Exceptional Student Services

Programmatic Monitoring Manual

School Year 2023–2024

Technical Assistance Manual
August 2023

ARIZONA DEPARTMENT OF EDUCATION

Contents

Introduction

States have a responsibility under federal law to have a system of general supervision. The main purpose of the system is to monitor the implementation of the Individuals with Disabilities Education Act (IDEA). The U.S. Department of Education's Office of Special Education Programs (OSEP) has identified several components related to general supervision: Policies, Procedures, and Implementation (compliance); State Systemic Improvement Plan (SSIP); Outcomes for Results-Driven Accountability (RDA); Fiscal Management; and Targeted Technical Assistance (TA) and Professional Development (PD).

In order for the State to have an effective system of general supervision, that system must support practices that improve educational results by using multiple methods to identify and correct noncompliance and by encouraging and supporting improvement while enforcing compliance. The Arizona Department of Education, Exceptional Student Services (ADE/ESS), views effectiveness as correctly implementing the specific regulatory requirements of the statutes and ensuring quality learning and life outcomes for students.

Targeted technical assistance and professional development are ongoing activities and are a major part of the ADE/ESS general supervision system. Technical assistance is designed to link directly to indicators in the State Performance Plan/Annual Performance Report (SPP/APR), to improve outcomes for students, and to improve the level of procedural compliance in Arizona public education agencies (PEAs). Throughout the six-year monitoring cycle, PEAs can access and request targeted technical assistance in order to improve compliance systems and student outcomes. Technical assistance ranges from on-site staff training to webinars and statewide conferences. Technical assistance documents are also available online or through the Program Support and Monitoring (PSM) specialist assigned to each PEA.

General Supervision—The ADE/ESS general supervision system is based upon requirements from OSEP. The components of this system are aligned to the Part B SPP/APR Related Requirements. The Related Requirements document includes a list of monitoring priorities and indicators and the requirements from the statutes and regulations related to each priority and indicator.

The programmatic general supervision system is structured around technical assistance and programmatic monitoring activities that occur over a six-year period, as follows:

Activity	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Provide Technical Assistance	√	√	√	√	√	√
Review PEA Data	√	√	√	√	√	√
Annual Site Visit (Review for TA purposes and Indicator data collection)	√	√	√		√	√
Review PEA Policies and Procedures	√			√		
PEA Collects Student Exit Form Data	√	√	√	√	√	√
PEA Collects Post School Outcomes	√	√	√	√	√	√
PEA Completes Indicator 8 Parent Survey	√	√	√	√	√	√
Prepare for Monitoring			√			
Conduct Monitoring Activities				√		
Complete Corrective Action (if required and which includes individual correction of noncompliance and systemic correction through subsequent file review)					√	
State Systemic Improvement Plan (if targeted)				√	√	√

ADE/ESS uses methods and procedures to implement the programmatic monitoring system that are consistent, but flexible, in order to adapt to the varying needs of children, educational settings, and administrative realities. A PEA's programmatic monitoring year may be adjusted, and programmatic monitoring activities assigned anytime data indicates broad issues across systems. Specific components for each programmatic monitoring activity are detailed in this document.

ESS Programmatic Monitoring Model

IDEA §§300.149, A.A.C. §7-2-401, OSEP Guidance 23-01

The programmatic monitoring system combines compliance and results in the review of PEA policies, procedures, and practices. Components of the six-year programmatic monitoring cycle include a yearly review of OSEP's compliance and results Indicators 1–17. Student file data is reviewed for every PEA each year, capacity permitting.

The Program Support and Monitoring (PSM) specialist assigned to the school district or charter school will meet with the PEA director in the spring of PEA programmatic monitoring cycle year 3 to discuss the PEA data and to plan for the upcoming programmatic monitoring activities. This data is explained in the Risk Analysis source tool.

Arizona has a six-year cycle for programmatic monitoring with assigned programmatic monitoring activities always occurring in Year 4 of the cycle. However, ESS can adjust a PEA's programmatic monitoring year any time that systemic concerns arise, including when there is evidence that a certificated special education teacher is not employed by the PEA. Conversely, PEAs that maintain exceptional data may have less intensive programmatic monitoring activities assigned because the data indicates that they are meeting state targets. Regardless of the assigned programmatic monitoring year or programmatic monitoring type, PEAs are required to comply with all requirements under IDEA.

There are three programmatic monitoring types: Data Review, Self-Assessment and On-site. For each monitoring type, there are various activities assigned. For all programmatic monitoring types and their associated activities, the procedural requirements of IDEA have been tied to the SPP/APR compliance and results indicators shown in the list that follows. The possible areas of focus for student outcome analysis (Results-driven accountability [RDA]) are shown below:

Graduation	Least Restrictive Environment (LRE)
Dropout	Suspension/Expulsion
Reading Proficiency	Child Find—Initial Evaluation Timeline
Math Proficiency	Early Childhood Transition (In by 3)
Disproportionality	Secondary Transition

For all assigned programmatic monitoring types, ongoing technical assistance plays a significant role in the general supervision of PEAs in Arizona. PSM specialists conduct annual visits with each assigned PEA to review a sample of the PEA's student files, including data related to Indicators 11 (Child Find), 12 (Part C to Part B Transition), and 13 (Secondary Transition). When a PEA is not achieving 100% compliance on these three indicators, specialists give feedback and technical assistance. Program specialists also provide ongoing technical assistance related to any other issues and questions that may arise. Targeted training is provided when files and data indicate a need.

Data Review—determined by a score of more than one standard deviation above the state average on the risk analysis tool; it is assigned to PEAs whose data consistently reflects outstanding student outcomes and practices that support ongoing compliance with federal and state laws, including procedural compliance. ESS believes that such programs show compliance sustainability. Such PEAs will be required to review Indicators 11 (Child Find—initial evaluation timeline), 12 (Part C to Part B transition—Preschool transition), and 13 (Secondary Transition) as part of the collection of APR data.

Self-Assessment—determined by a score falling between one half a standard deviation below the state average and one standard deviation above the state average on the risk analysis tool; it is assigned when a PEA shows evidence of strong programs but has inconsistency in a few areas in which data does not meet the state target. The self-assessment provides an opportunity for the PEA to analyze issues in depth and to find solutions for improvement and sustainability. The targeted review of student files will include examination of indicators 11, 12 and 13. PEAs participating in this type of monitoring will be targeted for participation in SSIP activities if they meet all the following criteria: (1) they service students in grade 3, (2) they do not meet the state target for students with disabilities in English Language Arts (ELA) proficiency in grade 3, and (3) they have a special education enrollment in grade 3 of ten or more students.

If SSIP criteria do not apply, then PEAs will choose an area to focus on in which they may not be meeting a state target. The PEA will complete activities that will result in the development of an action plan.

On-Site—determined by a score of more than one half a standard deviation below the state average on the risk analysis tool; it is assigned when a PEA shows evidence of broad issues across systems and/or outcomes. On-site monitoring includes a thorough review of procedural requirements as well as a review of student performance data. PEAs participating in this type of programmatic monitoring, in conjunction with their PSM specialist, will choose an outcome focus area in which they do not meet a state target to complete an analysis and action plan.

Procedural compliance is only one element involved in improving positive outcomes for students; improved student performance is the ultimate goal. Therefore, a PEA participating in an on-site monitoring is required to determine root causes of poor student performance, as measured by the SPP/APR results indicators. Each outcome focus area analysis (RDA) is driven by (but not restricted to) the ESS-provided analysis tool.

Arizona has found it beneficial to include PEA staff as active partners with ADE/ESS staff when examining PEA data and especially when examining all components of the on-site monitoring. The PEA and PSM team work together during the on-site monitoring. **The PEA *must* have an agency team, including PEA employee(s), as active participants.** Additionally, to ensure accuracy of compliance calls and determination of trend data, the on-site monitoring **cannot** be completed via electronic file review utilizing a PEA software system**.**

ESS Fiscal Support for Programmatic Monitoring

IDEA §§300.149, *A.A.C. §7-2-401*, *OSEP Guidance 23-01*

Limited fiscal support for programmatic monitoring activities will be made available for PEAs in self-assessment and on-site monitoring. Support will be provided through individually developed contracts between the PEA and ADE. **A PEA must complete the contract and have it approved *prior* to the monitoring start date. Contracts that are not approved by the monitoring start date may not be funded.**

Maximum Contract Amount by Monitoring Type

Special Education Student Count	On-Site	Self-Assessment
1,000 or more	$2,000	$1,500
501–999	$1,500	$1,500
500 and fewer	$1,000	$1,000

Programmatic Monitoring Incentives

Programmatic monitoring incentives are earned when a PEA successfully completes the data review or self-assessment monitoring.

Year 4—Data Review or Self-Assessment

Status	Outcome
Data Review—100% compliance on Indicators 11 and 13	Two entries into a lottery for a paid registration to Arizona's IDEA Conference
Self-Assessment—Successful and timely completion of performance tasks with all supporting documentation demonstrating compliance	One entry into a lottery for a paid registration to Arizona's IDEA Conference

Year 5—Corrective Action Plan Closeout

Status	Outcome
Closed within one year	Congratulatory letter and certificate
Not closed within one year	Enforcement actions until compliance is achieved which may include assignment of a special monitor

Programmatic Monitoring Enforcement Actions

IDEA §§300.149, A.A.C. §7-2-401, OSEP Guidance 23-01

If a PEA is unable to complete the Corrective Action Plan (CAP), which includes correction of all identified noncompliance and evidence of systemic correction through subsequent file reviews, within a year after the date of the Written Notification of Findings letter, one or more of the following enforcement actions may be taken, based upon the severity of the remaining noncompliance:
 ➤ ESS development of a prescribed CAP with required activities and timelines to address the continuing noncompliance
 ➤ Enforcement of CAP activities as outlined in the current agency CAP
 ➤ Review and revision of the current CAP to develop targeted activities that address the continuing noncompliance
 ➤ Special monitor assigned to PEA to assist in developing systems
 ➤ Interruption of IDEA payments until adequate compliance is achieved. For charter schools not receiving IDEA funds, a request for withholding of 10% of state funds.
 ➤ For charter schools, a request to the appropriate board for a notice of intent to revoke the charter
 ➤ With Arizona State Board of Education approval, interruption of Group B weighted state aid or redirection of funds, pursuant to 34 C.F.R §300.227(a)
 ➤ Request to the attorney general for assistance in law enforcement

*PEAs are entitled to request a hearing if they wish to challenge the withholding of funds.

Calls, Findings, and Corrective Action Plans

A **"call"** related to a PEA's compliance status is made for every line item in the programmatic monitoring. Line items are those programmatic monitoring items included on all forms (student forms, worksheets, agency forms, and interviews) associated with the programmatic monitoring activities. Each line item is composed of multiple components. Any one component within a line item that is found to be noncompliant generates a call of noncompliance for that line item. If multiple components within the line item are found to be noncompliant, a single **finding** for that line item will be generated (i.e., the line item will be found noncompliant), as opposed to a finding being generated for each single component.

At the conclusion of all programmatic monitoring activities, teams review data that is compiled into a report called the draft Summary of Findings (SOF). There are 18 possible "findings" in the ADE/ESS programmatic monitoring process. A **finding** occurs when a PEA is found to be less than 100% compliant for any line item. The formal notification of findings resulting from the programmatic monitoring (which starts the one-year corrective-action timeline) is done in the form of a letter emailed no later than 30 days following the completion of all monitoring activities. The citation related to the area of noncompliance, along with a description of the qualitative and/or quantitative data, is included in the notification.

A **Corrective Action Plan** (CAP) is developed by the PEA with guidance from the ESS team to address the correction of findings of noncompliance. The development of a CAP, which includes activities for improvement, is required for all line items that are less than 90% compliant. For those line items that are 90–99% compliant, corrective action activities are not required; however, individual student-specific files involved require correction, and subsequent file reviews will occur during the corrective action year to ensure that 100% compliance and sustainability have been achieved for all items that were noncompliant (OSEP Differentiated Monitoring Support 2.0 (DMS)).

Corrective action is not complete and the monitoring cannot be closed until all findings are verified as corrected in accordance with the OSEP 09-02 Memo. The following are required:
- the correction of all individual instances of noncompliance, including student-specific noncompliance
- verification that the PEA is correctly implementing the specific regulatory requirements. This will be based on the review of updated data, specifically subsequent file reviews

While the correction of noncompliance is a requirement of programmatic monitoring, an additional area of focus for ADE/ESS centers on program improvement. Throughout the monitoring activities, PEAs are expected to examine their processes and systems in order to focus on improving programs while also correcting instances of noncompliance. This examination by PEAs is subject to validation and verification by ADE/ESS.

Instructions for Corrective Action Close-Out

IDEA §§300.149, A.A.C. §7-2-401, OSEP Guidance 23-01

All line items found to be noncompliant at the conclusion of programmatic monitoring require correction. Line items that are considered to be FAPE-prohibitive (indicated as 60-day on the student form) require that a PEA correct the student file within **60 calendar days** of the Written Notification of Findings letter.

The Individual Report of Noncompliance (IRON) will be generated for all student-specific items found to be noncompliant at the conclusion of the programmatic monitoring. A PEA will develop a CAP, with CAP activities, for all line items that are less than 90% compliant. A PEA also is required to show compliance and sustainability for all items that are between 90–99% compliant at the conclusion of the monitoring, even though a specific corrective action plan is not required. The ADE/ESS specialist reviews student-specific and subsequent files during the corrective action year for evidence of 100% compliance and sustainability.

A PEA must correct all noncompliance as soon as possible but no later than one calendar year from the date of the Written Notification of Findings letter. For noncompliant items involving timelines that cannot be corrected, the PEA must still complete the required action (e.g., evaluation) even though it is late. PSM specialists will review subsequent files for compliance and to ensure a PEA's understanding of the issues.

A PEA designates activities to complete in order to implement systems ensuring compliance. These CAP activities will be monitored and verified through the corrective action year. Completion of activities and verification of activities is required to close out the corrective action. The PEA and the assigned PSM specialist will work together to verify these activities.

The ESS program specialist and PEA special education director, or designee, schedule a minimum of three programmatic monitoring follow-up verification visits or desk audits to review documentation, provide technical assistance, and update the compliance status during the year of the CAP. At least one visit will focus on 60-day corrective action items, if applicable. Additional visits will be scheduled as needed, based on the PEA's level of progress toward CAP completion.

- ➢ The PEA must ensure that all items found to be out of compliance during the monitoring are brought into compliance. **This includes all items that were less than 100% compliant.**
- ➢ CAP follow-ups will include:
    - o review the correction of student-specific items from the monitoring.
    - o verify completion of PEA-developed CAP activities outlined in the PEA's CAP.
    - o review a representative sample of subsequent files to ensure that there has been systemic change and sustainability in compliant practices.
- ➢ The programmatic monitoring will be closed once a PEA has evidenced compliance and sustainability related to all findings (**student-specific and systemic**) that were less than 100% compliant during the monitoring.

Data Review Programmatic Monitoring

PEAs are expected to conduct genuine, thorough reviews of documentation and to provide evidence of the correction of self-identified noncompliance. The focus of the reviews will be Child Find (Indicators 11 & 12) and Secondary Transition (Indicator 13), as applicable.

➢ The Data Review monitoring is assigned when the PEA Risk Analysis Tool comprehensive score is more than one standard deviation above the state average.
  o [Required forms](#) can be located online.
  o PSM Specialist can be contacted for required forms and additional guidance as needed.
  o The Data Review timeline begins on **August 7, 2023**.
➢ No later than **September 15, 2023**, the PEA to be monitored will select student files to be reviewed that are a representative sample of the district/charter. The PEA will submit the Student Sample List to the PSM specialist.
➢ It is highly recommended that PEAs select files that are reflective of the current systems that are in place.
➢ No later than **September 22, 2023,** the PSM specialists will review the DRM-3 to verify that it reflects a representative sample.
➢ The PEA will conduct student file reviews using the Data Review student file form provided by the PSM specialist.
➢ Throughout the programmatic monitoring process, the PEA will consult with the PSM specialist on using the Guide Steps to ensure that accurate calls are made on the student forms.
➢ The PEA will submit the completed Data Review student file forms and the Child Find and In-by-3 Worksheets to the PSM specialist no later than **December 1, 2023**.
➢ Information on the student forms must be specific enough to determine the reasons for each "**out**" call on the line item of the Data Review student forms. Note that each individual instance of PEA-identified noncompliance will require evidence of correction before the monitoring process is complete. The evidence of correction must be submitted with the final submission, on or before March 29, 2024.
➢ No later than December 8, 2023, the PSM specialist will request:
  o copies of a representative sample of student files with enough information provided to validate the PEA's calls were made in accordance with the current school year Guide Steps
  o a sample of supporting documentation to validate calls made on the Child Find and In-by-3 worksheets.
  o documentation to support components on the Agency Form including: local school board-approved policies and procedures, evidence of child find procedures presented to parents, PEA invitation list and agenda for private/home schooled students (districts only), evidence of referral system for birth to 2 years 9 months, evidence of referral system for 2 years 10 months to 5 (charters only)
➢ The PEA will **submit** all of the requested documentation by **January 12, 2024**.
➢ The PSM specialist will complete a sample validation of the compliance calls and provide feedback on the accuracy of calls made by the PEA no later than **February 9, 2024**.
➢ Validation will result in one of the following: In Compliance, Individual Level of Correction (ILC), or Systemic Level of Correction (SLC).
  o In Compliance—all line items are 100% compliant. No further action is required. Monitoring is closed.
  o Individual Level of Correction (ILC)—all line items are 90% compliant or better. The PEA will submit individual student corrections. Subsequent PEA self-review of files is not required.
  o Systemic Level of Correction (SLC)—results include line items that are less than 90% compliant. The PEA will be required to correct all individual instances of noncompliance. Subsequent files must be reviewed by the PEA.

- ➢ **When the PEA falls into SLC,** the PSM specialist and the PEA will consider the following factors in determining the necessary subsequent documentation to be reviewed: the pervasiveness of the noncompliance from the initial review (noncompliance related to each section) and whether noncompliance was extensive (noncompliance related to student files); they will also consider the frequency of out-of-compliance items that affect FAPE (which are shown on the student form as 60-day items). **Note: compliance must be demonstrated in subsequent documentation in order to finalize and complete the monitoring.**
- ➢ The PEA will submit the final documentation, including subsequent documentation (SLC only) and corrected noncompliance (ILC and SLC), **on or before March 29, 2024**.
- ➢ The PSM specialist will request a sample for verification no later than **April 5, 2024**.
- ➢ The PEA will submit requested student documentation no later than **April 12, 2024**.
- ➢ The PSM specialist will verify the correction of all individual instances of noncompliance from the initial review (ILC and SLC) and verify compliance in subsequent documentation (SLC only) by **April 26, 2024**.
- ➢ If there is no evidence of noncompliance by **May 10, 2024**, ESS will issue a successful completion letter to the PEA.
  If there is evidence of noncompliance, ESS will issue a written notification of findings (WNOF) to the PEA on or before **May 10, 2024**.
  - o The PSM specialist, in collaboration with the PEA, will discuss the Summary of Findings (SOF), determine strengths and concerns, and develop a draft corrective action plan (CAP) **prior to May 10, 2024.**
  - o The PEA and PSM specialist will finalize the PEA's CAP **within 30 calendar days**.
- ➢ Items that are considered detrimental to the PEA's ability to provide FAPE to students require that a PEA correct the student file within **60 calendar days** of the Written Notification of Findings letter; enforcement activities will apply if the timeline is not met.
- ➢ There is a one-year timeline for correction of all individual instances of noncompliance and completion of the CAP; enforcement activities will apply if the timeline is not met (OSEP 09-02 memo & DMS 2.0).

Data Review Required Forms

Agency Form—Required for all PEAs in monitoring. Reviews policies and procedures as well as child find processes.

Child Find Worksheet—Required for all PEAs in monitoring. Reviews 45-day screening process of the PEA.

In by 3 Worksheet—Required for all PEAs in monitoring. Reviews the In-by-3 process of the PEA.

Data Review Student Form—Specifically created form for file review.

Data Review Tracking Form—Specifically created multipurpose document to be used by specialists as a communication tool throughout the Data Review process. The PEA and the PSM specialist will use this tool to track and document progress.

Student Sample List and Monitoring Sample Matrix—Specifically created forms used to establish the number of files to be reviewed during the Data Review process; using these two forms will also assist the PEA in ensuring that a representative sample of student files is selected.

Data Review Monitoring File Sample Selection

Number of students in special education	10 or Fewer	11–100	101–250	251–500	501 or more
Number of eligible student files	All	11+	20+	30+	40+
Initial evaluations of students found not eligible **(for line item II.A.5 only)**	2	2	5	8	12+

Note: Total files reviewed (where there is a +) will increase based on number of eligible students/representative sample

Select a representative sample of files based upon your student population. **This sample should include the following specific kinds of files, as applicable:**
- Each school-site
- Initial evaluations
- All disability categories
- All service delivery models within the PEA
- English learners (ELs)
- Students who are 16 years of age or older (Indicator 13)
- Students in dropout recovery programs
- Out-of-district placements (private day school and residential placement)
- Students phased out of special education services
- Students who have been suspended, have been expelled, or have moved to an IAES for longer than 10 days
- Students initially evaluated and found not eligible (Indicator 11)
- Preschool students

Self-Assessment Programmatic Monitoring

PEAs are expected to conduct genuine, thorough reviews of documentation and to provide evidence of the correction of self-identified noncompliance.

➢ In Year 3 (the preparatory year), the PSM specialist and PEA director will review the PEA Risk Analysis Tool When the data indicates, the PEA will conduct a Self-Assessment programmatic monitoring in Year 4.

➢ Each outcome focus area has specific required forms. Required forms can be located online.

➢ PSM Specialist can be contacted for required forms and additional guidance as needed. The Self-Assessment programmatic monitoring process begins on **August 7, 2023**.
  o **Only for SSIP**, the PEA will submit the outcome area action plan and analysis no later than **August 25, 2023**.

➢ No later than **September 15, 2023,** the PEA to be monitored will select student files to be reviewed that are a representative sample of the district/charter. The PEA will submit the Student Sample List to the PSM specialist.

➢ It is highly recommended that PEAs select files that are reflective of the current systems that are in place.

➢ No later than **September 22, 2023,** the PSM specialist will review SAM-3 to verify that it reflects a representative sample.

➢ The PEA will conduct student file reviews using the forms provided by the PSM specialist. Throughout the programmatic monitoring process, the PEA will consult with the PSM specialist on using the Guide Steps to ensure that accurate calls are made on the student forms.

➢ The PEA will submit to the PSM specialist no later than **December 1, 2023,** the completed:
  o Self-Assessment student forms
  o Child Find worksheet(s)
  o In-by-3 worksheet(s)
  o Required outcome area action plan and analysis

➢ Information on the student forms must be specific enough to determine the calls made by the PEA and the reasons for any "out" call on the line item of the Self-Assessment student forms. See the Student Form Explained for more information on how to complete a student form. **Note: each individual instance of PEA-identified noncompliance will require evidence of correction before the programmatic monitoring process is complete. The evidence of correction must be included with the final submission, on or before March 29, 2024.**

➢ **No later than December 8, 2023,** the PSM specialist will request:
  o Copies of a representative sample of student files with enough information provided to validate the PEA's calls were made in accordance with the current school year Guide Steps.
  o A sample of supporting documentation to validate calls made on the Child Find and In-by-3 worksheets.
  o Documentation to support components on the Agency Form including the following: local school board-approved policy and procedures, evidence of child find procedures presented to parents, PEA invitation list and agenda for private/home schooled students (districts only), evidence of referral system for birth–2 years 9 months, and evidence of referral system for 2 years 10 months to 5 (charters only).

➢ The PEA will **submit** the requested documentation by **January 12, 2024**.

➢ The PSM specialist will complete a sample validation of the compliance calls and provide feedback on the accuracy of calls made by the PEA no later than **February 9, 2024**.

- Validation will result in one of the following: in compliance, individual level of correction (ILC), or systemic level of correction (SLC).
  - In Compliance—all line items are 100% compliant. No further action is required. Monitoring is complete.
  - Individual Level of Correction (ILC)—all line items are 90% compliant or better. PEA will submit individual student corrections. Subsequent file review is not required.
  - Systemic Level of Correction (SLC)—results include line items that are less than 90% compliant. PEA will be required to correct all individual instances of noncompliance. Subsequent file review will be required.
- **When the PEA falls into SLC**, the PSM specialist and the PEA will consider the following factors in determining the necessary subsequent documentation to be reviewed: the pervasiveness of the noncompliance from the initial review (noncompliance related to each section) and whether noncompliance was extensive (noncompliance related to student files); they will also consider the frequency of out-of-compliance items that affect FAPE (which are shown on the Student form as 60-day items). **Note: compliance must be demonstrated in subsequent documentation in order to finalize and complete the monitoring.**
- The PEA will submit the final documentation, including subsequent documentation files (SLC only) and corrected noncompliance (ILC and SLC) **on or before March 29, 2024**.
- The PEA will submit final progress and status on outcome focus area activities and analysis, including for SSIP, no later than **March 29, 2024**.
- PSM specialist will request a sample for verification no later than **April 5, 2024**.
- The PEA will submit requested student documentation no later than **April 12, 2024.**
- PSM specialist will verify the correction of all individual instances of noncompliance from the initial review (ILC and SLC) and verify compliance in subsequent documentation (SLC only) by **April 26, 2024**.
- If there is no evidence of noncompliance, ESS will issue a successful completion letter to the PEA on **May 10, 2024**.
- If there is evidence of any noncompliance, ESS will issue a written notification of findings (WNOF) to the PEA on **May 10, 2024**.
  - PSM specialist, in collaboration with the PEA, will discuss the Summary of Findings (SOF), determine strengths and concerns, and develop a draft Corrective Action Plan (CAP) **prior to May 10, 2024.**
  - The PEA and PSM specialist will finalize the PEA's CAP **within 30 calendar days**.
- Items that are considered detrimental to the PEA's ability to provide FAPE to students require that a PEA correct the student file within 60 calendar days of the Written Notification of Findings letter; enforcement activities will apply if the timeline is not met.
- There is a one-year timeline for correction of all individual instances of noncompliance and completion of the CAP; enforcement activities will apply if the timeline is not met (OSEP 09-02 memo, DMS 2.0).

Self-Assessment Required Forms

Agency Form—Required for all PEAs in monitoring; reviews policies and procedures as well as child find processes

Child Find Worksheet—Required for all PEAs in monitoring; reviews 45-day screening process of the PEA

In-by-3 Worksheet—Required for all PEAs in monitoring; reviews the in-by-3 process of the PEA

Outcome Focus Area Analysis—Specifically created for each of the outcome focus areas, to include SSIP (initial rubric, action plan, and any needed updates)

Self-Assessment Student Form—Specifically created form required for each file review focus area. The forms contain line items that are tied to the Self-Assessment outcome focus areas. The Student Form is required for both the initial file reviews and any required subsequent file reviews.

Summary of Performance Worksheet—Specifically used for the following outcome focus areas: graduation rate, dropout rate, post school outcomes, and postsecondary transition.

Self-Assessment Tracking Form—Specifically created multipurpose document to be used by specialists as a communication tool throughout the Self-Assessment process. The PEA and the PSM specialist will use this tool to track and document progress.

Student File List and Monitoring Sample Matrix—Specifically created forms used to establish the number of files to be reviewed during the Self-Assessment process; using these two forms will also assist the PEA in ensuring that a representative sample of student files is selected.

Self-Assessment Monitoring File Sample Selection

Number of students in special education	10 or less	11–100	101–250	251–500	501 or more
Number of eligible student files	All	11+	20+	30+	40+
Initial evaluations of students found not eligible **(for line item II.A.5 only)**	2	2	5	8	12+

Note: Total files reviewed will increase based on number of eligible students/representative sample.
Select a representative sample of files based upon your student population. This may include the following variables, if they are applicable:
- Each school site
- Initial placements
- All disability categories
- All service delivery models within the PEA
- English learners (ELs)
- Students who are 16 years of age or older (Indicator 13—Secondary Transition)
- Students in dropout recovery programs
- Out-of-district placements (private day school and residential placement)
- Students phased out of special education services
- Students who have been suspended, been expelled, or moved to an Interim Alternative Educational Setting (IAES) for longer than 10 days
- Students initially evaluated and found not eligible (Indicator 11—Child Find)
- Preschool students

On-Site Programmatic Monitoring

PEAs completing an on-site monitoring will follow these steps:
- ➢ The Program Support and Monitoring (PSM) specialist and the PEA director meet in Year 3 to discuss on-site programmatic monitoring activities, to include choosing an outcome focus area.
- ➢ [Documents to be used for the monitoring activities](#) can be found online.
- ➢ PSM Specialist can be contacted for required forms and additional guidance.
- ➢ The PEA selects a team with guidance from the PSM specialist.

The PEA prepares a secure room for the programmatic monitoring activities.
- ➢ The PEA and PSM team complete a review of PEA documentation to include a representative sample of student files (see the Monitoring Sample Matrix for assistance in selecting files), policies and procedures, child find processes, etc.
  - o For security reasons, the ability to establish trends, and to ensure a collaborative training opportunity; files must be hard copies. Reviewing files within software programs is a liability for both ADE/ESS and the PEA. The PEA and PSM team complete classroom observations.
- ➢ The PEA and PSM team collect data for Indicators 11 (Child Find—Initial Evaluations), 12 (Part C to Part B Transition/Preschool Transition) and 13 (Secondary Transition).
- ➢ The PSM team inputs data and generates a draft Summary of Findings (SOF).
- ➢ The PEA and PSM team review the draft SOF report.
- ➢ The PEA and PSM team determine the PEA's overall implementation of systems (End of Section Calls) in the areas of Child Find, Evaluation/Reevaluation, Individualized Education Program, and Procedural Safeguards/Parental Participation.

The PEA and PSM team develop a Corrective Action Plan (CAP), as applicable.

- ➢ The PEA and PSM specialist schedule at least three (3) follow-up visits/desk audits during the corrective action year. One of these visits may be specific to reviewing the 60-day corrective action items.
- ➢ PSM sends written notification of findings (WNOF) no later than 30 days from the completion of the Summary of Findings discussion.
- ➢ The PEA has one calendar year from the WNOF to correct all individual instances of noncompliance. The PSM specialist verifies correction in accordance with the OSEP 09-02 memo.
- ➢ The PSM specialist reviews representative sample(s) of subsequent files to ensure systemic correction and sustainability, over the course of the corrective action year, in accordance with OSEP 09-02 memo.
- ➢ The PSM specialist will review the CAP for completion of CAP activities. This may require the PEA to produce evidence of trainings provided, training materials, agendas, etc.
- ➢ The PEA completes the Supplemental CAP activities (compliance-related outcome focus areas rubrics and action plans), as determined by the outcome of the documentation review. This applies to Indicators 11, 12, and 13.
- ➢ The PEA submits completed and/or updated outcome focus area action plan. This should include activities completed through the course of the corrective action year.

Instructions for On-Site Calls and Summary Documentation

IDEA §§300.149, A.A.C. §7-2-401, [OSEP Guidance 23-01](#)

For all on-site file review forms and worksheets, the PEA and PSM team will use the calls of "**I**" for **In Compliance**, "**O**" for **Out of Compliance**, and "**U**" for those items that are **Unreported** or do not apply. See [Student Form Explained](#) for additional information on how to complete the student form.

The steps for developing the final reports are listed below:
A compliance call is made for each individual line item reviewed using the Guide Steps. Enter an *I, O,* or *U* on the corresponding line for each item on the form.

1. Once the forms and worksheets have been completed, the data is entered into the ADE/ESS monitoring application by PSM specialists. The application automatically calculates the compliance level of each line item by summarizing the data that was collected from all sources and transfers the data into the draft Summary of Findings (SOF).
2. Together, the PEA and PSM team members review each of the four sections (Child Find, Evaluation/Reevaluation, IEP, and Procedural Safeguards/Parental Participation) in the draft Summary of Findings (SOF) report.
3. Based upon the review of all data, the team determines the overall implementation of systems of the PEA for each of the four sections. There are four options for each section: Substantial Evidence of Effective Systems, Inconsistent Evidence of Effective Systems, Minimal Evidence of Effective Systems, or No Evidence of Effective Systems. (See End of Section Calls for additional information)
4. The PEA and PSM teams reach agreement on the areas of PEA strengths and concerns based upon all data gathered. The strengths and concerns related to the special education program will be documented in the Written Notification of Findings (WNOF) letter sent to the PEA after the programmatic monitoring. The level of performance for the four sections in the draft SOF will also be noted in this letter.
5. The ADE/ESS monitoring application will generate a Corrective Action Plan (CAP) framework, where applicable. The PEA team, in collaboration with the PSM specialist, will develop a CAP that is unique to the PEA and that clearly outlines the activities and requirements necessary for the correction of noncompliance and the attainment of sustainability of systems. Discussion for the CAP should clearly identify the systemic root cause leading to the noncompliance, solutions for the PEA to correct the systems issue(s) that led to the noncompliance, and internal verification the PEA can implement to ensure sustainability of systems.

On-Site Programmatic Monitoring File Sample

Number of students in special education	10 or fewer	11–100	101–250	251–500	501 or more
Number of eligible student files	All	11+	20+	40+	60+
Initial evaluations of students found not eligible—line item II.A.5 only	2	2	5	8	12+

Note: total files reviewed will increase based on number of eligible students/representative sample.

Select a representative sample of files based upon your student population. This may include the following, if they are applicable:

- Files from each school site
- Initial evaluations
- Parent request for evaluation
- All disability categories
- All service delivery models within the PEA
- English learners (ELs)
- Students who are 16 years of age or older (Indicator 13)
- Students in dropout recovery programs
- Out-of-district placements (private day school and residential placement)
- Students phased out of special education services
- Students who have been suspended, have been expelled, or have moved to an interim alternative educational setting (IAES) for longer than 10 days
- Students initially evaluated and found not eligible (Indicator 11)
- Preschool students

General Background Information

1. The PEA and the PSM specialist will complete the programmatic monitoring setup form, which includes PEA preferred dates for the programmatic monitoring.
2. The PEA will identify the contracted work hours for staff to aid in drafting the agenda.
3. The PEA and the PSM specialist will review and finalize the agenda for the on-site programmatic monitoring prior to the start of the on-site programmatic monitoring.
4. The PEA will make arrangements for a work area with adequate table space for the complete monitoring team (SEA and PEA team members).
5. The PEA will make available a computer, printer, and other technical supports and supplies needed during monitoring.
6. The PEA and PSM specialists will discuss and make a schedule to ensure classroom observations will occur during the week of the scheduled programmatic monitoring.
7. PEA will need to ensure access to original source documentation for home language such as HLS.
8. PEA will need to ensure all PEA team members have access to the current copy of the Guide Steps.
9. Current copy of the SPED 72 should be available to all team members, either electronic or hard copy.
10. Student Sample List should be available to all team members at the time of the monitoring to track files reviewed.
11. Access to current progress reports should be available to all team members at the time of the monitoring.

For transportation-only districts, additional documentation can be found online.

State Systemic Improvement Plan (SSIP)

SSIP Identification and Purpose

Each PEA's risk analysis will be reviewed annually to provide recognition of improvements as well as further growth opportunities. During Year 3 of the 6-year monitoring cycle, each PEA's risk analysis results will be used to identify PEAs that have met the criteria for SSIP participation and differentiated monitoring activities in monitoring years 4-6. Criteria for SSIP participation are as follows:
- ➢ PEA serves grade 3
- ➢ PEA n-size for grade 3 is 10 or more students in special education
- ➢ PEA ELA proficiency for the state assessment in grade 3 falls below the state target for students with disabilities

Regardless of their assigned monitoring year, PEAs that meet the SSIP criteria may be placed in year four and required to participate. Movement to year four of the monitoring cycle is based on a myriad of data, including, but not limited to, fluctuations in the Risk Analysis score, changes in student performance, specialist recommendation, identification and recommendation by other ADE units, and PEA request.

First, results of the Risk Analysis must indicate that the PEA has risk along with a need in the area of English Language Arts (ELA) proficiency. Risk is determined using standard deviations from the average on the PEA Risk Analysis score. While the exact numbers should vary slightly from year to year, the formula used will remain the same. If the PEA's risk analysis score places them in the self-assessment monitoring type, and the PEA meets the SSIP criteria (grade levels and n-size), then English Language Arts (ELA) state assessment proficiency will be reviewed. PEAs that meet the SSIP criteria and demonstrate reading proficiency below the state average for students with disabilities in grade 3 will be identified as participants.

The purpose of the SSIP is to improve outcomes for students, specifically in ELA proficiency, targeting grades K–3. The State-Identified Measurable Result (SiMR) for Arizona is: By FFY 2025, targeted Public Education Agencies (PEAs) will increase the performance of SSIP students with disabilities in grade 3 on the English Language Arts (ELA) state assessment from 9.58% to 12.23%.

SSIP Participation

SSIP activities are implemented over three years with activities as follows:

Year 1 Participation
PEAs submit a needs assessment, action plan, literacy screener data, and survey data. PEAs are provided with feedback and technical assistance throughout the process by Program Support and Monitoring.

Year 2 Participation
PEAs update the needs assessment and action plan. PEAs submit literacy screener data, EBP walkthrough data, and survey data. PEAs are provided feedback and technical assistance on their SSIP plans as well as professional learning in the EBP process.

Year 3 Participation
PEAs update the needs assessment and action plan. PEAs submit literacy screener data, and survey data. PEAs are provided with feedback and technical assistance throughout the process by Program Support and Monitoring.

PEAs identified for participation in the SSIP are also eligible to enter into a contract with the SEA to receive financial assistance with implementation of activities outlined in the PEA SSIP action plan. PEAs must complete the contract and obtain approval prior to expending any funds they would expect to be reimbursed. This may accelerate the PEA's timelines for submission as outlined in the next section.

SSIP Activity Timeline

➢ SSIP is a three-year process. As all SSIP PEAs are in Self-Assessment when they begin SSIP Year 1, the activity timeline for Year 1 SSIP PEAs has been embedded within the following resources:

   o The Self-Assessment Timeline
   o The Self-Assessment Tracking Form

➢ In Year 2 and Year 3, SSIP PEAs receive their own tracking forms to guide submission of activities:

   o SSIP Year 2 Tracking Form
   o SSIP Year 3 Tracking Form

SSIP Activities and Resources

Below, links have been provided directly to SSIP Activities. While SSIP PEAs use the blank forms on the first submission, that same form is then used for all subsequent SSIP submissions. This allows for fewer documents throughout the process and for both the PEA and SEA to see the data through a lens of progress. A link to the SSIP Website has been provided for general access to all activity support materials.

Success Gaps Rubric and Action Plan (SGR & AP)

Evidence-Based Practices (EBP)

Literacy Screener Reporting Form

SSIP Website

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