaluates the state's efforts to implement the requirements and purposes of the IDEA, Section 616(b). This State Performance Plan (SPP) illustrates how the state will continuously improve upon this implementation, and includes updates through the Annual Performance Report (APR) submitted annually each February.

In alignment with IDEA, OSEP identifies five monitoring priorities within the SPP and 17 indicators associated with these monitoring priorities.

Monitoring Priority: Free Appropriate Public Education in the Least Restrictive Environment

- Graduation (Indicator 1)
- Drop out (Indicator 2)
- Participation and Performance on Statewide Assessment (Indicator 3A-C)
- Suspension/Expulsion (Indicator 4A-B)
- Education Environment, Children 6-21 (Indicator 5A-C)
- Preschool Environment (Indicator 6A-B)
- Preschool Outcomes (Indicator 7A-C)
- Parent Involvement (Indicator 8)

Monitoring Priority: Disproportionate Representation

- Disproportionate representations (Indicator 9)
- Disproportionate representation in specific disability categories (Indicator 10)

Monitoring Priority: Effective General Supervision Part B/Child Find

- Child Find (Indicator 11)

Monitoring Priority: Effective General Supervision Part B/Effective Transition

- Early Childhood Transition (Indicator 12)
- Secondary Transition (Indicator 13)
- Post-School Outcomes (Indicator 14A-C)

Monitoring Priority: Effective General Supervision Part B/General Supervision

- Resolution Sessions (Indicator 15)
- Mediation (Indicator 16)
- State Systemic Improvement Plan (SSIP) (Indicator 17)

State Performance Plan/Annual Performance Report Observations and Recommendations

The following table contains noteworthy observations taken directly from the State Performance Plan with recommendation(s) that encourage the Bureau to continue its important work of “improving educational results and functional outcomes for all children with disabilities.”

For additional information about the State’s SPP/APR, see Appendix A: Summary of Statewide Performance by SPP Indicator.

Statutory Authority: 34 C.F.R. §§300.601-602 State Performance Plan and Data Collection

1	Graduation
	<p>Observation</p> <p>The State reported a 71.03% graduation rate and did not meet its Title 1 of ESEA target of 85%.</p> <p>For the FFY 2013 SPP, NH calculated a five-year cohort graduation rate in addition to the four-year cohort graduation rate. Students from the original incoming freshman class who were counted in the FFY 2012 four-year cohort group, but who needed a fifth year to complete graduation requirements and who did so successfully are captured in the five-year cohort graduation rate that was calculated for FFY 2013. The FFY 2013 five-year cohort graduation rate was 2,256 of 2,959 or 76.24%.</p> <p>The State publicly reports the special education graduation rates and district performance against state targets for all districts annually in the District Data Profile, as required by IDEA.</p> <p>Based on feedback gathered at focus group meetings, stakeholders in each session indicated that student outcome data, such as special education graduation rates, were not included in the new monitoring system.</p> <p>Systemic Recommendation: Data Analysis</p> <p>Disaggregate special education graduation and dropout rates longitudinally (e.g. three years) by district for analysis: This action will allow the State to identify which districts are exceeding the state target and those districts that are struggling to make progress toward the state target.</p> <p>The results of the Data Analysis should be used to inform and develop the Bureau’s technical assistance plan and target districts performing below state targets on specific indicators.</p> <p>The Bureau may want to access current guidance and resources for addressing issues related to improving graduation and dropout rates can be accessed from the National Technical Assistance Center on Transition (NTACT).</p>
2	Drop out
	<p>Observation</p> <p>The State reported a 0.76% Drop out rate and met its target of 0.76%.</p> <p>The NHDOE has a number of initiatives and priorities that focus on reducing the dropout rate for all children. In addition, the goal of Next Steps NH (the NH SPDG) is to increase the number of students with disabilities and/or at risk of dropping out of school that are college and career ready in NH through the implementation of evidenced based transition practices. The need to focus on strategies that support students staying in school by increasing family, student and school partnerships was also highlighted.</p> <p>Systemic Recommendation: Data Analysis</p> <p>See Indicator 1</p>

3A-C	Districts Meeting AYP/AMO for Disability Subgroup; Participation for Students with IEPs (Reading/Math); Proficiency for Students with IEPs (Reading/Math)
	<p>Observation</p> <p>3A: The State reported 100% and met its target of 92.59%.</p> <p>3B1: The State reported 97.65% participation rate for reading and met its target of 97.65%.</p> <p>3B2: The State reported 97.54% participation rate for math and met its target of 97.54%.</p> <p>3C1: The State reported 35.70% proficiency rate for reading and met its target of 35.70%.</p> <p>3C2: The State reported 25.94% proficiency rate for math and met its target of 25.94%.</p> <p>“...factors that impact this indicator [are] declining enrollment and minimum "n" size and the upcoming changes in statewide assessment. The [stakeholder] group stressed the need to revisit this once we have fully transitioned to the new assessments. There was also conversation about the impact of students moving on the data (enrolled for full academic year and those not enrolled for a full academic year) and questions about why the denominator for 3B was different for reading than for math. For 3C, the group considered what it means to be proficient and recognized the importance of understanding how far off from proficient students are.”</p> <p>The State provides technical assistance and professional development in the areas impacting access to general curriculum (for example, specially designed instruction and Universal Design for Learning Academy, and SWIFT) in order to improve assessment outcomes for students with disabilities statewide.</p> <p>Recommendation</p> <p>None</p>
4A	Suspension/ Expulsion
	<p>Observation</p> <p><i>The State reported 1.15% rate of suspension/expulsions and met its target of 1.15%.</i></p> <p><i>Based on the State’s definition of “Significant Discrepancy” and methodology, two out of 174 districts were identified and must undergo a review of Policies, Procedures, or Practices.</i></p> <p><i>There was much discussion of ongoing activities to support this trend of low suspensions/expulsions. There was a desire among [stakeholders] to see more technical assistance and support with positive behavioral supports and promoting preventive actions within districts.</i></p>
	<p>Recommendation</p> <p>None</p>

4B	Suspension/ Expulsion by Race and Ethnicity [compliance]
	<p>Observation</p> <p>The State reported 0.57% rate of suspension/expulsion and did not meet the 0% target.</p> <p>Based on the State’s definition of “Significant Discrepancy” and methodology, three out of 174 districts were identified and conducted a review of Policies, Procedures, or Practices. One district identified Policies, Procedures or Practices that contributed to the significant discrepancy and did not comply with the requirements.</p> <p>The one district has one year from the date of the noncompliance being identified to “(1) correctly implement the specific regulatory requirement(s) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) correct each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district, consistent with OSEP Memo 09-02.”</p> <p>The State reported a low rate of suspension/expulsion and identified only one district with Policies, Procedures or Practices that contributed to the significant discrepancy.</p> <p>Recommendation</p> <p>Offer “those activities that support the trend for low suspensions/expulsions” and “technical assistance and support in the area of positive behavioral supports” to all districts, not just to those districts identified for possible significant discrepancy with suspension /expulsion rates for students with disabilities.</p>
5A-C	Educational Environments (children 6 – 21)
	<p>Observation</p> <p>5A: The State reported 72.85% of children served inside the regular class 80% or more of the day and met its target of 72.85%.</p> <p>5B: The State reported 7.97% of children served inside the regular class less than 40% of the day and met its target of 7.97%.</p> <p>5C: The State reported 2.61% of children served In separate schools, residential facilities, or homebound/hospital placements and met its target of 2.61%.</p> <p>Because of upgrades to the data system, the release of guidance memos in 2013 and 2014 and ongoing training in the field regarding data entry, the group felt that baseline should be re-set for FFY 2013.</p> <p>Analysis of data used for the 2015-16 District Selection Process indicates that 63 out of 162 Districts (39%) did not meet the state target of 72.85% for Indicator 5A.</p> <p>Systemic Recommendation: Data Analysis</p> <p>Disaggregate special education placement data (Indicator 5A-C/6A-B) longitudinally (e.g. three years) by district for analysis: This action will allow the State to identify which districts are exceeding the state target and those districts that are struggling to make progress toward the state target.</p> <p>The results of the Data Analysis should be used to inform and develop the Bureau’s technical assistance plan and target districts performing below state targets on specific indicators. For additional in depth insight on Indicator 5A-C/6A-B, the Bureau may choose to consult OSEP’s 2015 PART B SPP/APR Indicator Analysis Booklet.</p>

6A-B	Preschool Environments
	<p>Observation</p> <p>6A: The State reported 50.36% of children attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program and met its target of 50.36%.</p> <p>6B: The State reported 18.22% of children attending a separate special education class, separate school or residential facility participation rate for reading and met its target of 18.22%.</p> <p>The two key questions posed for the indicator were: should we re-establish baseline year for this indicator and why; and what does the group recommend for targets for the new SPP for this indicator? Stakeholders wrestled with setting targets that were both ambitious yet achievable. There was considerable conversation about what the ultimate desired percentages would be in each category compared to how much movement we thought we could achieve in the next few years. Strategies to address potential root causes of challenges were explored. One area of recommended focus was to continue to improve data reported by district personnel. There was a recognition that this year saw an unprecedented turn-over in local preschool special education coordinators and special education administrators so getting the message out about how and what to report is more critical than ever. Strategies also included more routinized processes at the local level to ensure parents are asked about the amount of time the child is in regular early childhood settings and developing a process to validate the data are reflecting actuality. The second key area that was discussed was around continuing to provide the timely delivery of high quality, evidence based technical assistance and support to districts around the continuum of LRE and program development.</p> <p>Analysis of data used for the 2015-16 District Selection Process indicates that 55 out of 162 Districts (34%) did not meet the state target of 50.36% for Indicator 6A.</p> <p>Systemic Recommendation: Data Analysis</p> <p>See Indicator 5A-C</p>
7A-C	Preschool Outcomes
	<p>Observation</p> <p>7A1: The State reported 80.94% and met its target of 79.50%.</p> <p>7A2: The State reported 61.82% and met its target of 61.60%.</p> <p>7B1: The State reported 79.96% and met its target of 78.90%.</p> <p>7B2: The State reported 61.74% and met its target of 60.90%.</p> <p>7C1: The State reported 77.85% and met its target of 76.80%.</p> <p>7C2: The State reported 66.03% and met its target of 63.20%.</p> <p>Baseline year: The Stakeholder Input group recommended that baseline should be re-set to FFY 2012. This was because in FFY 2011, after an extensive review of data and stakeholder input, the state removed one of the 3 possible tools that the field can use, resulting in more valid and reliable data in FFY 2012.</p> <p>The State reported it does not use the Early Childhood Outcomes Center (ECO) Child Outcomes Summary Form (COSF). The two instruments used to gather the data are the online systems for Teaching Strategies Gold by Teaching Strategies and AEPSi by Brookes Publishing.</p>

7A-C	Preschool Outcomes
	<p>District personnel are responsible for ensuring the assessments are conducted with fidelity. They are encouraged to work closely with the child’s family members, Child Care /Head Start provider(s), and others who may have knowledge of a child when conducting an assessment. Some districts have hired/contracted with additional individuals to oversee the assessment process while others have designated this responsibility to specific personnel already on staff.</p> <p>The publishers, with direction from the NHDOE and ECO, have created systems to analyze the data at a state and district level based on the federal reporting requirements. This analysis converts the raw data from the assessment items to the ECO COSF scores and calculates progress as required by OSEP.</p> <p>The State-identified Measurable Result (SiMR) states that preschool children with disabilities in the identified subset of [16] districts will substantially increase their rate of growth in the area of improved positive social-emotional skills (including social relationships) by the time they turn six years of age or exit preschool special education (Indicator 7A1).</p> <p>Recommendation None</p>
8	Parent Involvement
	<p>Observation</p> <p>The State reported 36.93% rate of parent involvement and met the 36% target.</p> <p>The Indicator 8 Input Group recommended that, because starting next year the Parent Involvement Survey will be administered as a census survey over a two year period, the target should remain the same for the first three years of the State Performance Plan so as to afford each block an equal opportunity to reach the target. (With the premise that the 2013 gave us a “new baseline” to understand where we were as a state).</p> <p>Recommendation None</p>
9	Disproportionate Representation [Compliance]
	<p>Observation</p> <p>The State reported 0% rate of disproportionate representation and met the 0% target.</p> <p>“...Using the criteria established above, the NHDOE determined that, out of 174 school districts, 16 school districts met the cell size requirement for data analysis. Of those 16 school districts, 0 were identified as meeting the data threshold for disproportionate representation of over representation. In FFY 2009 the NHDOE, with support from NERRC and DAC, conducted an intensive review of our procedure for identification of LEAs with disproportionate representation. Based on this examination, the NHDOE determined that the process as explained in the SPP was sound. The small number of districts that met the cell size was a direct result of the homogeneous nature of New Hampshire’s population.”</p> <p>Recommendation None</p>

10	Disproportionate Representation [Compliance]
	<p>Observation</p> <p>The State reported 0% rate of disproportionate representation and met the 0% target.</p> <p>Using the criteria established above, the NHDOE determined that, out of 174 school districts, 16 school districts met the cell size requirement for data analysis. While 163 districts were excluded from the calculation based on small cell sizes, the NHDOE chose to include all districts in the denominator for this indicator, as permitted. Of the 14 school districts that met the cell size requirements, 1 was identified as meeting the data threshold for disproportionate over-representation. In FFY 2009 the NHDOE, with support from NERRC and DAC, conducted an intensive review of our procedure for identification of LEAs with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. Based on this examination, the NHDOE determined that the process as explained in the SPP was sound. The small number of districts that met the cell size was a direct result of the homogeneous nature of New Hampshire's population.</p> <p>Recommendation</p> <p>None</p>
11	Child Find [Compliance]
	<p>Observation</p> <p>The State reported 95.61% rate for timely evaluation and did not meet the 100% target (78 children from 30 districts).</p> <p>The NHDOE monitored each district in the state for compliance with this indicator. The data for this indicator were only partially available through the State database, the New Hampshire Special Education Information System (NHSEIS). NHSEIS does not collect data on written consent for time extensions or allowable exceptions. Those additional data points for this indicator were collected through a desk audit monitoring process soliciting additional documentation from the districts to demonstrate compliance.</p> <p>The NHDOE has verified that each of the 29 findings of noncompliance identified in FFY 2012 for this indicator has corrected the identified noncompliance, consistent with OSEP Memo 09-02.</p> <p>The State currently collects and monitors timely evaluation data from every district in the state. 17.25% of districts (30 out of 174) account for the 78 findings of noncompliance in FFY 2013 (29 findings in FFY 2012). The majority of the delays were reported 1-15 days past the 45-day timeline.</p> <p>A preliminary analysis of Indicator 11 data from 2013-14, 2014-15, 2015-16 reflect there are 5 districts with noncompliance reported for all three years, 3 districts with noncompliance reported for two of the three years, and 17 districts with noncompliance reported for the first time; 87 districts with compliance reported for all three years; 9 districts with compliance reported two of the three years; 20 districts reported for one of three years.</p> <p>Recommendation</p> <p>Conduct a three-year analysis of Indicator 11 data to determine if there are any patterns or trends in the reporting of compliance and noncompliance, and provide trend analysis to districts regardless of their compliance status.</p>

12	Early Childhood Transition [Compliance]
	<p>Observation</p> <p>The State reported 96.48% rate for early childhood transition and did not meet the 100% target (8 IEPs not developed/implemented by the child's 3rd birthday).</p> <p>The New Hampshire Department of Education collected data from each district in the state to determine compliance with this indicator. Data were collected for this indicator through a desk audit monitoring process, as the data required for this indicator were only partially available through the State database known as NHSEIS. Data were collected on all children who were served in Part C and referred to Part B for eligibility determination from the time period of July 1 – October 31, 2013. The data were collected from all geographic areas and accurately represent data for the full reporting period.</p> <p>The NHDOE has verified that each of the 6 findings of noncompliance identified in FFY 2012 for this indicator has corrected the identified noncompliance, consistent with OSEP Memo 09-02.</p> <p>The State currently collects and monitors early childhood transition data from every district in the state. There were 8 identified findings of noncompliance reported in FFY 2013, 6 findings the previous year (all corrected within one year). The majority of the delays were reported 1-15 days past the child's third birthday. Districts identified with noncompliance in FFY 2013 are currently engaged in correction of noncompliance.</p> <p>Recommendation</p> <p>None</p>
13	Secondary Transition [Compliance]
	<p>Observation</p> <p>The State reported 60.48% rate for secondary transition and did not meet the 100% target (49 IEPs did not contain each of the required components of secondary transition).</p> <p>The NHDOE through our monitoring processes continually looks at data and results to identify areas where additional training or further clarity is needed in the special education field. The NHDOE through compliance monitoring identified the need to provide further training to school district personnel in the writing of measurable annual goals. NHDOE staff researched and developed Measurable Annual Goals Training in collaboration with school district staff who were skilled in this area. Measurable Annual Goals Trainings were offered numerous times at various levels (early childhood, elementary, middle, and high school) to NH special education school staff during the 2012-13 school year. These trainings were extremely well attended and often filled to capacity. In addition, through our Indicator 13 monitoring process the NHDOE had become more concise about what constituted student invite and provided this as well as the annual goal criteria in our Indicator 13 trainings to districts selected for Indicator 13 monitoring in FFY 13. In FFY 2013 the NHDOE Indicator 13 compliance monitoring team began reviewing district's annual goals in accordance with this more defined measurable annual goals criteria provided through the trainings as well as being more concise about what constituted student invite to their IEP meeting where transition planning is discussed. This resulted in the FFY 13 slippage of 39.52 percentage points from the FFY 2012 100% compliance to the FFY 2013 60.48% compliance.</p> <p>The NHDOE continues to offer the Measurable Annual Goals Training to schools found out of compliance in this area and this year began offering a regional train the trainer model of the Measurable Annual Goals Trainings to regions of the state upon request. This regional train the trainer model brings skilled or interested teachers together from various schools in a region of the state to receive a multi-phase training of the Measurable Annual Goals Training where they learn what makes a measurable annual goal, practice writing and critiquing others annual goals, and then come back together a third time for follow up coaching and questions. This creates a cadres of trainers in a region that provide ongoing.</p>

	<p>The NHDOE in FFY 2011 began randomly selecting roughly fifteen (15) high schools to participate in Indicator 13 monitoring to ensure that all high schools will be monitored during the five-year cycle. Reporting for this Indicator is done only at the high school level, just as is done for Indicator 1 (graduation) and Indicator 2 (dropout), and no longer will be done at the district level. Once a NH high school is randomly selected, monitored, and meets 100% compliance for Indicator 13, they are removed from the random selection process until the five-year cycle is complete.</p> <p>The New Hampshire Process: The NHDOE uses an on-site file review process for monitoring for Indicator 13. NHDOE staff and/or qualified reviewers trained by the NHDOE conduct the file reviews. Randomly selected high schools were notified in the summer months prior to the start of the school year in which they will be monitored. Professional development opportunities were made available at no cost to the schools by the NHDOE in the areas of understanding the components of compliance, secondary transition, writing measurable post-secondary goals, etc. High schools were encouraged to take advantage of trainings offered by the NHDOE.</p> <p>The State received a “0” for reporting 64.3% for Indicator 13 in OSEP’s FFY 2013 Part B Compliance Matrix.</p> <p>The most recent information available on the implementation of Indicator 13 would place NHDOE among 34% of states that use their own checklist and among 64% that use review a sample of student files. Source: OSEP’s 2015 PART B SPP/APR Indicator Analysis Booklet.</p> <p>Recommendation</p> <p>Review the findings of noncompliance in the first and second years of Indicator 13 data collections to determine what changes, if any, need to be made to the Measurable Annual Goals training.</p>
14A-C	Post School Outcomes
	<p>Observation</p> <p>14A: The State reported 39.56% and met its target of 39.56%.</p> <p>14B: The State reported 63.11% and met its target of 63.11%.</p> <p>14C: The State reported 77.78% and met its target of 77.78%.</p> <p>In reviewing Indicator 14 results over the last 4 years, Stakeholders and the NHDOE agreed that a new baseline data year should be established using the FFY 13 actual data. In addition, the stakeholders felt the targets should remain stable at the FFY 13 actual data level until the final year of the SPP. They agreed that the final target measurements would be increased to the following measurements: a) 40.4%, b) 64.0%, and c) 78.2% which would represent an increase in approximately 10 more survey responders across the various measurement areas. The NHDOE does have a five year federally funded SPDG grant (2012-2017) called Next Steps NH with the goal to increase the number of students with disabilities and/or at risk of dropping out of school that are college and career ready in NH through the implementation of evidenced based transition practices. This grant provides NH high schools with training in evidence based secondary transition strategies and practices that ensure students are aware of and prepared to participate in further education and career training for improved post school outcomes.</p> <p>Recommendation</p> <p>None</p>

15	Resolution Sessions
	<p>Observation</p> <p>The State reported 80.00% rate of resolution sessions resolved through settlement agreements and met the 62.00-72.00% target. (5 resolution sessions, 4 settlement agreements)</p> <p>NH did not meet the threshold of at least 10 resolution sessions for FFY 2013. Therefore, although NH exceeded the target, NH is not required to meet the target because there were fewer than 10 resolution sessions in this year.</p> <p>Recommendation</p> <p>None</p>
16	Mediation
	<p>Observation</p> <p>The State reported 68.97% rate of mediations held that resulted in mediation agreements and met the 65.00-75.00% target. (29 mediations held, 20 agreements)</p> <p>There was a rich discussion about factors that impact this indicator such as changes in IDEA, a decrease in the number of due process hearings held, and the culture in NH around dispute resolution. There was a review of CADRE's analysis of the data and summary of history of this indicator which notes that the national mediation agreement rate is 69.8%. The NHDOE shared a summary of other state's targets from the previous SPP (provided through technical assistance from IDC) to help the group think about potential ranges for the targets.</p> <p>Recommendation</p> <p>None</p>
17	State Systemic Improvement Plan
	<p>Observation</p> <p>Baseline data of 71.13% was reported with targets set at 71.13% for FFY 2014 and 2015; 73.71% for FFY 2016; 76.29% for FFY 2017; and 79.80% for FFY 2018.</p> <p>The State-identified Measurable Result (SiMR) states that preschool children with disabilities in the identified subset of districts will substantially increase their rate of growth in the area of improved positive social-emotional skills (including social relationships) by the time they turn six years of age or exit preschool special education.</p> <p>Recommendation</p> <p>None</p>

Component 2. Integrated Monitoring Activities

Statutory Authority: 34 C.F.R. §300.600 State Monitoring and Enforcement

The Bureau of Special Education has developed a two-part process for the monitoring of Individualized Education Program (IEP) compliance, which begins with school district staff being trained to complete a self-assessment of their students' IEPs for compliance with the Individuals with Disabilities Education Act (IDEA). The Bureau feels the best way to ensure compliance is to increase school district staff's knowledge and understanding of the federal, state and local statutes, rules and regulations that relate to the development and implementation of students' IEPs to improve educational outcomes for students with disabilities. The second part of the IEP compliance review process involves Bureau staff conducting an on-site file review of school districts' identified evidence for student IEPs to verify that compliance has been met.

The intent of the self-assessment is:

- 1. To determine compliance with IDEA;*
- 2. For school personnel to gain a deeper understanding of the New Hampshire Rules for the Education of Children with Disabilities along with the responsibilities associated with special education; and*
- 3. To provide information for the district to improve its special education policies, procedures, and practices.*

NOTE: The first year of implementation of the new Compliance and Improvement Monitoring (CIM) process was the 2015-16 school year. Pingora's observations are based on the review of resources, meetings and interviews with Bureau staff, as well as interactions with special education directors and other stakeholders who had limited experience with the new CIM process. Pingora has taken this into account in its proposed recommendations and acknowledges the challenges of building a system while in the midst of implementing it.

2.1 District Selection Process

In February 2015 the New Hampshire Department of Education (NHDOE), Bureau of Special Education (Bureau) solicited input from district and community stakeholders to assist in the development of the district selection process for special education compliance and improvement monitoring. The Bureau presented three possible district selection processes; based on stakeholder input a fourth option was developed. This new process utilizes a multi-data approach rather than a single measurement tool which aligns with the Office of Special Education Programs (OSEP) differentiated monitoring approach. The Bureau utilized this multi-data approach for districts that were monitored during the 2015-2016 school year. The Bureau divided districts into six cohort groups based on enrollment size with the intent of giving equal district representation to each cohort group. A district's cohort group will be determined annually based on the October 1st count of the previous year. For example, for the 2015-2016 monitoring year the October 1, 2014 count was used.

The chart below demonstrates the groupings:

**Cohort Enrollment Size
Based on District Fall Enrollment Oct. 1st**

1	2,000+
2	1,200 – 1,999
3	550 – 1,199
4	370 – 549
5	135 – 369
6	0 – 134

The Bureau created a District Selection Rubric (Appendix 2) to outline the data collection components and their point values. The point system is designed so that meeting compliance is assigned a low point value, whereas not meeting compliance is assigned a higher point value. From the District Determinations a point value is assigned based on whether the district is meeting requirements, needs assistance, needs intervention or needs substantial intervention.

Below are the indicators identified in the State Performance Plan (SPP) that are assigned a point value:

Indicator	Description
4B	<p>Suspension/Expulsion: Whether or not a district had (a) 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; and (b) policies, procedures or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. (20 U.S.C. 1416(a)(3)(A); 1412(a)(22))</p> <ul style="list-style-type: none"> • Points will be assigned based on a yes or no
5A	<p>Education Environments: Percent of children with IEPs aged 6 through 21 served: Inside the regular class 80% or more of the day. (20 U.S.C.416(a)(3)(A))</p> <ul style="list-style-type: none"> • Points will be assigned based on the annual targets within the SPP
6A	<p>Preschool Environments: Percent of children aged 3 through 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program. (20 U.S.C.1416(a)(3)(A))</p> <ul style="list-style-type: none"> • Points will be assigned based on the annual targets within the SPP
11	<p>Child Find: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe. (20 U.S.C.1416(a)(3)(B))</p> <ul style="list-style-type: none"> • Points will be assigned based on a range of compliance
12	<p>Early Childhood Transition: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays. (20 U.S.C.1416(a)(3)(B))</p> <ul style="list-style-type: none"> • Points will be assigned based on a range of compliance

The Bureau will also review the State special education complaints between July 1st and June 30th of the previous school year. For example, selection for monitoring during the 2015-2016 school year will review complaints from July 1, 2013 to June 30, 2014. If there are two or more special education complaints that have the same substantiated allegation, a point value will be assigned. In addition, if there is a substantiated allegation in a complaint that has not been verified as corrected within the federally mandated one year timeline, a point will be assigned.

The district receiving the highest point values in each enrollment cohort will be selected for special education compliance and improvement monitoring. Districts that have been monitored within the last five years will not be assigned point values and therefore, not considered for special education compliance and improvement monitoring. In the event of a tie within an enrollment cohort one of the districts will be chosen at random.

The Bureau will reconvene the stakeholders group at a future date to discuss the consideration of adding a data point involving the results of the State assessment as well as the alternate assessment regarding the academic performance of students with disabilities.

Source: Bureau of Special Education FY'15 Memo #18

Observations

- The Bureau leverages stakeholders to help build components of its General Supervision System.
- The Bureau disaggregates student population into six cohort groups for the purpose of ensuring demographic representation by size of district. This action results in six districts identified for monitoring per year. Note: Six districts were selected for monitoring in 2015-16, one district requested monitoring.
- The State uses its Determinations process, State Performance Plan, and Dispute Resolution State Complaints in its District Selection Rubric. A review of data used in the initial District Selection Process from 2015-16 and from the previous two years 2013-14 and 2014-15 reflect how points were assigned by item (see table below).

Number of LEAs Assigned Points in the District Selection Process

	2013-14	2014-15	2015-16
Indicator 4B	0	0	0
Indicator 5A	12	7	2
Indicator 6A	NA	58	69
Indicator 11	24	24	27
Indicator 12	4	3	4
Determinations	40	22	17
Complaints	3	5	3

Data Source: Bureau Dataset

NOTE: Data Table Explanation

An analysis was conducted to identify trends on how points would have been assigned in the District Selection Process in the years prior to the first year of implementation in 2015-16. The trend analysis indicate that no districts are being assigned points for Indicator 4B, there is a decrease in districts assigned points for Indicator 5A (note: the SPP State Target for 5A is not used); an increase in districts assigned points for Indicator 6A; assigned points for Indicators 11 and 12 and complaints remain static; and assigned points for Determinations is decreasing.

- The Bureau plans to include student assessment data in the District Selection Rubric in the future.

- Districts with the highest point values assigned in the District Selection Rubric in each of the six cohort group are considered for monitoring. In 2015-16, 73 of 162 districts (45%) were not assigned a point in the District Selection Process (see table below).

Points Assigned for 2015-16 District Selection Process

Cohort	0 pts	1 pt	2 pts	3 pts	4 pts	5 pts	6 pts	7 pts	10 pts
1	9	6	5	3	1	0	0	0	0
2	6	5	5	5	0	1	0	1	1
3	15	3	3	4	1	0	0	1	0
4	12	7	4	1	1	0	1	1	0
5	13	6	3	3	1	0	0	2	0
6	18	7	1	4	1	0	0	1	0
No. of Districts	73	34	21	20	5	1	1	6	1
% of Districts	45%	21%	13%	12%	3%	1%	1%	4%	1%

Data Source: Bureau Dataset

NOTE: Data Table Explanation

An analysis was conducted to review the distribution of points across districts and determine the percentage of districts not receiving points (45%). Districts not assigned points in the District Selection Process are meeting the requirements in the Determinations process, meeting SPP compliance indicators, maintaining acceptable levels of LRE, and have no complaint investigations filed.

- Districts that have been monitored within the last five years are not assigned point values and not considered for special education compliance and improvement monitoring.
- Based on feedback gathered at focus group meetings, all stakeholders indicated that the previous monitoring system was more student outcome oriented than the current model which is more compliance oriented.

Recommendations

- 2.1a Regarding the policy of removing districts from consideration of future monitoring for five years, the Bureau should consider how a district re-enters the monitoring system after it has been engaged in an onsite visit and timely correction of noncompliance has occurred within the one year timeline.
- 2.1b Study the feasibility of including findings of noncompliance from Due Process Hearings in the District Selection Rubric.

2.2 District Notification Process

Once a district is selected, the Bureau of Special Education contacts the district to discuss the special education compliance monitoring review with the school administration. A summary of the district makeup is developed (number of schools, fall enrollment and child count data, and grade span).

Source: Introduction to the State's FFY 2013 SPP/APR

Observations

- The Bureau contacts the districts selected for monitoring via telephone prior to mailing the official correspondence to school administration.
- Only districts selected for monitoring receive correspondence on their rating in the annual District Selection Process for Compliance and Improvement Monitoring.
- When asked if the public needed more information about the Bureau's monitoring system 39 out of 56 or 70% of survey respondents, agreed or strongly agreed with this statement.

Recommendations

- 2.2a Disseminate correspondence to all districts regarding the district's rating in the District Selection Process. By providing this information, school administrators may choose to participate in professional development opportunities or access technical assistance to address areas of identified concern.

2.3 Targeted Technical Assistance

The Bureau of Special Education also provides targeted technical assistance regarding the special education compliance review process and completion of the self-assessment data collection form.

Source: Introduction to the State's FFY 2013 SPP/APR

Observations

- The Bureau offers targeted technical assistance regarding the special education compliance review process to districts prior to the on-site visit.
- The importance of early training/technical assistance was expressed by stakeholders and survey participants. When asked if professional development as the first step in the CIM process was beneficial 46 out of 55, or 84% of survey respondents agreed or strongly agreed with this statement.

Recommendation

None

2.4 Student Selection Process

The Bureau of Special Education provides the district with a list of students with disabilities representative of the school based on grade level, disability, gender, and case manager. Students residing in the district who attended a charter school were also included in the representative sample. During the on-site visit, the monitoring team selects a subset of the student files to review.

Source: The Bureau's 2015-16 Compliance and Improvement Monitoring (CIM) Manual

Observations

- The Bureau has a formal process for identifying student files to review that ensures a representative sample.
- The formal process for identifying student files was influenced by a recommendation from the previous Program Evaluation. The number of K-12 students to be monitored is determined by the number of K-12 students at each school at the time of student selection. Preschool students are counted and reviewed separately.

Districts submit a list of charter school students prior to student selection. Additional students are added to the list to account for students who move or exit between the time of selection and the on-site monitoring visits.

File Selection Methodology

K-12	PK
0-60 = 4	0-30 = 2
61-90 = 6	31-90 = 4
91+ = 8	

- 137 of 1,262 student files (11%) were reviewed during the onsite visits in 2015-16. The range of the percentage of files reviewed by district was between 9% and 30%.

2015-16 Compliance and Improvement Monitoring Process Percentage of Files Reviewed

	SWD Pop	Files Reviewe d	% Reviewe d
District A	46	8	17%
District B	111	14	13%
District C	500	44	9%
District D	277	34	12%
District E	151	16	11%
District F	23	7	30%
District G	154	14	9%
Total	1,262	137	11%

- 35 out of 47, or 74% of survey respondents indicated the Bureau should monitor between 1-10% of student files during the CIM process.

Recommendation

- 2.4a Maintain aggregate data on the total number of files reviewed by item to compare year to year in order to determine whether the student sampling process yields sufficient documentation available for the onsite review team to make findings of noncompliance and determine the appropriate corrective action.

2.5 Self-Assessment Data Collection

The self-assessment is just one part of the special education on-site monitoring. Six to eight weeks prior to the visit, districts receive a list of students by school for school age children. Additional list(s) will be included separately for preschool children. The number of students on the list will vary depending on the number of special education students at each school. The school list may include students with IEPs attending Charter Schools. At the on-site monitoring visit, the New Hampshire Department of Education (NHDOE) Bureau of Special Education (Bureau) monitoring team will randomly pick all but two students from each list at each school to review. The Bureau's expectation is that the self-assessment is completed prior to the on-site monitoring visit for all students selected at each school and for all students included on the list for preschool children. When determining compliance, the NHDOE will only review agreed upon/signed IEPs at the on-site monitoring visit. Therefore, if the IEP team is working on a proposed IEP, the NHDOE will review the previously agreed upon/signed IEP.

The monitoring visit consists of NHDOE team members and special education administrator(s) from other districts. The NHDOE team verifies district identified evidence on the self-assessment data collection form. While the district completes the entire self-assessment, each file is reviewed using half of the self-assessment items. The self-assessment is divided into two sections, and on the day(s) of the monitoring visit, each of the files that were selected was assigned a section to be reviewed by the monitoring team. Half of the files are reviewed for one part of the self-assessment, and the other half are reviewed using the second part of the self-assessment.

The districts are encouraged to invite their special education staff as well as related service providers to attend the review which provided another targeted professional development opportunity. Staff members are provided the opportunity to learn about implementing IDEA and the New Hampshire Rules for the Education of Children with Disabilities and to engage in a professional discussion of best practices for ensuring improved outcomes for students with disabilities.

During the monitoring visit, the NHDOE identifies practices that have the potential to become problematic and potential remedies to these practices. Whereas these practices do not rise to the standard of noncompliance, and therefore require no corrective actions, the NHDOE believes that the practices are noteworthy to be addressed.

Source: Introduction to the State's FFY 2013 SPP/APR

Observations

- The Self-Assessment Data Collection document contains 78 items, divided into two sections. The items reflect the special education process as outlined in the IDEA regulations and NH rules and includes Guidance on Evidence and Documentation.
- The Bureau provides training on completion of the Self-Assessment Data Collection document prior to the onsite visit.
- The Bureau offers a variety of options for a district to complete the Self-Assessment Data Collection document.
- The monitoring team consists of 2-6 Bureau staff including at least one special education administrator from another district who has been trained in the process by the Bureau.
- Half of the files are reviewed for one part of the self-assessment, and the other half are reviewed using the second part of the self-assessment.
- The Bureau identifies practices that have the potential to become problematic and potential remedies to these practices. In 2015-16, 11 recommendations were identified in four of the six districts monitored.
- Based on feedback gathered at focus group meetings, stakeholders indicated that the Self-Assessment Data Collection document should be a blend of both qualitative and quantitative measures. Outcomes should be included in the system.

Recommendations

- 2.5a Review the Self-Assessment Data Collection document and highlight “*those requirements that are most closely related to improving educational results for children with disabilities.*” This action may help districts and stakeholders understand the connection between compliance and improved outcomes in the Bureau’s monitoring system.

- 2.5b Aggregate the findings from the Self-Assessment Data Collections from all on-site visits to identify areas of concern which can be addressed through technical assistance and professional development. This data can be compared longitudinally to determine if patterns or trends exist and used to design targeted technical assistance.
- 2.5c Share the results of the analysis of the aggregated findings from the Self-Assessment Data Collection with the state as well as the professional development offerings designed to address the findings of noncompliance.
- 2.5d Aggregate the “Recommendations” for analysis and possible dissemination to the state. The Bureau currently has posted on its website two guidance documents, “Noncompliant Practices” and “Problematic Practices” that could be updated with this information.

2.6 Policies, Procedures and Practices Review

Each district must have policies, procedures, and effective implementation of practices that are aligned and support the implementation of IDEA and the New Hampshire Rules for the Education of Children with Disabilities. As part of the special education compliance monitoring review, the monitoring team reviewed the district’s policies and procedures manual for compliance.

In addition, the Bureau of Special of Education cross checked the Annual Request for Federal Special Education Funds FY 14, IDEA Part B Section 611 Assurances, and District Policies to Support Assurance Standards with the district’s policy and procedures manual to ensure that document name, date adopted, and pages were valid. Districts are required to submit assurance statements with their local application for IDEA funds. Based on the review of the district’s policies and procedures manual, the monitoring team makes written findings of noncompliance. The findings must be corrected as soon as possible, but no later than 6 months from the date of the report. This allows district to convene stakeholders and work with local school boards to create meaningful policy changes.

Source: Introduction to the State’s FFY 2013 SPP/APR

Observations

- As part of the special education compliance monitoring review, the Bureau monitoring team reviews the district’s policies and procedures manual for compliance.
- In 2015-16, one of seven districts was cited for noncompliance in Policies, Procedures and Practices.

Recommendation

- 2.6a Aggregate the findings of noncompliance and compare the number of findings from year to year to determine whether the amount of time allocated to this activity is worth expending as it is currently being implemented.

2.7 Special Education Forms Review

As part of the review of district’s forms implementing the special education process, the Bureau of Special Education also looked for evidence that the policies and procedures were effectively being implemented. The NHDOE notifies the district in writing of any findings of noncompliance regarding the effective implementation of practices that must be corrected as soon as possible but no later than 3 months from the date of the report.

Source: Introduction to the State’s FFY 2013 SPP/APR

Observations

- As part of the special education compliance monitoring review, the Bureau's monitoring team looks for evidence that the district's policies and procedures are effectively being implemented.
- In 2015-16, three of seven districts were cited for noncompliance in the Special Education Forms Review.
- The Bureau has developed Written Prior Notice model forms to assist districts with standardizing their special education process paperwork.
- Based on feedback gathered at focus group meetings, stakeholders felt model forms would be helpful or at least forms that meet the requirements would assist with compliance. A review of 48 state websites indicated that 70% of states (34 of 48) currently use model forms as a means to communicating expectations and minimum standards. Note: In IDEA 2004, Congress required the U.S. Department of Education OSEP to publish and widely disseminate "model forms," that are "consistent with the requirements of [Part B of the IDEA]" and "sufficient to meet those requirements." Specifically, the reauthorization required the Department to develop forms for the: (1) IEP; (2) notice of procedural safeguards; and (3) prior written notice.

Recommendations

- 2.7a Review the aggregated findings to determine if there is a pattern or trend to the noncompliance worth sharing with the districts through the dissemination of a guidance memo or professional development offerings.
- 2.7b Aggregate the findings of noncompliance and compare the number of findings from year to year to determine whether the amount of time allocated to this activity is worth expending as it is currently being implemented.
- 2.7c Gather stakeholder input on the development of model forms (beyond the Bureau developed Written Prior Notice model forms).

2.8 Personnel Review

The Bureau of Special Education reviews the District special education staff certifications using the New Hampshire Educator Information System. The review process is for special education staff employed during current school year.

The data were generated and reviewed prior to the visit for each school being monitored. Each special education staff member's endorsement was compared to the subject/assignment. This process was used for special educators who hold Education Intern License 4 (INT4), Beginning Educator Certification (BEC) and Experienced Educator Certification (EEC). If the endorsement was appropriate to the subject/assignment then the renewal date of the endorsement was verified to ensure that the endorsement was current.

If there was a discrepancy between endorsement and the subject/assignment, the district was given an opportunity to verify the data. If the discrepancy could not be resolved, a finding of noncompliance was made based on Personnel Standards pursuant to Ed 1113.12, 34 CFR 300.18, and 34 CFR 300.156.

Source: Introduction to the State's FFY 2013 SPP/APR

Observations

- As part of the special education compliance monitoring review, the Bureau monitoring team reviews special education staff certifications.
- In 2015-16, one of seven districts were cited for noncompliance in the Special Education Personnel Review.

Recommendation

- 2.8a Aggregate the findings of noncompliance and compare the number of findings from year to year to determine whether the amount of time allocated to this activity is worth expending as it is currently being implemented.

2.9 Identification and Correction of Findings of Noncompliance

Districts are responsible for implementing the special education process in accordance with IDEA and the New Hampshire Rules for the Education of Children with Disabilities. The self-assessment data collection form highlights the district's understanding of the requirements of IDEA and the New Hampshire Rules for the Education of Children with Disabilities and was reviewed during the monitoring visit. Each area of compliance on the self-assessment data collection form clearly outlines whether the compliance is either a requirement of both IDEA and the New Hampshire Rules for the Education of Children with Disabilities or a requirement of solely the New Hampshire Rules for the Education of Children with Disabilities. During the monitoring visit, the monitoring team verified the evidence of compliance based on review of the student file, using the district's self-assessment as a resource.

Based on this review, the Bureau of Special Education identified findings of noncompliance with IDEA and the New Hampshire Rules for the Education of Children with Disabilities. The findings include the compliance citation, the area of compliance, the specific component of the regulation, and the required corrective actions, which include timelines for demonstrating correction of noncompliance. Student specific information was not included in the report but was provided to the district's Special Education Director.

There are two main components to the corrective actions entitled, "Corrective Action of Individual Instance of Noncompliance" and "Corrective Action Regarding the Implementation of the Regulations". The NHDOE timelines and process are designed to ensure verification of correction of noncompliance as soon as possible but in no case more than one year from the written finding. The first component, "corrective action of individual instance of noncompliance", is for any noncompliance concerning a child-specific requirement. There must be evidence that the district has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district. These areas must be corrected as soon as possible, with state timelines given in the report for each area. The NHDOE will return to the district, typically within 3 months from the date of the report, to verify compliance for each individual instance identified in the report. The second component, "corrective action regarding the implementation of the regulations" would typically involve the district providing professional development training to appropriate staff with regards to areas found to be in noncompliance. The NHDOE reviews updated data, collected after the identification of noncompliance, to demonstrate that the district is correctly implementing the specific requirement. This involves a follow-up on-site review of new files selected to ensure verification of correction of noncompliance as soon as possible but in no case more than one year from the written finding.

Source: Introduction to the State's FFY 2013 SPP/APR

Observations

- The Bureau uses the Self-Assessment Data Collection resource to identify noncompliance during onsite monitoring visits.
- There are 78 items in the Self-Assessment Data Collection resource that are aligned to IDEA regulations and/or state rules.
- The 78 items are grouped into 17 sections (A-Q). Findings of noncompliance are cited by section. For example, Item D. Written Prior Notice (Determination of Eligibility) has six items that are reviewed.
- The Bureau describes three stages of corrective action:
 1. *First Stage Corrective Action of Student Specific Instance(s) of Noncompliance*, which requires correction at the individual student level, short timeline for correction, and verification of correction at the next on site visit.
 2. *First Stage Corrective Action Regarding the Implementation of the Regulations*, which requires training, a short timeline for completing the training, and evidence that the training occurred.
 3. *Second Stage Corrective Action Regarding the Implementation of the Regulations*, which requires verification of correction based on a new review of student files.
- 12 of the 17 Sections require all three stages of corrective action listed above (Sections A, B, E, G, H, I, J, K, L, M, N, O); 5 sections require the First and Second Corrective Action Regarding the Implementation of the Regulations (Sections C, D, F, P, Q).
- The seven districts that were monitored in 2015-16 are still within the one year timeline of correction; therefore, it is too early to evaluate the progress of correction

Recommendations

- 2.9a Aggregate the findings from the Self-Assessment Data Collections from all on-site visits to track the correction over time by Section/Item to determine which Sections/Items are problematic to address. This data can be compared longitudinally to determine if patterns or trends exist and used to design targeted technical assistance to address timely correction.
- 2.9b Develop a database to track the correction of all findings of noncompliance from the SPP Indicators (4B, 9, 10, 11, 12, 13), onsite monitoring, and dispute resolution processes (Complaints and Due Process Hearings). Having the findings of noncompliance all in one place would better ensure the tracking the findings to correction within timelines and allow real time analysis of noncompliance data.

Component 3. Policies Procedures and Effective Implementation

In addition to monitoring policies, procedures and effective implementation through the SPP and the Compliance Monitoring Review, the Bureau has authority under RSA 186-C:5 III as follows:

- (d) *On-site monitoring to further evaluate noncompliance, verify accuracy of data, assess the adequacy of the corrective action plans and their implementation, or other purposes as the department may determine, which may include:*
- (1) *Regular or periodic monitoring.*
 - (2) *Special on-site monitoring required as part of the resolution or remediation of a complaint under 34 C.F.R. sections 300.151-152, or based on reliable information received indicating that there is reason to believe that there is noncompliance with standards.*
 - (3) *Random or targeted visits which may be unannounced when the department determines that an unannounced visit is needed.*

Source: Introduction to the State's FFY 2013 SPP/APR

Observation

The Bureau provided their engagement with Lakeview Neurorehabilitation Center, a residential facility for individuals with brain injuries and developmental disabilities, in October 2014, on the directive of the Governor as an example of special onsite monitoring. Two on-site visits focused on a review of the three major components of operating a private approved special education program: policies and procedures, credentialed personnel, and curriculum. Additional information about the on-site visit is available on the NHDOE website at:

- http://www.education.nh.gov/instruction/special_ed/documents/lakeview_special_monitoring.pdf
- http://education.nh.gov/instruction/special_ed/documents/lakeview_special_monitoring_appendix.pdf
- http://education.nh.gov/instruction/special_ed/documents/lakeview_revised2010.pdf

As a result of the special education monitoring and additional investigations concerning neglect and abuse, the Lakeview Neurorehabilitation Center was closed.

Recommendation

- 3.1a Provide information about how the Bureau implements *RSA 186-C:5 III(d)(2)* and (3) on its website under Special Education Compliance Monitoring. By increasing transparency in its processes, the Bureau may enhance all stakeholder's understanding of the Bureau's full monitoring responsibilities, in particular the public and private approved facilities serving students with disabilities.

Component 4. Data on Processes and Results

Data on processes and results are intricately woven into all areas of general supervision. The Bureau coordinates with the EDFacts stewards and other Bureaus in the department to ensure fidelity of data and results. As part of the SPP process, the Bureau annually reports to the public on district performance compared to the state and established targets.

As required by the Individuals with Disabilities Education Act (IDEA), 34 CFR section 300.600, the Bureau 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 State's 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 educational agency (LEA) is valid, reliable, and timely. The Bureau considers compliance and may consider other performance indicators in relation to the State's targets for improvement for these indicators. Based upon this information, this State must determine whether the district:

- *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)*

Source: Introduction to the State's FFY 2013 SPP/APR

Observations

- The Bureau has a process for making Determinations annually and it is explained on the NHDOE website, with links to additional guidance.
- The table below reflects the results from the last Determinations analysis conducted in spring 2015:

2014-15 Determinations Status	No. of Districts
Met Requirements	144
Needs Assistance	17
Needs Intervention	0
Needs Substantial Intervention	0

Data Source: Bureau Dataset

NOTE: Total of 162 districts in dataset, one district has no data reported in 2015-16 data

Recommendation

None

Component 5. Technical Assistance (TA) and Professional Development

The New Hampshire Department of Education, Bureau of Special Education provides a tiered approach to technical assistance (TA) to ensure the timely delivery of high quality, evidence based technical assistance and support to districts. The TA is closely paired with professional development (PD) to ensure that service providers have the skills to effectively provide services that improve results for students with disabilities. In alignment with OSEP's TA & D Conceptual Framework, NH defines TA Activities and the levels as follows:

Technical Assistance Activities

TA Activities provide expertise in response to a client's defined problem or need in order to increase their capacity. Clients typically include local school district personnel and parents of children with disabilities but may also include other people interested in special education. New Hampshire has specified three categories of technical assistance—Universal, General; Targeted, Specialized and Intensive, Sustained. Each category is important and should be employed strategically to achieve the desired outcomes. The description below references NHDOE Bureau of Special Education (Bureau) staff however this model also applies to key initiatives funded with IDEA funds. Each of the levels of technical assistance includes a variety of professional development activities. These are designed to promote evidence-based practices, utilize the Participatory Adult Learning Strategies (PALS) model and take into consideration implementation science for scale-up and sustainability.

Universal, General TA

Passive technical assistance (TA) and information provided to independent users through their own initiative resulting in minimal interaction with NHDOE Bureau of Special Education (Bureau) staff. This includes one-time, invited or offered professional development presentations by Bureau staff such as trainings regarding: NHSEIS; Catastrophic Aide; IDEA Federal Funds Application; and presentations at the NH Special Education Administrators Association. This category of TA also includes information or products, such as numbered Memorandums, guidebooks and manuals, and other resources downloaded from the Bureau's website by independent users. Brief communications by Bureau staff with recipients, either by telephone or email are considered Universal, General TA.

In addition, dissemination activities are considered Universal, General TA. This includes the distribution of information and resources to specific audiences with or without a direct request for this information. The intent is to collect, package and spread knowledge and the associated evidence-base in a way that can be accessed by audiences on their own schedules and without the direct intervention of the Bureau staff.

Targeted, Specialized TA

Targeted or specialized technical assistance (TA) are services developed based on needs common to multiple recipients and not extensively individualized. In this TA, a relationship is established between the TA recipient and one or more Bureau staff or the Bureau's designee. This category of TA can be one-time, labor-intensive events, such as on-site training to selected districts regarding the completion of the self-assessment data collection form prior to the compliance monitoring review. They can also be episodic, less labor-intensive events that extend over a period of time, such as facilitating a series of meetings with new Special Education Administrators or Special Education Coordinators or the Measurable Annual Goals trainings with a coaching component. Facilitating communities of practice can also be considered Targeted, Specialized TA.

Targeted TA is also provided to districts with findings of noncompliance relative to indicators in the State Performance Plan. Bureau staff offer TA and PD to district administrators and practitioners, as appropriate. This can include a review of data, identification root causes of noncompliance and support for district personnel with understanding the intricacies of the area being addressed. This TA may be mandated as part of the correction of noncompliance.

Intensive, Sustained TA

The Intensive or Sustained technical assistance (TA) services are often provided on-site and require a stable, ongoing relationship between the Bureau staff and the TA recipient. This category of TA should result in changes to policy, program, practice, or operations that support increased recipient capacity and/or improved outcomes at one or more systems levels. Frequently these TA services are defined as negotiated series of activities designed to reach a valued outcome. Many of the Bureau's initiatives provide intensive TA to districts that demonstrate readiness and a desire to engage in significant work. A non-exhaustive list of current intensive TA includes the UDL Academy, NH Next Steps, SEE Change, SWIFT, NH Safe Schools and Healthy Students State Planning grant, and NH Connections. These generally have an application process or some other selection criteria. Recipients' of these types of intensive TA commit to a multi-year process that includes data collection and evaluation of implementation.

Mandatory intensive TA may be provided to districts that are determined to need substantial intervention with the implementation of IDEA. Bureau staff and district leadership work closely to identify root causes that impact the determination and to develop and implement a long-term plan to remedy areas of concern.

Source: Introduction to the State's FFY 2013 SPP/APR

Observations

- The Bureau reviews information from its State Performance Plan, findings from Monitoring and Dispute Resolution Processes to identify subjects for technical assistance and professional development offerings.
- The Bureau offers professional development on topics aligned to the Compliance and Improvement Monitoring Process (e.g. Self-Assessment Data Collection resource) and Indicator 13 Monitoring (e.g. Measurable Annual Goals training).
- The Bureau is in the process of developing a system for managing information on professional development offerings.
- The Bureau is in the process of revising and standardizing its evaluation forms for its professional development offerings.
- Based on feedback gathered at focus group meetings, all stakeholders stressed the importance of consistency and depth in the Bureau's professional development offerings.

Recommendations

- 5.1a Use online survey evaluations after trainings have been delivered and follow up evaluations to participants to determine if they are (1) still using knowledge and skills acquired at the training (if so, how are they using them); (2) implementing practices shared at the training; (3) accessing or using resources offered at the training; and (4) experiencing difficulty or success in implementing practices shared at the training. The follow-up evaluation information, when aligned to the purpose and desired results of the training, should provide the Bureau with a measure of the effectiveness and value of the training.
- 5.1b Develop internal capacity and content expertise to address professional development and technical assistance needs resulting from monitoring findings and trends.

NOTE: This recommendation may require the Bureau to consider adding professional personnel at the level of an educational consultant with the requisite knowledge and skill to support the delivery of technical assistance and development of professional development.

Component 6. Improvement, Correction, Incentives and Sanctions

Statutory Authority: Ed 1125.02 Enforcement Procedures.

By virtue of State Law and Regulation, the Bureau applies enforcement procedures subsequent to the issuance of corrective actions specified in the orders resulting from a complaint investigated, a due process hearing, or a monitoring activity. The Bureau monitors the execution of the corrective actions. At the conclusion of the time limit specified, the Bureau generates a written report indicating whether the issues have been resolved, and if not the extent to which the agency had taken corrective action to achieve compliance with the IDEA and the NH Rules for the Education of Children with Disabilities. In the event the written report shows that the agency has not complied with orders issued by the department, the Commissioner of Education gives written notice of the further enforcement action to be taken.

When taking enforcement action, the commissioner considers:

- (1) Severity, length and/or the repetitive nature of the same or other noncompliance;*
- (2) Whether good faith effort was made to correct the problem;*
- (3) The impact on children who are entitled to FAPE; and*
- (4) Whether the nature of the noncompliance is individual or systemic. Enforcement actions include but are not be limited to:*
 - (1) Corrective action plan development, implementation, and monitoring;*
 - (2) Voluntary and mandatory technical assistance as determined by the department;*
 - (3) Mandatory, targeted professional development as determined by the department;*
 - (4) Directives ordering specific corrective or remedial actions, including but not limited to withdrawing program approval, pending an appeal;*
 - (5) Targeting or redirecting the use of federal special education funds in the areas of concern;*
 - (6) Formal referral to the bureau of credentialing for review;*
 - (7) Order the cessation of operations of discrete programs operated by a school district, collaborative program, private provider of special education, public academy, or state institution for the benefit of children with disabilities;*
 - (8) Require redirection of federal funds to remediate noncompliance of more than one year;*
 - (9) Making no further payments of state or federal funds to the LEA or other public agency until the department determines that there is no longer any failure to comply with the orders;*
 - (10) Order, in accordance with a final state audit resolution determination, the repayment of misspent or misapplied state and/or federal funds;*
 - (11) In the case of an LEA or other public agency, refer the matter to the department of justice for further action; and*
 - (12) In the case of a private provider of special education or other non-LEA program, order all school districts with students placed in the private provider of special education to relocate the students for whom each district is responsible to other programs or facilities that are in compliance with the IDEA and Ed 1100.*

Source: Introduction to the State's FFY 2013 SPP/APR

Observations

- The Bureau has formal interventions and sanctions at its disposal to exercise at its discretion.
- Information about the interventions and sanctions can be found in the introduction of the State Performance Plan/Annual Performance Report.
- Reference to interventions and sanctions will be included in the CIM Timeline and Process Manuals.

Recommendation

None

Component 7. Effective Dispute Resolution

Statutory Authority: 34 C.F.R. §§300.151-153 State Complaint Procedures; §300.506 Mediation §§300.507-517 Due Process Complaints

Alternative Dispute Resolution (ADR) may take the form of a neutral conference as described in RSA 186-C:23-b and Ed 215.02, and mediation as described in RSA 186-C:24 and Ed 215.03. For over 20 years the New Hampshire State Department of Education has actively promoted Alternative Dispute Resolution (ADR) as a timely, cost-effective and confidential method of helping people to resolve disputes before going to an administrative hearing. Even before the enactment of the RSA 186-C:23 in 1990, which established Neutral Conferences in New Hampshire, the Department of Education had ADR in place and was offering Mediation to parties. In recent years both parties and their advocates have increasingly chosen this alternative route toward resolving disputes.

In New Hampshire ADR involves an independent third person, called a “neutral evaluator” or “mediator,” depending on the ADR process chosen, whose role is to assist the parties in either resolving the dispute or lessening the areas of conflict. By using ADR early in a dispute, parties are empowered to reduce potentially protracted and repetitive legal proceedings and make decisions that affect not only the issue(s) in dispute but also their future relationship. Alternative Dispute Resolution (ADR) is available to any person aggrieved by a final decision at their school district prior to filing an appeal at the state level. ADR is not mandatory for any party nor does entering into ADR impair either party's right to an appeal. If an alternative dispute resolution option is selected by a party and resolution is not achieved, the individual selected as a neutral or mediator will not be the same individual who is subsequently appointed as a hearing officer to preside at an administrative due process hearing.

Due Process Hearing Complaints:

Either a parent a child or the school district may file a due process hearing complaint on any matter relating to a proposal or a refusal to initiate or change the identification, evaluation, or educational placement of a child, or the provision of a free appropriate public education (FAPE) to the child. The time period for the hearing procedures is 45 calendar days not including a 30 day resolution period. A school district must offer a resolution meeting if a parent has requested the due process hearing. The due process complaint must allege a violation that happened not more than two years before you or the school district knew or should have known about the alleged action that forms the basis of the due process complaint. If a parent are requests a due process hearing to recover the cost of a unilateral placement, the parent must file the request within 90 days of the unilateral placement. The above timeline does not apply to the parent if they could not file a due process complaint within the timeline because the school district:

- *specifically misrepresented that it had resolved the issues identified in the complaint; or*
- *withheld information from you that it was required to provide you under IDEA 2004.*

The school district must inform the parent of any free or low-cost legal and other relevant services available in the area if the parent request the information, or if the parent or the school district file a due process complaint.

*For more information on Special Education Due Process Hearings and Alternative Dispute Resolutions, go to: http://www.education.nh.gov/legislation/special_ed_due_process.htm
Special Education Complaint Procedures: The “Complaint Process” is one method parents or others have to resolve an issue if they believe a public agency (LEA or SEA) has not complied with a special education law. Because most differences are successfully resolved at the local level, parents may wish to notify their school district to give them the opportunity to resolve the issue at the local level before filing a complaint. The “Complaint Process” is one of the Procedural Safeguards afforded to parents under Federal and State laws. The New Hampshire Department of Education is required to make available to parents and other individuals the ability to file formal complaints against a school district if they believe the school district violated a federal or state special education law.*

Any person, including students, or organization can file a complaint. The person filing the complaint does not need to live in New Hampshire, but there are specific requirements that need to be met for filing. The person or organization filing the complaint will be referred to as the “complainant.” The complaint process is one of the rights parents, other individuals and organizations have if they believe the school district has violated federal or state special education laws. The complaint is a formal request to the state agency (New Hampshire Department of Education) to investigate the allegation(s) of noncompliance with the federal or state laws. For more information about the NH Special Education Complaint Process, go to: http://www.education.nh.gov/instruction/special_ed/complaint.htm

Source: Introduction to the State’s FFY 2013 SPP/APR

Observations

- The Bureau has formal Dispute Resolution Processes (Early Resolution, Complaints, Mediation, Due Process Hearing Complaints).
- The Bureau has a Complaint Procedures Manual; Instructions on How to File a Complaint with Model Complaint Form; FAQ on Special Education Complaints; CADRE’s Guide to Parents on Special Education Complaints on the NHDOE website.
- The Bureau provides information about the Dispute Resolution Processes in its Procedural Safeguards document.
- The Bureau has established procedures for reconsideration of state complaint decisions that permit extension of a final decision beyond the 60-day timeline. The Bureau’s implementation of reconsideration is not in alignment with OSEP Guidance. See *Dispute Resolution Procedures under Part B of the Individuals with Disabilities Education Act (Part B) (2013) and the Part B Self Assessment: Dispute Resolution (2015)*.
- Based on feedback gathered at focus group meetings, stakeholders indicated accessing dispute resolution information via the NHDOE website is confusing.
- Three out of four stakeholder groups indicated a concern with the knowledge and skills complaint investigators, and this variable skill level leads to the perception of inconsistency in NHDOE decisions.
- A review of FY 2016 complaints determined that 11 out of 18 complaints did not meet the Bureau’s standard for special education complaints and were dismissed.

Recommendations

- 7.1a Review OSEP Guidance on procedures for reconsideration of Bureau complaint decisions and determine if the Bureau wishes to continue to offer reconsideration.
- 7.1b Ensure ongoing training for complaint investigators to increase consistency in the complaint investigation process.
- 7.1c Review the internal intake process of the complaint system currently utilized to ensure that each complaint that meets the requirements outlined in 34 C.F.R. §300.153 is investigated, unless resolved or withdrawn.
- 7.1d Review the voluntary corrective action (VCA) process to ensure that it meets the minimum state complaint procedures outline in 34 C.F.R. §300.152(a)(3), and ensuring that the Bureau issues a final decision consistent with 34 C.F.R. §300.152(a)(5).

Component 8. Fiscal Management

The ANNUAL REQUEST FOR FEDERAL FUNDS allows a local education agency (LEA) to apply for IDEA Part B Section 611 & Preschool Section 619 funds in one application. The application is a web based online process, which requires activities, assurances and a consolidated application option. Funds are distributed based on a reimbursement process after an extensive review by the Bureau to ensure activities are allowable costs under IDEA. This application process walks districts through a process to ensure that required proportional share of funds are spent on children with disabilities who are enrolled by their parents in private schools. Districts also specify if they are using IDEA funds for CEIS, which allows the Bureau to monitor the appropriate use of CEIS dollars.

The NH Department of Education Agency Audit Manager conducts audits of districts' use of Title I, Food Service and Special Education funds. The State Director of Special Education receives a copy of the letter to the district when there is an audit with findings which concern Special Education. The district is required to complete corrective action within 30 days of the request for correction. The NHDOE Audit Manager verifies that the findings are timely corrected. In the past, findings have concerned timesheets for employees paid with federal funds, inventory paid for with federal funds was not being properly tagged and the presence of rules/regulations surrounding equipment and services purchased with federal funds.

Source: Introduction to the State's FFY 2013 SPP/APR

Observation

- The Bureau reviews the following Fiscal Management information as part of its annual Determinations process: (1) Audit information (as described above); (2) IDEA Grant Management; and (3) Maintenance of Effort (MOE) data.

Recommendation

- None

Additional Components of the NHDOE General Supervision System

The following additional components of the NHDOE General Supervision System are not included in the General Supervision narrative in the State Performance Plan/Annual Performance Report, but were included in the Program Evaluation:

1. Age/Capacity Waivers
2. Individual Program Approval
3. Monitoring of Students with Disabilities in Correctional Facilities
4. Out-of-State Program Approval
5. Monitoring Review for Approval of Private Provider Special Education Programs
6. New Special Education Instructional Program Application
7. Private Providers Residential Licensing
8. Shortened School Day and Home Instruction

1. Age/Capacity Waiver

Districts may submit an application to the department to place an additional student who does not meet the approved public or private in state program's age range or program capacity (Ed 1126.04). The department reviews the LEA application and approve the application if it meets the criteria set forth in Ed 1126.04 (e)-(f). Upon approval, the district may annually:

- (1) Accept one student who meets an approved special education program's "disabilities served" but is below or above the program's age range by no more than one year, OR*
- (2) Accept one student who meets the program's age-range and disabilities served, but whose acceptance will result in the program exceeding its program capacity by no more than one additional student.*

No more than one student may be placed in any approved public or private special education program pursuant to Ed 1126.04.

Statutory Authority: Ed 1126.04 Waiver Process for Placements in Approved In-State Programs

Source: The Bureau's Process Manual for CIM, PA, and AP3s

Observation

- The Bureau has a process for approving the placement of an additional student who does not meet the approved public or private in-state program's age range or program capacity.

Recommendation

- None

2. Individual Program Approval

An Individual Program Approval (IPA) is an option for a school district in order to place a student with an educational disability in a program not approved to provide special education services. This option is available when no approved program which would be appropriate can be found.

A Request for an IPA is made by the school district to the New Hampshire Bureau of Special Education. An IPA Request may be made for a placement of up to one year/365 days in duration. An IPA is available solely for in-state programs. IPAs are not an option for out-of-state programs.

An IPA must be requested by the school district and approved by the New Hampshire Bureau of Special Education BEFORE the student may attend the program.

The requirements for requesting an IPA and the IPA Request form are available on the NHDOE Web site. Once an IPA Request has been approved by the Bureau, the student may attend the program. Data entry of the IPA placement into NHSEIE is done by the Bureau, not by the school district.

Statutory Authority: Ed 1126.05 Placements in In-State Programs Not Currently Approved to Provide Special Education and Related Services

Source: The Bureau's Process Manual for CIM, PA, and AP3s

Observations

- The Bureau has a process to approve the placement of a student with an education disability in a program not approved to provide special education services. This option is available when no approved program which would be appropriate can be found.
- The Bureau has approved six requests in the past three years.

Recommendation

- None

3. Monitoring of Students with Disabilities in Correctional Facilities

Under the Individuals with Disabilities Education Act (IDEA), youths with disabilities in correctional facilities are entitled to special education and related services. Providing appropriate services for these students as well as monitoring those services can be extremely challenging. At the time of the initial onsite visit in November 2015, the State was waiting on guidance from the Office of Special Education Programs on monitoring of correctional facilities. In February 2016, OSEP provided the State Correctional Education Self-Assessment (SCES). This voluntary State Correctional Education Self-Assessment (SCES) is designed to assist states in self-assessing their systems for providing special education and related services to students with disabilities in correctional facilities.

Source: OSEP State Correctional Education Self-Assessment (SCES) Guidance

Observations

- The only facility in which students with disabilities are adjudicated or awaiting adjudication is Sununu Youth Center/Youth Detention Services. The child count as of March 2016 is 32 students with disabilities. Child count data from Granite State High School, Corrections Special School District was not requested.
- When a student with a disability is incarcerated at a county correctional facility, the liable LEA shall evaluate the student and make a determination of eligibility under Ed 1108 and develop, implement, and monitor an IEP for the student under Ed 1109.
- Information about incarcerated students with disabilities is difficult to find on the NHDOE website and is not reflected in the Bureau's CIM Process Manual under "Student Selection Process."

Recommendation

- 3.a Share information about a district's responsibilities related to IDEA for incarcerated students on the NHDOE website as well as the "Student Selection Process" in the CIM Process Manual.

4. Monitoring Review for Approval of Private Provider Special Education Programs

The Special Education Monitoring Review for Approval of Private Provider Special Education Programs process ensures that students with educational disabilities have access to; can participate in; and can demonstrate progress within the general education curriculum, thereby improving student learning. The primary focus of the monitoring review is to improve educational results and functional outcomes for all children with disabilities.

Monitoring is done on a cyclical basis. During the year prior to monitoring, the New Hampshire Department of Education (NHDOE), Bureau of Special Education (Bureau) offers training to each private provider who is involved in the monitoring process. Training encompasses writing Measurable Annual Goals, Written Prior Notice, Self-Assessment, and a topic selected by the private provider based on current need.

At the beginning of the school year in which the private provider is being monitored, the private provider will send the Bureau their completed application for renewal of Bureau special education approval/nonpublic school approval in addition to the program's policy and procedure manual and any special education forms that are used by the private program. Following a review of these documents, the monitoring team will conduct an on-site review in which student files are examined for evidence of implementation of the policies and procedures through the special education process. The Bureau will also conduct a follow-up review to verify the implementation of corrective actions as defined in the summary report.

Source: NHDOE Private Provider Special Education Programs Webpage

Observations

- The monitoring of Private Providers is modeled after the Compliance Monitoring and Improvement process for Public Schools.
- The cycle of monitoring is determined by the number of findings identified through on site monitoring (the fewer the findings, the longer time frame between monitoring visits).
- Based on feedback gathered at the focus group meeting with Private Providers, stakeholders were unclear on how the cycle of monitoring is determined.

- Based on feedback gathered at the focus group meeting with Private Providers, stakeholders indicated that the previous monitoring system was more student outcome oriented than the current model which is more compliance oriented..
- Since the Private Provider Approval Process is modeled after the CIM process, the recommendations in this program evaluation to improve the CIM process will have a beneficial impact on how Private Providers are monitored.

Recommendation

- 4.a Gather feedback from Private Providers on establishing a different cycle of monitoring (not one based on number of recent findings) and incorporating the review of student outcomes data in the monitoring process the next time a stakeholder meeting is convened to improve the monitoring process.

5. New Special Education Instructional Program Application

The process for approval of a new special education instructional program begins with a conversation with the requesting district, public academy, private provider of special education, public agency, or other non-district program and the New Hampshire Department of Education (NHDOE), Bureau of Special Education (Bureau) to determine the appropriateness of the program and readiness for implementation. The process from development to implementation may last from three to six months. Requesting entities are encouraged to contact the Bureau when first considering the development of a new program. If determined feasible, the Bureau will send out an application packet and provide technical assistance as needed with completion of the application and supporting documents.

If approval is granted by the Bureau, the district, public academy, private provider of special education, public agency, or other non-district program will receive written notice of initial approval for one year, and the new special education instructional program will be entered into the New Hampshire Special Education Information System (NHSEIS). At that time students may be placed in the new program. Within one year of the approval, an on-site monitoring visit will be conducted by Bureau representatives to determine continued approval.

Change to an Existing Special Education Instructional Program Application

When considering a change in a currently approved special educational instructional program such as with disability areas, location, and/or grade/age spans, districts must contact the NHDOE to request an application for a program change.

Statutory Authority: Ed 1126.03 Program Approval of Public and Non-Public Programs

Source: NHDOE Program Approval Webpage

Observations

- Approval for special education instructional programs is unique to New Hampshire.
- Paperwork related to Approved Programs are reviewed during the Compliance and Improvement Monitoring process.
- The Bureau has a quick turnaround on approvals in order to prevent delays in a student receiving a Free Appropriate Public Education (FAPE) in the Least Restrictive Environment (LRE).

- Program approval for a student's placement in an instructional program may be a barrier to the delivery of a FAPE in the LRE.

Recommendation

- 5.a Present quantitative and qualitative data to the legislature in support of removing this requirement as it poses an unnecessary barrier to the provision of FAPE in the LRE and potential legal liability to a district or the NHDOE.

6. Out-of-State Program Approval

*The State manages the process for the approval for entering out-of-state approved special education programs in the New Hampshire Education Information System (NHSEIS). Districts requesting out-of-state programs entered as placement options in NHSEIS must complete the Out-of-State Program Request Form and submit it with the host state's certificate of special education approval. **Note: Host state Nonpublic approval is not special education approval and programs cannot be recorded in NHSEIS as special education placements without special education approval.***

Statutory Authority: Ed 1126.06 Out-Of-State Placements

Source: *The Bureau's Process Manual for CIM, PA, and AP3s*

Observation

- The Bureau has a process for managing requests for entering out-of-state approved special education programs in the NHSEIS. This process allows student information to be tracked in NHSEIS.

Recommendation

- None

7. Private Providers Residential Licensing

Before the State approves placement of private provider students who reside at a school, the State must ensure the DHHS licensing for the residence is current. Program approval letters for private providers that also have residential programs include a section for the residential license and how the residential facilities can be accessed in NHSEIS. Private Providers are instructed to provide the Bureau with copies of updated licenses as soon as practicable. The Bureau sends a request for an updated license thirty days prior to the expiration of the license.

Source: *The Bureau's Process Manual for CIM, PA, and AP3s*

Observation

- The Bureau has a process for ensuring that it does not approve placement of a private provider student in a facility without a current residential license.

Recommendation

- None

8. Shortened School Day and Home Instruction

The State has a process for managing and approving the Shortened School Day consent form and supporting documentation that are submitted when the IEP determines that a student with a disability will be given a shortened school day.

Statutory Authority: Ed 1113.15 The Length of the School Day

The State has a process for managing and approving Home Instruction applications that are submitted when the IEP team determines that the IEP for a child with a disability should be implemented at home for more than 45 days or for an IEP to be implemented at home for more than 45 days.

Statutory Authority: Ed 1111.05 Home Instruction for School-Aged Children

Source: Process Manual for: CIM, PA, and AP³s

Observation

- Parts of the NHDOE rules related to Shortened Day and Home Instruction have been proposed for removal.

Recommendation

- None

APPENDIX A

SUMMARY OF STATEWIDE PERFORMANCE BY SPP INDICATOR

New Hampshire's FFY 2013 State Performance Plan/Annual Performance Report is available online at http://education.nh.gov/instruction/special_ed/documents/annual_performance_report_2013b-nh.pdf

Indicator	Description	FFY	2011	2012	2013
1	Graduation Percent of youth with IEPs graduating from high school with a regular diploma.	Target	80.00%	85.00%	85.00%
		Data	69.46%	70.20%	71.03%
2	Dropout Percent of youth with IEPs dropping out of high school.	Target	3.20%	2.50%	0.76%
		Data	0.85%	1.43%	0.76%
3A	Districts Meeting AYP/AMO for Disability Subgroup Participation & performance of children with IEPs on statewide assessments: Percent of districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP/AMO targets for the disability subgroup.	Target	NA	NA	92.59%
		Data	NA	92.59%	100.00%
3B	Proficiency for Students with IEPs Participation & performance of children with IEPs on statewide assessments: Participation rate for children with IEPs (Reading) Participation rate for children with IEPs (Math)	Target	97.25%	97.35%	97.65%
		Data	98.00%	98.00%	97.65%
		Target	97.25%	97.35%	97.54%
		Data	98.00%	98.00%	97.54%
3C	Proficiency for Students with IEPs Participation & performance of children with IEPs on statewide assessments: Proficiency rate for children with IEPs against grade level, modified, and alternate academic achievement standards (Reading) Proficiency rate for children with IEPs against grade level, modified, and alternate academic achievement standards (Math)	Target	71.00%	70.40%	35.70%
		Data	37.00%	38.00%	35.70%
		Target	70.00%	70.20%	25.94%
		Data	28.00%	28.00%	25.94%

Indicator		Description	FFY	2011	2012	2013
4A	Suspension/ Expulsion	Rates of suspension and expulsion Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs	Target	2.75%	2.50%	1.15%
			Data	1.15%	0.00%	1.15%
4B	Suspension/ Expulsion	Rates of suspension and expulsion Percent of districts that have (a) 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; and (b) policies, procedures or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of behavioral interventions and supports, and procedural safeguards.	Target	0.00%	0.00%	0.00%
			Data	1.15%	0.00%	0.57%
5A	Educational Environments (children 6 – 21)	% of children with IEPs aged 6 through 21 Inside the regular class 80% or more of the day.	Target	51.00%	53.00%	72.85%
			Data	73.73%	73.23%	72.85%
5B	Educational Environments (children 6 – 21)	% of children with IEPs aged 6 through 21 Inside the regular class less than 40% of the day.	Target	16.00%	15.00%	7.97%
			Data	8.32%	8.01%	7.97%
5C	Educational Environments (children 6 – 21)	% of children with IEPs aged 6 through 21 In separate schools, residential facilities, or homebound/hospital placements.	Target	2.75%	2.50%	2.61%
			Data	2.60%	2.48%	2.61%
6A	Preschool Environments	% of children with IEPs aged 3 through 5 attending a: Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program.	Target	NA	51.00%	50.36%
			Data	50.03%	47.88%	50.36%
6B	Preschool Environments	% of children with IEPs aged 3 through 5 attending a: Separate special education class, separate school or residential facility	Target	NA	10.00%	18.22%
			Data	10.06%	17.51%	18.22%

Indicator		Description	FFY	2011	2012	2013
7A	Preschool Outcomes	% of preschool children aged 3 through 5 with IEPs who demonstrate improved: Positive socio-emotional skills (including social relationships)	Target	67.00%	68.00%	79.50%
			Data	70.00%	79.50%	80.94%
		A1 Of those preschool children who entered or exited the preschool program below age expectations in Outcome A, the percent who substantially increased their growth by the time they turned 6 years of age or exited the program.	Target	71.50%	72.00%	61.60%
			Data	67.20%	61.60%	61.82%
		A2 The percent of preschool children who were functioning within age expectations in Outcome A by the time they turned 6 years of age or exited the program.	Target	71.50%	72.00%	61.60%
			Data	67.20%	61.60%	61.82%
7B	Preschool Outcomes	% of preschool children aged 3 through 5 with IEPs who demonstrate improved: Acquisition and use of knowledge and skills (including early language/communication and early literacy)	Target	68.00%	69.00%	78.90%
			Data	73.70%	78.90%	79.96%
		B1 Of those preschool children who entered or exited the preschool program below age expectations in Outcome B, the percent who substantially increased their growth by the time they turned 6 years of age or exited the program.	Target	53.70%	54.00%	60.90%
			Data	55.90%	60.90%	61.74%
		B2 The percent of preschool children who were functioning within age expectations in Outcome B by the time they turned 6 years of age or exited the program.	Target	53.70%	54.00%	60.90%
			Data	55.90%	60.90%	61.74%

Indicator		Description	FFY	2011	2012	2013
7C	Preschool Outcomes	% of preschool children aged 3 through 5 with IEPs who demonstrate improved: Use of appropriate behaviors to meet their needs				
		C1 Of those preschool children who entered or exited the preschool program below age expectations in Outcome C, the percent who substantially increased their growth by the time they turned 6 years of age or exited the program.	Target	69.00%	70.00%	76.80%
			Data	73.90%	76.80%	77.85%
		C2 The percent of preschool children who were functioning within age expectations in Outcome C by the time they turned 6 years of age or exited the program.	Target	63.50%	64.00%	63.20%
			Data	58.80%	63.20%	66.03%
8	Parent Involvement	Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services & results for children with disabilities.	Target	36.00%	37.00%	36.00%
			Data	51.00%	52.00%	36.93%
9	Disproportionate Representation	Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.	Target	0.00%	0.00%	0.00%
			Data	0.00%	0.00%	0.00%
10	Disproportionate Representation	Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.	Target	0.00%	0.00%	0.00%
			Data	0.00%	0.00%	0.00%
11	Child Find	Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe in which the evaluation must be conducted, within that timeframe	Target	100.00%	100.00%	100.00%
			Data	95.00%	96.00%	95.61%
12	Early Childhood Transition	Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed & implemented by their third birthdays.	Target	100.00%	100.00%	100.00%
			Data	99.00%	97.00%	96.48%

Indicator		Description	FFY	2011	2012	2013
13	Secondary Transition	Percent of youth aged 16 & above with an IEP that includes coordinated, measurable, annual IEP goals & transition services that will reasonably enable the student to meet the post-secondary goals	Target	100.00%	100.00%	100.00%
			Data	94.20%	100.00%	60.48%
14A	Post School Outcomes	Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were: Enrolled in higher education within one year of leaving high school	Target	45.20%	47.20%	39.56%
			Data	40.30%	47.40%	39.56%
14B	Post School Outcomes	Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were: Enrolled in higher education or competitively employed within one year of leaving high school	Target	72.20%	74.50%	63.11%
			Data	62.70%	69.90%	63.11%
14C	Post School Outcomes	Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were: Enrolled in higher education or some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.	Target	84.60%	86.60%	77.78%
			Data	79.70%	82.80%	77.78%
15	Resolution Sessions	Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements.	Target	62-72%	65-75%	62-72%
			Data	100.00%		80.00%
16	Mediation	Percent of mediations held that resulted in mediation agreements.	Target	75-85%	75-85%	65-75%
			Data	78.20%	71.40%	68.97%
17	State Systemic Improvement Plan	The State-identified Measurable Result (SIMR) states that preschool children with disabilities in the identified subset of districts will substantially increase their rate of growth in the area of improved positive social-emotional skills (including social relationships) by the time they turn six years of age or exit preschool special education.	Target	NA	NA	NA
			Data	NA	NA	71.13%

Summary of Performance by Indicator in FFY 2013: Met Target (Yes or No)

1	Graduation	No	7B1	Preschool Outcomes	Yes
2	Dropout	Yes	7B2	Preschool Outcomes	Yes
3A	Districts Meeting AYP/AMO for Disability Subgroup	Yes	7C1	Preschool Outcomes	Yes
3B1	Participation for Students with IEPs (Reading)	Yes	7C2	Preschool Outcomes	Yes
3B2	Participation for Students with IEPs (Math)	Yes	8	Parent Involvement	Yes
3C1	Proficiency for Students with IEPs (Reading)	Yes	9	Disproportionate Representation*	Yes
3C2	Proficiency for Students with IEPs (Math)	Yes	10	Disproportionate Representation*	Yes
4A	Suspension/ Expulsion	Yes	11	Child Find*	No
4B	Suspension/ Expulsion by Race/Ethnicity*	No	12	Early Childhood Transition*	No
5A	Educational Environments (children 6 – 21)	Yes	13	Secondary Transition*	No
5B	Educational Environments (children 6 – 21)	Yes	14A	Post School Outcomes	Yes
5C	Educational Environments (children 6 – 21)	Yes	14B	Post School Outcomes	Yes
6A	Preschool Environments	Yes	14C	Post School Outcomes	Yes
6B	Preschool Environments	Yes	15	Resolution Sessions	Yes
7A1	Preschool Outcomes	Yes	16	Mediation	Yes
7A2	Preschool Outcomes	Yes	17	State Systemic Improvement Plan	NA

*Compliance Indicator

APPENDIX B
ONSITE STAKEHOLDER SESSION - MARCH 2-4, 2016
SUMMARY

During the course of the evaluation, one of the systematic approaches to gather information regarding the performance of the Bureau's system of general supervision was onsite stakeholder groups. As part of the process, Pingora Consulting, LLC identified groups of stakeholders and provided this information to the Bureau. Using a collaborative process, the Bureau assisted with the identification of specific stakeholders and approved the selection of stakeholders. The Bureau assisted in sending out invitations as a means of increasing the likelihood the communication would get through agency firewalls.

A consistent protocol was developed and used with each of the stakeholder groups. The protocol and agenda were provided to the Bureau prior to the stakeholder sessions consistent with the process outlined and approved in the evaluation proposal.

Seventy-five invitations were sent to various stakeholders and 34 individuals attended the four sessions held March 2-4, 2016. Approximately 45% percent of the stakeholders invited attended one of the four sessions. A description of each group of stakeholders is outlined below.

Group 1 – 14 Attendees - Invited State Advisory Committee (SAC) Members/Parent Information Center (PIC)/Disability Rights Center NH/NH Kids Count/NH Council on Developmental Disabilities/Department of Health & Human Services

- 8 Parents
- 3 Local Education Agencies
- 1 State Agency
- 2 Parent/School Administrator Organization Representatives

Group 2 – 7 Attendees - Invited Local Education Agencies that recently (past three years) experienced the monitoring process.

- 7 Local Directors of Special Education

Group 3 – 6 Attendees- Stakeholders that had participated and assisted the Bureau with revising the monitoring process.

- 4 Local School District Staff
- 1 NHSAA Representative
- 1 NHASEA Representative

Group 4 – 10 Attendees - Private Program – Non Public Agencies

- 10 Program Administrators or Staff

A summary of the information from the stakeholder groups is provided. The comments were analyzed and where supporting themes were identified, this information was incorporated into the final report as observations that support recommendations.

Group 1

Topic: Continuous Improvement Monitoring

Communication

- Need to find ways to filter the communication to the teachers – not just the administrators
- Even though the monitoring reports were intended for public consumption, in their current form they are overwhelming – it would be nice to have an executive summary.
- Of the SAC members at the focus group about half and half knew about the monitoring system.
- Need more methods to communicate - Communication from the NHDOE comes in the form of memos, Directors meetings and Supt meetings.

Outcomes

- The monitoring system is disconnected from the kids and outcomes – paperwork vs implementation.
- Process
- It would be nice if parents could participate in the monitoring system but it would require training.
- Local directors use the shadowing as part of their personal professional development.
- Several group members had questions regarding the student level correction and systemic improvement.
- Students placed out of district 186(c)(5) – how are all districts monitoring on this not just onsite.
- Risk Rubric includes the number of complaints and this was a good addition.

Staff/Training

- Concern over the personnel shortages at the NH DOE.
- The Bureau needs to provide more consistent training – it shouldn't matter how consumers contact the Bureau the response should be the same, i.e. – technical assistance, calling in for an answer, data training, etc.
- Compensatory Education is never part of a corrective action plan (CAP) – backward CAP more difficult and not used –CAPs usually only focuses on the going forward and looking at procedure and practice.
- All CAPs look similar – always includes training.

Topic: Dispute Resolution System

Access

- Lack of Understanding of a complaint (generally).
- Name is confusing – due process hearing and state complaint was used frequently and interchangeably.
- State website can be difficult to navigate.

- It would be great to have more Ideas regarding how to get information to parents – procedural safeguards are hard to understand.

Process

- Reconsideration of 10 days is too short.
- Individuals will call the Bureau if they need assistance.

Staff/Training

- There was some concern over the qualifications of the Investigators.

Group 2

Topic: Continuous Improvement Monitoring

Communication

- Notification regarding onsite monitoring sufficient.
- Transparency has increased – on self-assessment districts know what compliance evidence would be expected.

Outcomes

- There continues to be a disconnect between outcomes and compliance.
- Compliance monitoring could be streamlined and focus turned to outcomes.
- Spend TA/PD resources on changing and increasing outcomes
- FM was stronger and connected to outcomes.
- Compliance = paperwork

Process

- File sample is more proportionate now – previously no difference between large and small.
- File review document did have 90 data pts – now down to 77 and every file is not reviewed for compliance with every section.
- Student selection representative of school population.
- Model forms (easy IEP) seems to be preferred by the Bureau.
- Model forms would be helpful or at least forms that meet requirements – this would assist with compliance.
- Inconsistent interpretations of what ends up as a finding.
- Difference between prelim report and final report.
- Selection process is unclear, especially to districts that are not selected.
- Cyclical monitoring ensured that every district was visited.
- Professional development before onsite is essential.
- Compliance monitoring done out of school year – shouldn't take away from instruction.

Staff/Training

- There is concern regarding the lack of training & skills of monitors – district staff/leads have more experience and understanding the Bureau staff.
- Thought special education director shadowing was a bonus.
- The Bureau comes to provide technical assistance – viewed as helpful.
- Very few people (FTE) at DOE – leads to potential inconsistency – no capacity and lack of knowledge and skills.

Topic: Dispute Resolution System

Access

- A lot of information to sort through on the website.
- Procedural Safeguards are not easy to understand.

Staff/Training

- If called DOE – cooperative with district and would provide information – however it depends on who answers the phone at the DOE – lack of consistency.
- Building Facilitators have made a difference.
- Investigators are not always adequately trained/skilled – this leads to additional inconsistency.
- Individual Corrective Action – DOE doesn't imply there is a pattern throughout the district (not systemic).

Group 3

Topic: Continuous Improvement Monitoring

Outcomes

- Old System – with the focus on achievement gap – looked at the system of instruction, outcomes, growth model, all education, district-wide grouping – looking at the system – more holistic approach.
- Somewhere in the middle – must look at student – get the compliance piece but must be balanced.

Process

- Relative selection framework – may not be enough difference in the components – weighted?
- Including complaints is important – one complaint is OK, multiple complaints would add to rubric
- Selection of indicators in the risk rubric was based on those that seemed to produce the most reliable data.
- Forms were developed by locals but not accepted or included in the system.
- Student Selection is adequate – sampling of disability category/race/grade.
- Sample Size OK.
- Blend qualitative and quantitative measures.
- Parent were involved in the old system but not in the new system – would be helpful feedback

- No formal evaluation of monitoring after it has been completed.

Staff/Training

- Staffing an issue at DOE – six districts is a low number of districts to review in a year.
- Resources are limited – contracting out of the monitoring activities was expensive.
- Difference between Professional Development (PD) and Technical Assistance (TA) – DOE offer TA or CAP TA but not PD.
- DOE resources – experience and inconsistency of staff.
- Training is grant driven that may or may not be connecting to complaints and monitoring – if you did a needs assessment may not match where resources/PD are being developed – may not need to do as much just do it better.

Topic: Dispute Resolution System

Access

- Parents learn about complaints if they ask – but hard to access on their own.

Process

- Not a resolution process rather a fight -- us against them mentality.

Staff/Training

- Inconsistent investigators – training, does it happen regularly? What are CI qualifications?

Group 4

Topic: Private Non-Public Approval Review

Communication

- Given some guidelines in advance.
- Not receiving enough information in advance.

Outcomes

- Disconnect between monitoring and student outcomes.
- Should look at data demonstrating improved outcomes. Longitudinal view.
- Checklists cannot demonstrate improved outcomes.
- Measure student outcomes requires qualitative real life information and data
- Evidence of compliance should get at student outcomes
- Need to refocus on outcomes. Need to hear what you are doing right, not just what is wrong.

Process

- Stakeholder involvement in process development.
- Process not initially consistent (new system).
- Prior contractor met one year in advance (like a year 0) –should continue the process.
- Needs to be alignment of guidance and expectations.

- 5 year monitoring cycle sufficient.
- Prior process got to know the program. Current process is paperwork compliance only.
- Liked case study approach. High pride. Now just a checklist and punitive.
- Prior process got to know the program. Current process is paperwork compliance only.
- Two files is sufficient. Need to see program not more files.
- Private providers want the process to be collaborative.
- Presence of something on the checklist doesn't equal implementation.
- No end summary to serve as technical assistance for staff, could there be an executive summary.

Staff/Training

- Capacity (Special Education background) of NHDOE staff is a concern.
- Former Contractor very experienced in special education and did a quality job – NHDOE understaffed and no special education experience.
- Create consistency between the different NHDOE staff.
- DOE collaborating on training new directors of private programs and non public programs. This was viewed as a positive relationship.
- NHDOE staff not always current on knowledge of laws at private schools.
- DOE staff accessible but not consistent.
- Told new system would not be a purely compliance check but the lack of experience and inconsistency of NHDOE leads to a compliance check off only.
- Private providers are more included in PD – DOE rep at each of their monthly meetings – good communication.
- No support available outside narrow menu of PD choices.
- DOE has never had sufficient staff (or qualified) to monitor.
- NHDOE should be required to have highly trained staff.

Topic: Dispute Resolution System

Access

- PIC & other agencies very helpful.
- Parents discouraged from proceeding to dispute by school.
- Technical Adequacy:
- System appears to work if accessed.

APPENDIX C

SURVEY RESULTS

Pingora Consulting developed and administered a survey which was reviewed and approved by the Bureau. The purpose of the survey was to provide another opportunity for stakeholders throughout the state of New Hampshire to share understanding and perspectives regarding the implementation of monitoring and program approval activities.

During the onsite stakeholder meetings in March a link to the survey was shared, as well 300 business cards were provided to the stakeholders that attended one of the onsite sessions. Each card contained the survey link. Stakeholders were given an explanation of the survey purpose and were encouraged to contact their colleagues or constituents and share the survey link. Several stakeholders mentioned upcoming statewide events that would provide them an opportunity to share the survey link with others in the field.

The survey link was open for approximately three weeks, beginning March 1 - 22, 2016. Sixty-nine stakeholders responded to the survey. Approximately 70% of the responses came from individuals involved in the public school system. A table with a complete listing of all the respondents' roles and response percentage is listed below.

Role	Response Percentage
Parent	10%
Public School Staff	70%
Private Program Staff	9%
Service Provider	1%
Other	10%
Administrators Consultants Education Organization	

The survey had four sections:

- Section 1: Special Education Compliance & Improvement
- Section 2: Special Education Dispute Resolution
- Section 3: Special Education Private, Nonpublic Program Approval
- Section 4: Special Education Data Collection and Reporting

Respondents did not have to complete each section if they determined that a particular section was not applicable to the work they do. Section 1 had the most respondents (62), Section 2 (60) and Section 3 & 4 (57). In all instances summary results were based on a minimum of 5 respondents, i.e. if there were only one or two respondents that answered a question a particular way this response was not given conclusory significance.

Following is summary of the survey results:

- Every region of the state had respondents participate in the survey. The Lakes, South Central and Seacoast Region accounted for almost 83% of the responses. The number

of responses from each of the regions appeared to align with the overall state population distribution.

The following is a summary of the responses. The responses have been grouped by common topic.

Communication

- When asked if the public needed more information about the NHDOE's monitoring system 39 out of 56 or 70% of respondents, agreed or strongly agreed with this statement.
- 42 out of 49, or 86% of respondents indicated they knew how to access the IDEA special education state complaint system without any formal, legal assistance.
- 37 out of 49, or 76% of respondents indicated information regarding the NHDOE dispute resolution system was easy to find.

Data

- 38 out of 49, or 78% of respondents, indicated district staff have confidence in the data reported to the State.
- When asked whether district staff access data technical assistance regarding reporting requirements offered by the state, 35 out of 49, or 71% of respondents agreed or strongly agreed.
- 36 out of 49, or 73% of respondents, agreed or strongly agreed that district staff receive professional development on data reporting requirements.
- When asked whether district staff understand the importance of reporting timely and accurate data, 96% or 47 out of 49 respondents agreed or strongly agreed.
- 31 out of 49, or 63% of respondents agreed or strongly agreed that district staff understand how data are used in the State's monitoring process.

Process

- 34 out of 56, or 61% of respondents, agreed or strongly agreed that NHDOE uses the results of its CIM process to provide relevant technical assistance and professional development opportunities.
- When asked if professional development as the first step in the CIM process was beneficial 46 out of 55, or 84% of respondents agreed or strongly agreed with this statement.
- 35 out of 47, or 74% of respondents indicated the NHDOE should monitor between 1-10% of student files during the CIM process.
- 46 out of 49, or 94 % of respondents were aware of that mediation is available at no cost to a parent to resolve any special education dispute, even disagreements separate from complaints and hearings.
- 28 out of 41, or 68% of respondents agreed or strongly agreed that the monitoring cycle for private, non-public education programs provides sufficient oversight.
- When asked if the amount of NHDOE support for private, non-public program providers is sufficient to meet the educational needs of individual students in those programs, 20 out of 40, or 50% of respondents disagreed or strong disagreed with this statement.
- 32 out of 56, or 57% of respondents, indicated the self-assessment tool was sufficiently comprehensive.

- When asked if issued corrective action plans are sufficient to correct procedural compliance 35 out of 49, or 71% of respondents, agreed or strongly agreed with this statement.
- 29 out of 49, or 59% of respondents, agreed or strongly agreed that the corrective action plans were sufficient to correct substantive compliance.
- 40 out of 49, or 82% of respondents indicated the NHDOE uses a verification process to determine that monitoring noncompliance has been corrected.
- 32 of 48, or 67% of respondents, agreed or strongly agreed that state complaint system is intended to address different types of concerns that the due process hearing system.
- When asked whether the state complaint investigation reports or decisions addressed the future provision of services for all children with disabilities, respondents were just as likely to disagree as agree. 23 out of 49, or 47% agreed or strongly agreed and 22 out of 49, or 45% disagreed or strong disagreed.
- When asked if approving private, non-public special education programs was an important function of NHDOE, overwhelming respondents agreed or strongly agreed. 40 out of 41, or 98% of respondents agreed or strongly agreed.
- 33 out of 41, or 80% of respondents agreed or strongly agreed that approval of private, non-public special education programs helps to provide students in those programs an appropriate learning environment.

Outcomes

- 39 out of 56, or 70% of respondents, indicated student outcomes should be a factor in the selection of school districts to participate in the CIM process.
- When asked whether the CIM process determines whether a school district provides students with a free appropriate public education (FAPE) 19 out of 49, or 39% agreed or strongly agreed with this statement.
- 27 out of 41, or 66% of respondents, agreed or strongly agreed NHDOE has a system in place to monitor the educational outcomes for students placed in private, non-public special education programs.

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

<i>A. Use of Data in Focused Monitoring and Program Approval</i>			
1. Expand the use of data to guide the selection of district for Focused Monitoring reviews.			
Date of Entry	Response	Status	Verification
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	NHDOE currently implements the District Selection Process as deserved in FFY 2015 Memo #18.
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.	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. June 30, 2014- The Bureau of Special Education is preparing for the submission of the FFY 2013 SPP/APR due in February 2015.	NHDOE reported a SSIP in its submission of FFY 2013 Part B State Performance Plan (SPP)/Annual Performance Report (APR) in February 2015.
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.	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. June 30, 2014 - The Northeast Regional Resource Center (NERRC) collaborated with the Office of Special Education Program (OSEP) to sponsor the State Systemic	NHDOE described stakeholder input regarding the SSIP in its submission of FFY 20133 Part B State Performance Report (APR) in February 2015.
		Improvement Plan (SSIP) regional meeting on March 19 th and 20 th . 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. 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. 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). 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	

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

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	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.	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). 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. 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. 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	NHDOE currently implements the District Selection Process as described in FFY 2015 Memo #18.
		and sustainability of evidenced-based practices for 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	The NHDOE outlines the current student selection process in the <i>2015-16 CIM Process Manual</i> , page 9-10. The current student selection process is designed to produce a representative list covering gender, grade, disability, and special education manager. The number of files selected is based on K-12 student population (for example, 0-60 students = 4 files; 61-90 students = 6 files; 91+ students = 8 files). Preschool students are counted and reviewed separately (for example, 0-30 students = 2 files; 31-90 students = 4 files). The NHDOE provides a list of schools, grade levels, number of student to be monitored at each school, the date of the visit, and the student lists by school to the district identified for monitoring.
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	

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

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	The Bureau has a staff member assigned to coordinate the activities related to the logistics of implementing the CIM Process.
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	According to the 2015-16 CIM Process Manual, Bureau staff do a self training on the self-assessment compliance review resource prior to training districts/visiting directors. Prior to monitoring visits, the visiting directors are trained in the use of the self-assessment via webinar.
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.	The Bureau staff continues to conduct special education compliance monitoring visits.

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	This recommendation is not applicable to the current monitoring system.

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

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	The NHDOE has issued guidance and developed forms around Written Prior Notice as evidenced by resources available on the NHDOE website.
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.	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. 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.	Districts are required to submit all district forms regarding the special education process at least 30 days prior to the onsite monitoring visits as evidenced by the CIM 2015-16 Sample Timeline and <i>2015-16 CIM Process Manual</i> , page 19.
		The Special Education Compliance Monitoring Review Report contains the following components: <input checked="" type="checkbox"/> Overview of the Special Education Monitoring Process <input checked="" type="checkbox"/> Policies, Procedures and Effective Implementation <input checked="" type="checkbox"/> Effective Implementation of Practices <input checked="" type="checkbox"/> Recommendations to address problematic practices that do not represent noncompliance <input checked="" type="checkbox"/> Special Education Personnel <input checked="" type="checkbox"/> Monitoring Special Education Process <input checked="" type="checkbox"/> Compliance Summary for the district <input checked="" type="checkbox"/> Findings of Noncompliance The 2014-2015 report will also include an appendix with the district's approved special education instructional programs.	
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	The CIM 2015-16 Sample Timeline illustrates the timelines of the monitoring activities the Bureau engages with districts, including early notification, training, onsite visit and follow-up regarding corrective actions.
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	The NHDOE outlines the current student selection process in the 2015-16 CIM Process Manual, page 9-10. The current student selection process is designed to produce a representative list covering gender, grade, disability, and special education manager.
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	The CIM 2015-16 Sample Timeline illustrates the timelines of the monitoring activities the Bureau engages with districts, including desk audit activities that are required to occur prior to the onsite visit.

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

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	The Introduction to the State Performance Plan/Annual Performance Report illustrates the NHDOE's implementation of a general supervision system that employs onsite visits, file reviews, desk audits, policy and procedures review.
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	The NHDOE issues monitoring reports that contain description of what evidence is required for the correction of noncompliance.
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	The NHDOE issues monitoring reports that contain description of what evidence is required for the correction of noncompliance.
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	The NHDOE continues to review its monitoring processes. For example the NHDOE revised aspects of its monitoring process based on its initial implementation of the CIM in the 2015-16 school year as evidenced by changes in the documentation of processes in the <i>2015-16 CIM Process Manual</i> for the 2016-17 school year.
	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 onsite. 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	The NHDOE is solely responsible for implementing the current CIM process.
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	This recommendation is not applicable to the current monitoring system.

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

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	The NHDOE issues monitoring reports that contain description of what evidence is required for the correction of noncompliance.
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	The NHDOE provides "Recommendations to Address Problematic Practices that do not represent noncompliance" in its monitoring reports, when applicable.
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	The NHDOE issues monitoring reports that contain description of what evidence is required for the correction of noncompliance.
	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. 1. Clear expectations of the required actions and necessary documentation for demonstration of correction of noncompliance including: • <i>Identification by the district of possible root cause(s) of the noncompliance;</i>		

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

	<p>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.</p> <ul style="list-style-type: none"> Any enforcement actions taken as a result of the noncompliance. This may vary depending on the severity and frequency of the noncompliance. 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. 		
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 NHDOE is monitored by OSEP on this issue.	NHDOE has addressed this recommendation Completed	The NHDOE does not use and "Assurance Form" in its current CIM process.
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	The NHDOE issues monitoring reports that contain description of what evidence is required for the correction of noncompliance.
	<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. In addition, the NHDOE verified that the LEA was correctly</p>		

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

	<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. 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. Based on these reviews, the NHDOE was able to determine</p>		
	<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</p>		

Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation

	<p>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.</p> <p>For each finding, the NHDOE verified the correction of noncompliance, consistent with OSEP Memorandum 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, 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.</p> <p>(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</p>		
	<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</p>		
	<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. 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>		

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

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.			
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. 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 Completed</p>	<p>The NHDOE has a formal process for tracking and follow-up procedures for districts that have identified findings of non-compliance in need of correction as evidence by the 2015-16 CIM Process Manual.</p>
	<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. 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</p>		

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

	<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>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.</p>																						
	<table border="1"> <thead> <tr> <th data-bbox="305 1100 418 1331">FFY: Note: Findings are monitored based on correction in subsequent year</th> <th data-bbox="418 1100 537 1331">Number of Findings of Noncompliance Identified</th> <th data-bbox="537 1100 657 1331">Number of findings of noncompliance for which correction was verified no later than one year from identification</th> <th data-bbox="657 1100 776 1331">Percentage of Compliance</th> <th data-bbox="776 1100 894 1331">Number of Findings Subsequently verified as corrected (beyond one year from identification)</th> </tr> </thead> <tbody> <tr> <td data-bbox="305 1331 418 1367">FFY 09 APR Due 02/01/11</td> <td align="center" data-bbox="418 1331 537 1367">168</td> <td align="center" data-bbox="537 1331 657 1367">167</td> <td align="center" data-bbox="657 1331 776 1367">99.40%</td> <td align="center" data-bbox="776 1331 894 1367">1 of 1 100%</td> </tr> <tr> <td data-bbox="305 1367 418 1402">FFY 10 APR due 02/01/12</td> <td align="center" data-bbox="418 1367 537 1402">268</td> <td align="center" data-bbox="537 1367 657 1402">259</td> <td align="center" data-bbox="657 1367 776 1402">96.94%</td> <td align="center" data-bbox="776 1367 894 1402">9 of 9 100%</td> </tr> <tr> <td data-bbox="305 1402 418 1438">FFY 11 APR due 02/15/13</td> <td align="center" data-bbox="418 1402 537 1438">189</td> <td align="center" data-bbox="537 1402 657 1438">177</td> <td align="center" data-bbox="657 1402 776 1438">93.65%</td> <td align="center" data-bbox="776 1402 894 1438">11 of 12 92%</td> </tr> </tbody> </table>	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 02/01/11	168	167	99.40%	1 of 1 100%	FFY 10 APR due 02/01/12	268	259	96.94%	9 of 9 100%	FFY 11 APR due 02/15/13	189	177	93.65%	11 of 12 92%		
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**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

	<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> <p><input checked="" type="checkbox"/> meets the requirements and purposes of the IDEA;</p>		
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	<p>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</p>	<p>NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation Completed</p>	<p>The NHDOE has a formal process for tracking and follow-up procedures for districts that have identified findings of non-compliance in need of correction as evidence by the <i>2015-16 CIM Process Manual</i>.</p>
	<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.</p> <p>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).</p> <p>Reporting requirements specifying if periodic data reports are required or just one report to demonstrate that the noncompliance is corrected.</p>		

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

<i>D. Enforcement Actions</i>			
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	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	NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation Completed	The Bureau issues a letter of concern outlining interventions and sanctions, meets with the district's superintendent and director of special education, proposes and monitors a compliance agreement as reflected in the 2015-16 Sample Compliance Timeline. Information about interventions and sanctions is proposed as an addition to the next version of the CIM Process Manual.
	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)". 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. 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		

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

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"> o Recover funds. o Withhold any further payments to the district. o Refer the case to the Office of the Attorney General. o 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</p>	NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation Completed	When the Bureau identifies a district in need of substantial intervention, a letter of concern outlining interventions and sanctions is addressed to the district's superintendent and director of special education.
	<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>		
E. Annual LEA Determinations			
1. Use performance and compliance indicators from the State Performance Plan in making annual LEA determinations.			
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. 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. 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. State Performance Plan Indicator 10: The district does not have a disproportionate representation, by disability category, of racial and ethnic groups in specific disability</p>	NHDOE has addressed this recommendation Completed	The NHDOE uses a State Performance Plan results indicator (SPP Indicator 7) and compliance indicators (SPP Indicator 4B, 9, 10, 11, 12 and 15) as reflected in its Determinations Rubric available online on the NHDOE website. NOTE: SPP Indicator 15, Timely Correction of Noncompliance, no longer exists.

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

	<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</p>		
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	The NHDOE sought stakeholder input on its Determinations Rubric available online on the NHDOE website.
		<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>	

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

<i>F. Verifying Accuracy of LEA Data and Ensuring Effectiveness</i>			
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</p>	<p>NHDOE was implementing these recommendations prior to the DDE report; NHDOE has addressed this recommendation Completed</p>	<p>The NHDOE provides guidance, technical assistance and training in the submission of data through NHSEIS as evidenced by the resources available on their website.</p>
	<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. 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 Completed</p>	<p>The NHDOE provides guidance on the submission of educational environment data through NHSEIS as evidenced by the 2015 NHSEIS manual available on the NHDOE website.</p>

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

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.</p> <p>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>Completed</p>	<p>The Bureau coordinates with NHDOE EDEN contact to ensure the submission of timely and accurate 619 data.</p>
	<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>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>	<p>This recommendation is not applicable to the current monitoring system.</p>

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

	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	This recommendation is not applicable to the current monitoring system.
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	According to the <i>2015-16 CIM Process Manual</i> , the Bureau staff do a self-training on the self assessment compliance review resource prior to training districts/visiting directors. Prior to monitoring visits, the visiting directors are trained in the use of the self assessment by webinar.
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	According to the <i>2015-16 CIM Process Manual</i> , the Bureau staff do a self-training on the self assessment compliance review resource prior to training districts/visiting directors. Prior to monitoring visits, the visiting directors are trained in the use of the self assessment by webinar.
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	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. 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.	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. 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.	The recommendation is not applicable since the NHDOE is solely responsible for the implementation of the CIM process.

**Appendix D
Review and Verification of
2012 Data Driven Enterprises (DDE) Program Evaluation**

December 2012	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 statuses 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.	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	NHDOE reported a SSIP in its submission of FFY2013 Part B State Performance Plan (SPP)/Annual Performance Report (APR) in February 2015.
		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	At the time of the Pingora team's onsite visit in November 2015, the Bureau still faced the challenge of filling vacancies with its organizational chart and as a result continues to adjust their organizational chart to meet their responsibilities. Recent staff hires are part of the monitoring team implementing the 2015-16 CIM process. Stakeholders recognized the efforts of the Bureau and its taking sole responsibility for redesigning and implementing the new monitoring process with few resources. Stakeholders acknowledge that the Bureau is doing its best given the budgetary constraints; however, they still have high expectations for the implementation of the State's General Supervision system.
			At the present time, it is a challenge to determine staffing capacity of the Department to carry out the activities of RSA 186, because the Department is in the first year of implementing their monitoring system. Although they have completed the process of identifying districts, conducting onsite visits that resulted in findings of noncompliance, issued reports, they are at the beginning of verifying the first stages of correction and simultaneously preparing districts for the next round of monitoring. All of these monitoring related activities are layered upon the activities associated with annual processes related to the State Performance Plan (data collection and analysis), Annual Federal Data Reporting, Determinations, District Profiles, etc.
			Some of the Pingora Team's recommendations focus on gathering and analyzing data related to the monitoring process so the Department can assess their workload in relation to their monitoring responsibility.

APPENDIX E

RECOMMENDATIONS

The following is a compilation table of the recommendations that were provided in the report. This table is provided to assist the Bureau in organizing the recommendations for future implementation. The recommendations have been sorted into topical areas.

Communication | Informing the system or field

1	District Notification Process	2.2a Disseminate correspondence to all districts regarding the district's rating in the District Selection Process. By providing this information, school administrators may choose to participate in professional development opportunities or access technical assistance to address areas of identified concern.	p. 23
2	Self-Assessment Data Collection	2.5a Review the Self-Assessment Data Collection document and highlight "those requirements that are most closely related to improving educational results for children with disabilities." This action may help districts and stakeholders understand the connection between compliance and improved outcomes in the Bureau's monitoring system.	p. 25
3	Self-Assessment Data Collection	2.5c Share the results of the analysis of the aggregated findings from the Self-Assessment Data Collection with the state as well as the professional development offerings designed to address the findings of noncompliance.	p. 26
4	Self-Assessment Data Collection	2.5d Aggregate the "Recommendations" for analysis and possible dissemination to the state. The Bureau currently has posted on its website two guidance documents, "Noncompliant Practices" and "Problematic Practices" that could be updated with this information.	p. 26
5	Special Education Forms Review	2.7a Review the aggregated findings to determine if there is a pattern or trend to the noncompliance worth sharing with the districts through the dissemination of a guidance memo or professional development offerings.	p. 27
6	Policies Procedures and Effective Implementation	3.1a Provide information about how the Bureau implements RSA 186-C:5 III(d)(2) and (3) on its website under Special Education Compliance Monitoring. By increasing transparency in its processes, the Bureau may enhance all stakeholder's understanding of the Bureau's full monitoring responsibilities, in particular the public and private approved facilities serving students with disabilities.	p. 30
7	Monitoring of Students with Disabilities in Correctional Facilities	3.a Share information about a district's responsibilities related to IDEA for incarcerated students on the NHDOE website as well as the "Student Selection Process" in the CIM Process Manual.	p. 43

Data | Collection, Evaluation & Analysis

8	<p>SPP Indicator 1 Graduation</p> <p>SPP Indicator 2 Dropout</p>	<p>Disaggregate special education graduation and dropout rates longitudinally (e.g. three years) by district for analysis: This action will allow the State to identify which districts are exceeding the state target and those districts that are struggling to make progress toward the state target.</p> <p>The results of the Data Analysis should be used to inform and develop the Bureau’s technical assistance plan and target districts performing below state targets on specific indicators.</p> <p>The Bureau may want to access current guidance and resources for addressing issues related to improving graduation and dropout rates can be accessed from the National Technical Assistance Center on Transition (NTACT).</p>	p. 10
9	<p>SPP Indicator 5A-C LRE, 6-21</p> <p>SPP Indicator 6A-B Preschool LRE</p>	<p>Disaggregate special education placement data (Indicator 5A-C/6A-B) longitudinally (e.g. three years) by district for analysis: This action will allow the State to identify which districts are exceeding the state target and those districts that are struggling to make progress toward the state target.</p> <p>The results of the Data Analysis should be used to inform and develop the Bureau’s technical assistance plan and target districts performing below state targets on specific indicators. For additional in depth insight on Indicator 5A-C/6A-B, the Bureau may choose to consult OSEP’s 2015 PART B SPP/APR Indicator Analysis Booklet.</p>	p. 12
10	SPP Indicator 11 Child Find	<p>Conduct a three-year analysis of Indicator 11 data to determine if there are any patterns or trends in the reporting of compliance and noncompliance, and provide trend analysis to districts regardless of their compliance status.</p>	p. 15
11	SPP Indicator 13 Secondary Transition	<p>Review the findings of noncompliance in the first and second years of Indicator 13 data collections to determine what changes, if any, need to be made to the Measurable Annual Goals training.</p>	p.17
12	Student Selection Process	<p>2.4.a Maintain aggregate data on the total number of files reviewed by item to compare year to year in order to determine whether the student sampling process yields sufficient documentation available for the onsite review team to make findings of noncompliance and determine the appropriate corrective action.</p>	p. 24
13	Self-Assessment Data Collection	<p>2.5b Aggregate the findings from the Self-Assessment Data Collections from all on-site visits to identify areas of concern which can be addressed through technical assistance and professional development. This data can be compared longitudinally to determine if patterns or trends exist and used to design targeted technical assistance.</p>	p. 26
14	Policies, Procedures and Practices Review	<p>2.6a Aggregate the findings of noncompliance and compare the number of findings from year to year to determine whether the amount of time allocated to this activity is worth expending as it is currently being implemented.</p>	p. 26

Data | Collection, Evaluation & Analysis

15	Special Education Forms Review	2.7b Aggregate the findings of noncompliance and compare the number of findings from year to year to determine whether the amount of time allocated to this activity is worth expending as it is currently being implemented.	p. 27
16	Personnel Review	2.8a Aggregate the findings of noncompliance and compare the number of findings from year to year to determine whether the amount of time allocated to this activity is worth expending as it is currently being implemented.	p. 28
17	Identification and Correction of Findings of Noncompliance	2.9a Aggregate the findings from the Self-Assessment Data Collections from all on-site visits to track the correction over time by Section/Item to determine which Sections/Items are problematic to address. This data can be compared longitudinally to determine if patterns or trends exist and used to design targeted technical assistance to address timely correction.	p. 29

Process | Policy and Procedure changes

18	District Selection Process	2.1a Regarding the policy of removing districts from consideration of future monitoring for five years, the Bureau should consider how a district re-enters the monitoring system after it has been engaged in an onsite visit and timely correction of noncompliance has occurred within the one year timeline.	p. 23
19	District Selection Process	2.1b Study the feasibility of including findings of noncompliance from Due Process Hearings in the District Selection Rubric.	p. 23
20	Special Education Forms Review	2.7c Gather stakeholder input on the development of model forms (beyond the Bureau developed Written Prior Notice model forms).	p. 27
21	Identification and Correction of Findings of Noncompliance	2.9b Develop a database to track the correction of all findings of noncompliance from the SPP Indicators (4B, 9, 10, 11, 12, 13), onsite monitoring, and dispute resolution processes (Complaints and Due Process Hearings). Having the findings of noncompliance all in one place would better ensure the tracking the findings to correction within timelines and allow real time analysis of noncompliance data.	p. 29
22	Effective Dispute Resolution	7.1a Review OSEP Guidance on procedures for reconsideration of Bureau complaint decisions and determine if the Bureau wishes to continue to offer reconsideration.	p. 39
23	Effective Dispute Resolution	7.1c Review the internal intake process of the complaint system currently utilized to ensure that each complaint that meets the requirements outlined in 34 C.F.R. §300.153 is investigated, unless resolved or withdrawn.	p. 39

Process | Policy and Procedure changes

24	Effective Dispute Resolution	7.1d Review the voluntary corrective action (VCA) process to ensure that it meets the minimum state complaint procedures outline in 34 C.F.R. §300.152(a)(3), and ensuring that the Bureau issues a final decision consistent with 34 C.F.R. §300.152(a)(5).	p. 39
25	Monitoring Review for Approval of Private Provider Special Education Programs	4.a Gather feedback from Private Providers on establishing a different cycle of monitoring (not one based on number of recent findings) and incorporating the review of student outcomes data in the monitoring process the next time a stakeholder meeting is convened to improve the monitoring process	p. 44
26	New Special Education Instructional Program Application	5.a Present quantitative and qualitative data to the legislature in support of removing this requirement as it poses an unnecessary barrier to the provision of FAPE in the LRE and potential legal liability to a district or the NHDOE.	p. 45

Technical Assistance | Training and Capacity

27	SPP Indicator 4AB Suspension/Expulsion	Offer “those activities that support the trend for low suspensions/expulsions” and “technical assistance and support in the area of positive behavioral supports” to all districts, not just to those districts identified for possible significant discrepancy with suspension /expulsion rates for students with disabilities.	p. 12
28	Technical Assistance (TA) and Professional Development	5.1a Use online survey evaluations after trainings have been delivered and follow up evaluations to participants to determine if they are (1) still using knowledge and skills acquired at the training (if so, how are they using them); (2) implementing practices shared at the training; (3) accessing or using resources offered at the training; and (4) experiencing difficulty or success in implementing practices shared at the training. The follow-up evaluation information, when aligned to the purpose and desired results of the training, should provide the Bureau with a measure of the effectiveness and value of the training.	p. 34
29	Technical Assistance (TA) and Professional Development	5.1b Develop internal capacity and content expertise to address professional development and technical assistance needs resulting from monitoring findings and trends. NOTE: This recommendation may require the Bureau to consider adding professional personnel at the level of an educational consultant with the requisite knowledge and skill to support the delivery of technical assistance and development of professional development.	p. 34
30	Effective Dispute Resolution	7.1b Ensure ongoing training for complaint investigators to increase consistency in the complaint investigation process.	p. 39