

Timeline for Indicator 13 Initial Monitoring Process

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By Sept 12 th	The Bureau will pull a state report from NHSEIS of Indicator 13 eligible students.				
By Sept 12 th	For LEAs not using NHSEIS, the Bureau will schedule a virtual desk audit via a Zoom meeting for early November.				
Sept 12 th – Sept 30th	The Bureau will develop each LEA's Indicator 13 Student SASID List of files for the initial monitoring. The number of files to be reviewed for each LEA will be based on the calculation table shown on the right.	LEAs # of Eligible Indicator 13 Students	# of Files to be Reviewed during Initial Monitoring		
	Files will be randomly selected and representative of the special education population (to include demographics such as, age, gender, disability, case manager, high school, placements – to include charter schools, out-of-district and out-of-state).	1 - 9 10 - 19 20 - 39 40 - 59 60 - 79 80 - 99	1 2 4 6 8 10		
	Each LEA's Indicator 13 Student SASID List will include an additional 2-5 students, when possible, to afford an LEA the ability to select an alternative student if a selected student has moved or exited special education between the student selection period and initial monitoring.	100 - 149 150 - 199 200 - 299 300 - 399 400 - 499 500 - 599+	12 17 22 32 40 50		
By Sept 30 th	The Bureau will email each LEA's Special Education Director their Indicator 13 Student SASID List, Monitoring letter, and Indicator 13 Monitoring Checklist.				
Oct 1st – Oct 31st	LEA's will review and prepare their Indicator 13 selected student files for the initial compliance monitoring using the Indicator 13 Checklist. LEA's using NHSEIS, will need to paperclip/attach required Indicator 13 evidence (items not viewable in the IEP) to the current NHSEIS IEP for each student selected, including the alternate students. LEA's not using NHSEIS, will use this time to prepare IEPs and gather any required Indicator 13 evidence for selected students to screen share during the scheduled virtual desk audit conducted via a Zoom meeting in November.				
Early Nov	For LEA's not using NHSEIS, the Bureau will conduct the review of selected student files during the scheduled virtual desk audit via a Zoom meeting using the Indicator 13 Monitoring Checklist.				
Nov 1 st – Dec 31st	For LEA's using NHSEIS, the Bureau will conduct desk audits of selected student files in NHSEIS using the Indicator 13 Monitoring Checklist.				



The Bureau will email each LEA's Special Education Director their Indicator 13 Compliance Letter and completed Indicator 13 Matrix for each selected student SASID monitored.

By Jan 31st

The Indicator 13 Compliance letter outlines the LEA's compliance level and, if there are findings of noncompliance, the required next steps for child specific corrections and Prong 2 monitoring. The Indicator 13 Matrix for each student SASID number identifies compliance or noncompliance for each of the seven Indicator 13 Monitoring Checklist items and provides detailed notes for why any item was found noncompliant.

Each LEA's Indicator 13 compliance percentage from the Indicator 13 Initial Monitoring (conducted in November-December) will be reported on the IPlatform IDEA Reports and included in the LEA Determinations Rubric.

LEA's receiving an Indicator 13 100% Compliance Letter – Congratulations! You are done with the Indicator 13 Process for this year.

LEA's receiving an Indicator 13 Compliance Findings Letter – please see next steps below.



Timeline for Indicator 13 Compliance Findings (Child Specific Corrections and Prong 2 Monitoring)

By Jan 31st

LEA's receiving an Indicator 13 Compliance Finding Letter: the letter outlines the LEA's compliance level, specific findings of noncompliance, required next steps for child specific corrections, Prong 1 Corrective Action documentation, and Prong 2 monitoring. The Indicator 13 Matrix for each student SASID number identifies compliance or noncompliance for each of the seven Indicator 13 Monitoring Checklist items and provides detailed notes for why any item was found noncompliant.

Correction of Child Specific Findings:

LEAs should review their Initial Indicator 13 Compliance Findings Letter and Indicator 13 Matrix for each SASID for accuracy. Please contact the Bureau by February 14th to have any discrepancy reviewed.

Child specific corrections are required and will be outlined in the LEA's Indicator 13 Compliance Letter and Indicator 13 Matrixes.

The following Indicator 13 Compliance Checklist items are considered child specific and require corrections if found noncompliant:

- #1 Post-Secondary Goals
- **#3** Transition Services
- #4 Course of Study
- #5 Annual Goal Related to Transition Service Needs

An IEP amendment (or new annual IEP if up for renewal) will be required to correct any child specific findings of noncompliance identified during the initial monitoring. Corrections must be made by April 3rd and are identified in red on the Indicator 13 Compliance Matrix. (Per the Indicator 13 Guidance Document, LEA's have 60 days to correct child Specific findings). Please share Indicator 13 Matrixes with case managers as they contain detailed information about what Indicator 13 component was noncompliant and what is required for correction.

If a student with child specific corrections has exited special education and/or the LEA, the LEA will need to contact the Bureau as corrections cannot be made since the student is no longer their responsibility.

April 3rd

Prong 1 Corrective Action Required: LEAs with findings of noncompliance will need to submit documentation that the matrixes for SASIDs with noncompliance were reviewed with appropriate staff and/or training was provided for areas of noncompliance. Documentation of when such training occurred and a list of staff who participated must be submitted to the Bureau within 60 days from the notification of findings.

The Bureau will conduct NHSEIS desk audits to verify the LEA's child specific corrections for each student file with child specific findings, as identified on the Indicator 13 Matrixes.

For LEAs not using NHSEIS, the Bureau will schedule and conduct virtual desk audits via Zoom meetings.

Indicator 13 Matrixes will be used to review and document LEAs child specific corrections.

- If all child specific findings for an LEA are verified corrected the Bureau will send a letter confirming correction.
- If all child specific findings for an LEA are not verified corrected the Bureau will send an email with attached Matrixes identifying IEP amendments still required for correction. The Bureau will continue to conduct desk audits until all child specific findings are verified corrected.

Feb 1st – Apr 3rd

Starting Apr 4th



Prong 2 Monitoring:

Monitoring of new district selected student files for only those Indicator 13 Checklist items found noncompliant (Child Specific Findings and/or Systemic Findings) during the initial monitoring

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By Mar 16 th	Each LEA that received an Indicator 13 Compliance					
	Finding Letter will be emailed an Indicator 13					
	Prong 2 SASID selection form and instructions.	Percentage of Compliance per	# of Files ot be Reviewed per			
		District after the Initial Monitoring	District Based on the Percentage of Initial			
	LEAs will select the files for Prong 2 monitoring	Widintornig	Compliance*			
	and submit them to the Bureau on the Prong 2					
	SASID selection form.	100%	0			
		67% - 99% 34% - 66%	2			
	The number of student files to be reviewed for	0% - 33%	3			
	Prong 2 monitoring is determined by an LEA's	* A district will never be asked to	o review more files than what			
	compliance percentage reported in the Indicator	was reviewed during the initial monitoring				
	13 Findings Letter and outlined in the chart on the					
	right.					
h- th	LEAs review Prong 2 district selected SASID files in NHSEIS to make sure Checklist items being reviewed are					
Mar 16 ^{th –} April 14th	compliant for Prong 2 monitoring and paperclip or attach any required evidence.					
ar	LEAs that do not use NHSEIS review and prepare IEPs and any required evidence to be screen shared during a					
ΣĄ						
	scheduled virtual desk audit for Prong 2 monitoring.					
pr h						
By Apr 14 th	d SASID List Form					
á						
	The Bureau will conduct NHSEIS desk audits to review Indicator 13 Prong 2 for each student file on the LEA's					
pr	submitted Indicator 13 Prong 2 selected SASID List form.					
A P						
Starting Apr 28th	For LEAs that do not use NHSEIS, the Bureau will schedule and conduct desk audits via Zoom meetings.					
tar						
S	The Bureau will use an Indicator 13 Prong 2 Matrix for the Prong 2 to review only the Indicator 13 Compliance					
	areas where the district had findings from the Initial Indicator 13 Monitoring.					
	Prong 2 Follow-up:					
_	 If all Prong 2 areas for an LEA's Prong 2 files are verified compliant – the Bureau will send a letter 					
Oth	confirming 100% compliance and the LEA will be done with this year's Indicator 13 Monitoring Process.					
n 3	 If there are child specific findings of noncompliance – the Bureau will send a Prong 2 Compliance 					
– Jan 30th	Findings letter outlining the timeline for the correction of the Prong 2 child specific findings.					
 £	The Bureau will conduct a desk audit (or virtual meetings via Zoom for LEAs not using NHSEIS) 60 days					
29	from the date of the notification letter to verify correction of the Prong 2 child specific findings. Chaspecific findings must be verified corrected before moving to the 2 nd round of Prong 2 monitoring.					
April 29 th						
Αρ	• The Prong 2 process is repeated, with the LEAs selecting new student files, and only those a					
		and only those areas where				
	there are continued findings of noncomplian					
LEAs h	LEAs have one year from the Indicator 13 Initial Monitoring findings letter to correct all findings of noncompliance and					

LEAs have one year from the Indicator 13 Initial Monitoring findings letter to correct all findings of noncompliance and demonstrate 100% compliance with Indicator 13 Prong 2 (verification of implementation of regulations for transition planning). If this is not met within the one year, then an LEA will need to complete a Corrective Action Plan to identify the root causes(s), such as practices, procedures, and policies, leading to the findings of noncompliance.

If an LEA does not correct identified noncompliance in a timely manner (within one year from identification), the state will take enforcement actions (such as the redirection of federal IDEA funds).