



## Part B: Public Reporting & District Determinations

### *Improving Outcomes for Children and Youth with Disabilities (Ages 3 through 21)*

This technical guide outlines the processes used by the Nebraska Department of Education, Office of Special Education to generate the Part B performance report 2014-15 and complete the annual district determinations 2016.

April 2016

## Overview

In accordance with Section 616 of IDEA all states shall report annually to the public on the performance of each local educational agency located in the State on the targets in the State's Performance Plan (SPP).

The SPP is a six (6) year plan which consists of measurable and rigorous targets for each of the indicators established by the Secretary. The state submits an Annual Performance Report (APR) to account for performance against the targets for each indicator. For more information about Nebraska's SPP or APR, visit <http://www.education.ne.gov/sped/publicreporting.html>.

In addition to these requirements, states must annually complete district determinations. The following pages outline Nebraska's processes used to compile the **2014-15** Part B Performance Report and complete the **2016** annual district determinations.

**Nebraska's Public Reporting:** The district Part B Performance Report is released each year, on or before June 1, on the State of the Schools Report (SOSR) <http://www.education.ne.gov/documents/SOSR.html>.

The district Part B Performance Report includes the SPP indicators 1-15. The state target is listed, along with the district's performance against each target and whether or not the target was met. In order to ensure complete and accurate data, all districts are given the opportunity to review their own district-level information on a secured site before the district Performance Report is released to the public.

**Nebraska's District Determinations:** The Part B Performance Report is also used to complete the annual district determinations. All indicators on the Report are considered while completing the determinations. In addition, timely and accurate submission of data and audit findings are considered. The determinations are distributed to each district via a secured site, on or before June 1<sup>st</sup> following the submission of the APR.

*It is the policy of the Nebraska Department of Education not to discriminate on the basis of gender, disability, race, color, religion, marital status, age, national origin or genetic information in its education programs, administration, policies, employment or other agency programs.*

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## Graduation Rates for Students with Disabilities

### Indicator B1

#### Performance Indicator- Impact Area I

#### **Indicator 1:** Graduation Rate

**Data Source:** NSSRS June 30 count

**Data Year:** 2013-14 (lags one year)

**Data Due:** June 30, 2014

**Measurement/Calculation:** The Cohort Four-Year Graduation Rate is calculated by determining how many students in the Graduation Cohort graduate with a regular diploma divided by the number of students entering grade level nine for the first time, plus the number of students who transferred in, minus the number of students who transferred out.

$$\frac{\text{High School Diploma Recipients (YEAR X)}}{\text{FIRST-TIME ninth graders [(YEAR X) - 4] + (transfer in) - (transfer out)}}$$



The graduation rate used is from the prior school year. The “previous” data is from two years ago. The four year cohort graduation rate is being used as the initial graduation rate.

- A. If the cohort four year graduation rate is equal to or greater than the State goal of 90%, then MET.
- B. Otherwise, if the cohort four year graduation rate is greater than or equal to the previous year’s cohort four year graduation rate, then MET by 4 year cohort comparison.
- C. If the district is a NOT MET after Step B, the cohort extended 5<sup>th</sup> year graduation rate will be used if available and if it is equal to or greater than the State goal of 90%, then MET by 5 year cohort. If this yields a NOT MET, if the cohort extended 5<sup>th</sup> year graduation rate is greater or equal to the previous cohort extended 5<sup>th</sup> year graduation rate, the NOT MET becomes a MET.
- D. For districts that are a NOT MET after the above steps, Step C will be applied with cohort extended 6<sup>th</sup> year graduation rate if available.
- E. All others are NOT MET.

**Public Reporting Considerations:** Data is masked for public reporting if the cohort size is less than 10 (\*). If the district reported no students in the cohort, the following masking symbol is used: (▼)

Performance Report
Phase Tracking
District Determinations
Action Plan
Print Workbook

District Performance Report [2006-2007](#) [2007-2008](#) [2008-2009](#) [2009-2010](#)

Part B Services: Ages 3 through 21

Indicator #	ILCD Component	Indicator Topic	State Target	Local Performance	Go Me
1	3C	<a href="#">Graduation Rate</a>	75.20%	▼	
2	3D	<a href="#">Dropout Rate</a>	2.12%	0.00%	Y
3B	5A	Participation / Reading / Elementary	95.00%	100.00%~	Y
3B	5A	Participation / Reading / Middle	95.00%	100.00%~	Y
3B	5A	Participation / Reading / High	95.00%	100.00%~	Y
3B	5A	Participation / Math / Elementary	95.00%	100.00%~	Y
3B	5A	Participation / Math / Middle	95.00%	100.00%~	Y
3B	5A	Participation / Math / High	95.00%	100.00%~	Y

**District Determinations Considerations:**

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

If the district reported no students for the given year (▼), the indicator is counted on the district determination summary in Line C as “How many indicators cannot be included”. This removes the indicator from the total number of points possible.

If the district met by improvement over previous year or met with extended 5<sup>th</sup> and 6<sup>th</sup> year graduation rate, an open circle symbol (○) is used.

See Appendix A for a blank copy of the district determination worksheet.

## Dropout Rates for Students with Disabilities

### Indicator B2

#### Performance Indicator- Impact Area II

#### **Indicator 2:** Dropout Rate

**Data Source:** NSSRS June 30 count

**Data Year:** 2013-14 (lags one year)

**Data Due:** June 30, 2014

**Measurement/Calculation:** Nebraska's dropout rate is calculated by dividing the total number of 7<sup>th</sup>-12<sup>th</sup> grade special education students who dropped out by the total special education count for grades 7-12.

**Public Reporting Considerations:** Data is masked for public reporting if less than 10 students in grades 7-12 (\*).

#### **District Determinations Considerations:**

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

See Appendix A for a blank copy of the district determination worksheet.

## Assessment Outcomes for Students with Disabilities

Indicator B3A-B3C

Performance Indicator- Impact Area I  
(Not included in Performance Report)

**Indicator 3A:** Special Ed Meets AYP

**Data Source:** NeSA Assessment Data

**Data Year:** 2014-15

**Data Due:** NeSA Testing Spring, 2015

**Measurement/Calculation:** Percent of districts with a disability subgroup that meets the minimum “n” size that meet the State’s AYP targets for the disability subgroup.

**Public Reporting Considerations:** This is state aggregate data; therefore, a district percentage is not included in the performance report.

**District Determinations Considerations:** This is state aggregate data; therefore, a district percentage is not included in the district’s determination.

**Follow up if target is not met:** This is state aggregate data; therefore, a district percentage is not included in the performance report.

## Assessment Outcomes for Students with Disabilities

Indicator B3A-B3C  
Performance Indicator- Impact Area I

**Indicator 3B:** Special Education Participation

**Data Source:** NeSA Assessment Data

**Data Year:** 2014-15

**Data Due:** NeSA Testing Spring, 2015

**Measurement/Calculation:** Participation rate for children with IEPs in a regular assessment with no accommodations; regular assessment with accommodations; alternate assessment against alternate academic achievement standards.

**Public Reporting Considerations:** Masking symbols for less than 30 students and less than 10 students (\*) are applied to this component. The less than 30 masking rule (~) is applied to match procedures used for Adequate Yearly Progress (AYP).

District Performance Report <a href="#">2006-2007</a> <a href="#">2007-2008</a> <a href="#">2008-2009</a> <a href="#">2009-2010</a>					
Part B Services: Ages 3 through 21					
Indicator #	ILCD Component	Indicator Topic	State Target	Local Performance	Goal Met
1	3C	<a href="#">Graduation Rate</a>	75.20%	66.67%*	N
2	3D	<a href="#">Dropout Rate</a>	2.12%	0.00%	Y
3B	5A	Participation / Reading / Elementary	95.00%	100.00%~	Y
3B	5A	Participation / Reading / Middle	95.00%	100.00%~	Y
3B	5A	Participation / Reading / High	95.00%	100.00%~	Y
3B	5A	Participation / Math / Elementary	95.00%	95.24%~	Y
3B	5A	Participation / Math / Middle	95.00%	95.24%~	Y
3B	5A	Participation / Math / High	95.00%	95.24%~	Y

### District Determinations Considerations:

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

Points are awarded even if the “n” is less than 30.

If the district had fewer than 10 students reported in a grade or standard or if all students were reported in a single performance category the data will be masked for public reporting to protect the identity of the students and is marked with a (\*) symbol.

If the district reported no students for the given year (▼), the indicator is counted on the district determination summary in Line C as “How many indicators cannot be included”. This removes the indicator from the total number of points possible.

If less than 30 special education students or too few students were tested to determine if the goal was MET/NOT MET, a half circle symbol (◐) is used in the “Goal Met” column.

If a district met AYP through the use of a confidence interval and/or safe harbor, the district is awarded a point (calculations completed in Title I Office). The  $\diamond$  symbol is used to indicate this consideration.

See Appendix A for a blank copy of the district determination worksheet.

## Assessment Outcomes for Students with Disabilities

Indicator B3A-B3C

Performance Indicator- Impact Area I

**Indicator 3C:** Special Education Performance

**Data Source:** NeSA Assessment Data

**Data Year:** 2014-15

**Data Due:** NeSA Testing Spring, 2015

**Measurement/Calculation:** Proficiency rate for children with IEPs against grade level standards and alternate academic achievement standards.

**Public Reporting Considerations:** Masking symbols for less than 30 students and less than 10 students (\*) are applied to this component. The less than 30 masking rule (~) is applied to match procedures used for Adequate Yearly Progress (AYP). Additionally, the percentage for assessment performance is not publicly displayed, to match procedures used for AYP.

**District Determinations Considerations:**

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

Points are awarded even if the “n” is less than 30.

If the district had fewer than 10 students reported in a grade or standard or if all students were reported in a single performance category the data will be masked for public reporting to protect the identity of the students and is marked with a (\*) symbol.

If the district reported no students for the given year (▼), the indicator is counted on the district determination summary in Line C as “How many indicators cannot be included”. This removes the indicator from the total number of points possible.

If less than 30 special education students or too few students were tested to determine if the goal was MET/NOT MET, a half circle symbol (◐) is used in the “Goal Met” column.

If a district met AYP through the use of a confidence interval and/or safe harbor, the district is awarded a point (calculations completed in Title I Office). The ◊ symbol is used to indicate this consideration.

3C	5B	Performance / Reading / Elementary	56.00%	58.00%	Y
3C	5B	Performance / Reading / Middle	60.00%	57.89%◊	Y

See Appendix A for a blank copy of the district determination worksheet.

## Suspension/Expulsion for Students with Disabilities

Indicator 4A-4B

Performance Indicator- Impact Area II

**Indicator 4A:** Suspension/Expulsion Discrepancy

**Data Source:** Discipline Report

**Data Year:** 2013-14 (lags one year)

**Data Due:** June 30, 2014

**Measurement/Calculation:** Number of 3-21 year old special education students in district suspended or expelled for greater than 10 days.

A significant discrepancy in the rate of out-of-school suspensions/expulsions greater than 10 days is defined as a district suspension/expulsion rate of greater than 5% with 10 or more suspensions/expulsions occurring during the school year.

Districts whose suspension/expulsion rates are non-discrepant are marked with "ND". Districts whose suspension/expulsion rates are discrepant are marked with "D".

**Public Reporting Considerations:** No special considerations.

**District Determination Considerations:** 4A is a compliance indicator; the target is set at 0%. The district earns 1.0 point if the target is met.

See Appendix A for a blank copy of the district determination worksheet.

## Suspension/Expulsion for Students with Disabilities

### Indicator 4A-4B

#### Compliance Indicator- Impact Area II

**Indicator 4B:** Suspension/Expulsion Discrepancy

**Data Source:** Discipline Report

**Data Year:** 2013-14 (lags one year)

**Data Due:** June 30, 2014

**Measurement/Calculation:** Number of 3-21 year old special education students in the district, suspended or expelled for greater than 10 days, by race/ethnicity; and policies, procedures or practices that contribute to the significant discrepancy do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

A significant discrepancy in the rate of out-of-school suspensions/expulsions for greater than 10 days is defined as a district suspension/expulsion rate of greater than 5% by race/ethnic grouping with 10 or more suspensions/expulsions occurring during the school year.

To ensure that Nebraska has established a measurement that appropriately identifies districts with a significant discrepancy, NDE will conduct a review of those districts immediately above or below the state measurement by reviewing their use of positive behavioral interventions and supports and district policies and procedures relating to discipline in the IEP.

Districts whose suspension/expulsion rates are non-discrepant are marked with "ND". Districts whose suspension/expulsion rates are discrepant are marked with "D".

**Public Reporting Considerations:** No special considerations.

**District Determination Considerations:** 4B is a compliance indicator; the target is set at 0%. The district earns 1.0 point if the target is met.

See Appendix A for a blank copy of the district determination worksheet.

**LRE for Students with Disabilities (ages 6-21)**

Indicator 5A-5C

Performance Indicator- Impact Area I

**Indicator 5A:** Regular Class 80% or More

**Data Source:** NSSRS Settings Data

**Data Year:** 2015-16 (ahead one year)

**Data Due:** October 1, 2015

**Measurement/Calculation:** Percent of children with IEPs aged 6 through 21 served:

- Inside the regular class 80% or more of the day.

**Public Reporting Considerations:** No special considerations. Data is masked for public reporting if less than 10 (\*).

If the district reported no students for the given year (▼), the indicator is counted on the district determination summary in Line C as “How many indicators cannot be included”. This removes the indicator from the total number of points possible.

**District Determination Considerations:**

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

See Appendix A for a blank copy of the district determination worksheet.

**LRE for Students with Disabilities (ages 6-21)**

**Indicator 5A-5C**

**Performance Indicator- Impact Area I**

**Indicator 5B:** Regular Class Less than 40%

**Data Source:** NSSRS Settings Data

**Data Year:** 2015-16 (ahead one year)

**Data Due:** October 1, 2015

**Measurement/Calculation:** Percent of children with IEPs aged 6 through 21 served:

- Inside the regular class less than 40% of the day.

**Public Reporting Considerations:** Data is masked for public reporting if less than 10 (\*).

If the district reported no students for the given year (▼), the indicator is counted on the district determination summary in Line C as “How many indicators cannot be included”. This removes the indicator from the total number of points possible.

**District Determination Considerations:**

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

See Appendix A for a blank copy of the district determination worksheet.

**LRE for Students with Disabilities (ages 6-21)**

**Indicator 5A-5C**

**Performance Indicator- Impact Area I**

**Indicator 5C:** Separate Setting

**Data Source:** NSSRS Settings Data

**Data Year:** 2015-16 (ahead one year)

**Data Due:** October 1, 2015

**Measurement/Calculation:** Percent of children with IEPs aged 6 through 21 served:  
Percent of children with IEPs aged 6 through 21 served: In separate schools, residential facilities, or homebound/hospital placements.

**Public Reporting Considerations:** Data is masked for public reporting if less than 10 (\*).

If the district reported no students for the given year (▼), the indicator is counted on the district determination summary in Line C as “How many indicators cannot be included”. This removes the indicator from the total number of points possible.

**District Determination Considerations:**

<b>Status of District Performance</b>	<b>Points Distributed</b>
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

See Appendix A for a blank copy of the district determination worksheet.

**LRE for Students with Disabilities (ages 3-5)**

**Indicator 6A-6B**

**Performance Indicator- Impact Area I**

**Indicator 6A:** Regular Early Childhood Program

**Data Source:** NSSRS Settings Data

**Data Year:** 2015-16 (ahead one year)

**Data Due:** October 1, 2015

**Current Measurement/Calculation:** 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;

**Public Reporting Considerations:** Data is masked for public reporting if less than 10 (\*). If the district reported no students, the following masking symbol is used: ▼

**District Determination Considerations:**

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0

If the district reported no students for the given year (▼), the indicator is counted on the district determination summary in Line C as “How many indicators cannot be included”. This removes the indicator from the total number of points possible.

See Appendix A for a blank copy of the district determination worksheet.

**LRE for Students with Disabilities (ages 3-5)**

Indicator 6A-6B

Performance Indicator- Impact Area I

**Indicator 6B:** Separate Early Childhood Program

**Data Source:** NSSRS Settings Data

**Data Year:** 2015-16 (ahead one year)

**Data Due:** October 1, 2015

**Current Measurement/Calculation:** Percent of children aged 3 through 5 with IEPs attending a:

- Separate special education class, separate school or residential facility.

**Public Reporting Considerations:** Data is masked for public reporting if less than 10 (\*). If the district reported no students, the following masking symbol is used: ▼

**District Determination Considerations:**

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

If the district reported no students for the given year (▼), the indicator is counted on the district determination summary in Line C as “How many indicators cannot be included”. This removes the indicator from the total number of points possible.

See Appendix A for a blank copy of the district determination worksheet.

**Results Matter for Children (ages 3-5)**

Indicator 7A-7C

Performance Indicator- Impact Area I

**Indicator 7:** Preschool Outcomes

**Data Source:** Teaching Strategies (TS) GOLD Online

**Data Year:** 2014-15

**Data Due:** June 30, 2015

**Measurement/Calculation:** Percent of preschool children, ages three through five, with IEPs who demonstrate improved:

Summary Statement	Outcome A: Positive social-emotional skills (including social relationships)
1.	Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program
2.	The percent of children who were functioning within age expectations in Outcome A by the time they exited the program
	Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)
1.	Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program
2.	The percent of children who were functioning within age expectations in Outcome B by the time they exited the program
	Outcome C: Use of appropriate behaviors to meet their needs
1.	Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program
2.	The percent of children who were functioning within age expectations in Outcome C by the time they exited the program

**Public Reporting Considerations:** Data is masked for public reporting if less than 10 (\*).

For child data to be included in this indicator:

- 1) Child must have exited during that year;
- 2) Have complete entry and exit data within GOLD; and
- 3) Have been in the program for at least six months.

If no children in the district meet the criteria, the following symbol is used (▼).

⊘ : This designation applies only to Summary Statement 1 for Outcomes A, B and C, if all children demonstrated skills similar to same aged peers at entry. If so, there was no opportunity for children to demonstrate greater than expected gains between the entry and exit checkpoint for Summary Statement 1.

**District Determination Considerations:**

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

See Appendix A for a blank copy of the district determination worksheet.

**Parent Involvement (ages 3 - 21)**  
**Indicator 8**  
**Performance Indicator- Impact Area II**

**Indicator 8:** Parent Survey

**Data Source:** Part B Parent Survey

**Data Year:** 2014-15

**Data Due:** October 1, 2015

**Measurement/Calculation:** Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.



*A sampling plan is used to collect data from school districts once every five years for this Indicator. The survey has been revised and a pilot was conducted in 2012-13. The survey is now collected electronically.*

**Public Reporting Considerations:** The district's performance against the target will only be publicly displayed the year the survey was collected. For any other year in which, the district is not required to complete a parent survey, the symbol ❖ will be shown.

**District Determination Considerations:** If the district did not participate in the survey in 2014-15, NDE will include this Indicator in Line C of the determinations worksheet as "How many indicators cannot be included". This removes the indicator from the total number of points possible.

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0

See Appendix A for a blank copy of the district determination worksheet.

**Disproportionality (ages 6-21)**  
Indicator 9  
Compliance Indicator- Impact Area I

**Indicator 9:** Disproportionality

**Data Source:** NSSRS Child Count

**Data Year:** 2014-15

**Data Due:** October 1, 2014

**Measurement/Calculation:** Percent of disproportionate representation of racial and ethnic groups in special education and related services that is a result of inappropriate identification.

Disproportionate representation is defined as a weighted risk ratio of 4.00 and above. A weighted risk ratio is calculated only if there are 30 or more students in the group of interest and if there are 30 or more students in the comparison group. Significant disproportionality exists when over-representation occurs in two successive years and the disproportionate representation is due to inappropriate identification.

Districts not having disproportionate representation of racial and ethnic groups in special education and related services are marked with “ND”. Districts having disproportionate representation of racial and ethnic groups in special education and related services are marked with “D”.

**Public Reporting Considerations:** Indicator 9 is a compliance indicator; the target is set at 0%.

**District Determination Considerations:** The district earns 1.0 point if the target is met.

See Appendix A for a blank copy of the district determination worksheet.

**Disproportionality (ages 6-21)**  
Indicator 10  
Compliance Indicator- Impact Area I

**Indicator 10:** Disproportionality

**Data Source:** NSSRS Child Count

**Data Year:** 2014-15

**Data Due:** October 1, 2014

**Measurement/Calculation:** Percent of disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

Disproportionate representation is defined as a weighted risk ratio of 4.00 and above. A weighted risk ratio is calculated only if there are 30 or more students in the group of interest and if there are 30 or more students in the comparison group. Significant disproportionality exists when over-representation occurs in two successive years and the disproportionate representation is due to inappropriate identification.

Districts not having disproportionate representation of racial and ethnic groups in specific disability categories are marked with "ND". Districts having disproportionate representation of racial and ethnic groups in specific disability categories are marked with "D".

**Public Reporting Considerations:** Indicator 10 is a compliance indicator; the target is set at 0%.

**District Determination Considerations:** The district earns 1.0 point if the target is met.

See Appendix A for a blank copy of the district determination worksheet.

**Child Find**  
**Indicator 11**  
Compliance Indicator- Impact Area II

**Indicator 11:** Evaluation Timeline [for Initial Evaluations](#)

**Data Source:** Data is reported through a secured website (ILCD Dashboard-Data Entry).

**Data Year:** 2014-15

**Data Due:** October 31, 2015

**Measurement/Calculation:** Percent of children with parental consent to evaluate, who were evaluated and eligibility determined within 45 school days [for initial evaluations](#).



*Districts participate in this data collection during the established monitoring year (e.g. same year as NDE compliance file review). Therefore, districts participate in this data collection once every five years. If the district does not demonstrate 100% compliance, NDE verifies correction using the two-prong process outlined in OSEP memo 09-02 (Appendix B).*

**Public Reporting Considerations:** This is a compliance indicator; the target is set at 100%.

**District Determination Considerations:** The district earns 1.0 point if the target is met. When this **COMPLIANCE** indicator does not meet the target, the district may score one point **if:** the compliance rate is 75% or more and stays the same or improves from the previous years, **and** correction of noncompliance within the indicator occurred in one year.

See Appendix A for a blank copy of the district determination worksheet.

**Part C to Part B Transition**  
Indicator 12  
Compliance Indicator- Impact Area III

**Indicator 12:** Transition C to B

**Data Source:** NSSRS and District data. District data is reported through a secured website (Inquiry 7, Component C).

**Data Year:** 2014-15

**Data Due:** NSSRS, submitted in June and October, 2015. ILCD data collected on October 31, 2015

**Measurement/Calculation:** 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.



*Districts participate in this data collection every year. If the district does not demonstrate 100% compliance, NDE verifies correction using the two-prong process outlined in OSEP memo 09-02 (Appendix B).*

**Public Reporting Considerations:** This is a compliance indicator; the target is set at 100%.

**District Determination Considerations:** The district earns 1.0 point if the target is met. When this **COMPLIANCE** indicator does not meet the target, the district may score one point **if:** the compliance rate is 75% or more and stays the same or improves from the previous years, **and** correction of noncompliance within the indicator occurred in one year.

See Appendix A for a blank copy of the district determination worksheet.

## Secondary Transition Components in the IEP (ages 16-21)

### Indicator 13

#### Compliance Indicator- Impact Area III

#### **Indicator 13:** Secondary Transition

**Data Source:** Monitoring Checklist (Questions aligned with the National Secondary Transition Technical Assistance Center-NSTTAC- Checklist A)

**Data Year:** 2014-15

**Data Due:** Data is pulled from the date the five (5) year monitoring file review is finalized.

**Measurement/Calculation:** Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that, if appropriate, a representative of any participating agency was invited to the IEP team meeting with the prior consent of the parent or student who has reached the age of majority.



*Districts participate in this data collection during the established monitoring year (e.g. same year as NDE compliance file review). Therefore, districts participate in this data collection once every five years. If the district does not demonstrate 100% compliance, NDE verifies correction using the two-prong process outlined in OSEP memo 09-02 (Appendix B).*

**Public Reporting Considerations:** Indicator 13 is a compliance indicator; the target is set at 100%.

**District Determination Considerations:** The district earns 1.0 point if the target is met. When this **COMPLIANCE** indicator does not meet the target, the district may score one point **if:** the compliance rate is 75% or more and stays the same or improves from the previous years, **and** correction of noncompliance within the indicator occurred in one year.

See Appendix A for a blank copy of the district determination worksheet.

**Nebraska's Post-School Outcomes Project**  
**Indicator 14A-14C**  
**Performance Indicator- Impact Area III**

**Indicator 14:** Post-School Outcomes

**Data Source:** Telephone interviews conducted with eligible students who left school, or who have graduated or aged out and exited during the 2013-14 school year.

**Data Year:** Interviews completed during the summer, 2015 with exiters from 2013-14 school year.

**Data Due:** Contact information for the former students is collected via the NDE portal in April of each year. The list of students presented in this report is pulled from the June 30 NSSRS exit report.

**Measurement/Calculation:** Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were:

- A. enrolled in higher education within one year of leaving high school;
- B. enrolled in higher education or competitively employed within one year of leaving high school;
- C. enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.



*The definitions used for these targets are established by OSEP (e.g. definition of higher education). For a complete overview of the definitions, access Nebraska's Post-School Outcomes methodology report at <http://ndetransition.site.esu9.org/ne-post-school-outcomes/>*

**Public Reporting Considerations:** Data is masked for public reporting if less than 10 (\*). If the district reported no students graduating with a regular diploma, receiving a certificate of completion, aging out or dropping out, the following masking symbol is used: ▼. If the district supplied contact information for students but no responses were obtained, the following symbol is used: ■

**District Determination Considerations:**

Status of District Performance	Points Distributed
Performance meets or exceeds state target	1.0
Performance does not meet target but improves from the previous year	1.0
Performance does not meet target but stays the same as previous year	1.0

If the district reported no students for the given year (▼) or no responses were obtained (■), the indicator is counted on the district determination summary in Line C as “How many indicators cannot be included”. This removes the indicator from the total number of points possible.

See Appendix A for a blank copy of the district determination worksheet.

## Correction of Non-Compliance

### Indicator 15 Compliance Indicator

**Indicator 15:** Correction of Non-compliance

**Data Source:** General Supervision System (including monitoring, complaints, hearings, etc.).

**Data Year:** Findings of non-compliance made in 2013-14 and corrected as soon as possible and in no case later than one year from identification.

**Data Due:** Within the designated time outlined in the Corrective Action Plan, but not to exceed one (1) calendar year from the date the incidence of noncompliance was identified.

**Measurement/Calculation:** Correction of all incidences of noncompliance identified through the File Review, Complaints or Due Process, within in the designated time outlined in the Corrective Action Plan, but not to exceed one (1) calendar year from the date the incident of noncompliance was identified.



*NDE must verify correction of non-compliance using the two-prong process outlined in OSEP memo 09-02 (Appendix B).*

**Public Reporting Considerations:** This is a compliance indicator; the target is set at 100%.

**District Determination Considerations:** The district earns 1.0 point if the target is met.

See Appendix A for a blank copy of the district determination worksheet.

### Timely and Accurate Data

As a reminder, Timely and Accurate data submission is considered in the district’s annual determination. This information is not publicly released in the district’s performance report; however, late and inaccurate submissions may impact the district’s performance against the indicator targets. For example, inaccurate NSSRS data may impact any of the indicators which use this collection as the data source for calculating performance (e.g. graduation and dropout rates, LRE, etc.).

The data collections currently included in the annual district determinations are:

<i>Collection</i>	<i>Timely Submission</i>	<i>Accurate Submission</i>
Special Education Snapshot (NSSRS): June 30	X	X
Statement of Assurances: January 20	X	
Post-School Outcomes- Student Contact Information: April 30	X	
Report of children with disabilities unilaterally removed to an interim alternative setting or suspended or expelled: June 30	X	
NSSRS Special Education Snapshot: October 1	X	X

For a list of special education data collection deadlines, see Appendix C. Also, for more details regarding the point distribution in the district determination, please see Appendix D “Rules of the Road”.

### Significant Audit Findings/Financial Submissions

Timely financial submissions and significant audit findings are also included in the annual district determinations.

The financial reports currently included in the annual district determinations are:

<i>Financial Report</i>	<i>Timely Submission</i>
Final Financial Report for Children with Disabilities Birth to Age 5: October 1	X
Special Education and Support Services Final Financial Report for School Age Students ages 5-21: October 31	X
Special Education IDEA Consolidated Application: January 20	X
Special Education Final Claim for Transportation Expenses for Children with Disabilities: September 30	X
Proportionate share Worksheet for Non-public Schools: July 31	X

All reports are also reviewed for significant audit findings. The review of school district financial data is based on the most recent year of complete data. Additionally, the following criteria are used when determining a significant audit finding:

- Audit finding within +/-10% of total special education expenditures reported = 1 point
- Audit findings exceed +/- 10%: but fall between 11% to 24% = .5 point
- Audit findings at +/- 25% or above = 0 point

For a list of special education data collection deadlines, see Appendix C. Also, for more details regarding the point distribution in the district determination, please see Appendix D "Rules of the Road".

**Appendix A:**  
**District Determination Summary**



## District Determination Summary – Part B

2016

District Name: \_\_\_\_\_

NDE Reviewer: \_\_\_\_\_

Line	Instruction	Value
A	Total Points Available	41
B	Targets Met/Points Earned on the <a href="#">Performance Report</a>	
C	Points Earned by Improvement From Previous Year	
D	Indicators Excluded	
E	Points Earned for <a href="#">data reporting</a>	
F	Points Earned for <a href="#">finance</a>	
H	Total Points Earned (B+C+E+F)	
I	Percentage(Line G/Line A – Line D)	

The levels of determination include:

- Meets Requirements (100% to 70%)
- Needs Assistance (69% to 50%)
- Needs Intervention (49% to 31%)
- Needs Substantial Intervention (30% and below)

## Appendix B:

### OSEP 09-02 Memo



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

OCT 17 2008

<b>Contact Person</b>	
<b>Name:</b>	Ruth Ryder
<b>Telephone:</b>	(202) 245-7513

**OSEP 09-02**

**TO :** Chief State School Officers  
Lead Agency Directors

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

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

**Introduction**

Pursuant to sections 616(d) and 642 of the Individuals with Disabilities Education Act (IDEA), the Department reviews each State's Annual Performance Report (APR) and, based on data provided in the State's APR, information obtained through monitoring visits, including verification visits, and any other public information, determines if the State: Meets Requirements, Needs Assistance, Needs Intervention, or Needs Substantial Intervention. In making determinations in 2007 and 2008, the Office of Special Education Programs (OSEP) considered, among other factors, whether a State demonstrated substantial compliance on all compliance indicators either through reporting a very high level of performance (generally 95% or better) or correction of noncompliance.<sup>1</sup>

The purpose of this memorandum is twofold. First, the memorandum reiterates the steps a State must take in order to report that the previously identified noncompliance has been corrected. Second, the memorandum describes how we will factor evidence of correction into our analysis of whether the State has demonstrated substantial compliance for purposes of determinations under sections 616 and 642 of the IDEA (beginning with the Department's 2010 determinations based on a review of the FFY 2008 APRs). This memorandum also addresses concerns

<sup>1</sup> For Indicators B-15 and C-9, which measure timely correction of noncompliance, the only way for States to demonstrate substantial compliance is by demonstrating timely correction.

identified in our review of States' FFY 2005 and FFY 2006 APRs about identification and correction of noncompliance and low performance in compliance areas.

**Issue 1 – Demonstrating Correction**

As noted in OSEP's prior monitoring reports and verification visit letters, in order to demonstrate that previously identified noncompliance has been corrected, a State must:

- (1) Account for all instances of noncompliance, including noncompliance identified: (a) through the State's on-site monitoring system or other monitoring procedures such as self-assessment; (b) through the review of data collected by the State, including compliance data collected through a State data system; and (c) by the Department;
- (2) Identify where (in what local educational agencies (LEAs) or early intervention services (EIS) programs) noncompliance occurred, the percentage level of noncompliance in each of those sites, and the root cause(s) of the noncompliance;<sup>2</sup>
- (3) If needed, change, or require each LEA or EIS program to change, policies, procedures and/or practices that contributed to or resulted in noncompliance; and
- (4) Determine, in each LEA or EIS program with identified noncompliance, that the LEA or EIS program is correctly implementing the specific regulatory requirement(s). This must be based on the State's review of updated data such as data from subsequent on-site monitoring or data collected through a State data system.

If an LEA or EIS program did not correct identified noncompliance in a timely manner (within one year from identification), the State must report on whether the noncompliance was subsequently corrected. Further, if an LEA or EIS program is not yet correctly implementing the statutory/regulatory requirement(s), the State must explain what the State has done to identify the cause(s) of continuing noncompliance, and what the State is doing about the continued lack of compliance including, as appropriate, enforcement actions taken against any LEA or EIS program that continues to show noncompliance.

Regardless of the specific level of noncompliance, if a State finds noncompliance in an LEA or EIS program, the State must notify the LEA or EIS program in writing of the noncompliance, and of the requirement that the noncompliance be corrected as soon as possible, but in no case more than one year from identification (i.e., the date on which the State provided written notification to the LEA or EIS program of the noncompliance). In determining the steps that the LEA or EIS program must take to correct the noncompliance and to document such correction, the State may consider a variety of factors, including whether the noncompliance: (1) was extensive or found in only a small percentage of files; (2) resulted in the denial of a basic right under the IDEA (e.g., an extended delay in an initial evaluation with a corresponding delay in the child's receipt of a free appropriate public education or early intervention services, or a failure to provide services in accordance with the individualized education program or individualized family service plan); and (3) represents an isolated incident in the LEA or EIS program, or reflects a long-standing failure to meet the IDEA requirements. Thus, while a State may

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<sup>2</sup> Please note that while we are not requesting that States provide, in the APR, lists of specific LEAs or EIS programs found out of compliance, we may review documentation of correction that the State required of the LEA or EIS program when we conduct a verification visit or other monitoring activity in a State.

determine the specific nature of the required corrective action, the State must ensure that any noncompliance is corrected as soon as possible, but in no case more than one year from identification.

For any noncompliance concerning a child-specific requirement that is not subject to a specific timeline requirement (State Performance Plan (SPP)/APR Indicators B-9, B-10, B-13, C-8A and C-8B), in addition to the steps above, the State also must ensure that the LEA or EIS program has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA or EIS program. Similarly, for any noncompliance concerning a child-specific timeline requirement (SPP/APR Indicators B-11, B-12, C-1, C-7, and C-8C), in addition to the steps enumerated above, the State must ensure that the LEA or EIS program has completed the required action (e.g., the evaluation or initiation of services), though late, unless the child is no longer within the jurisdiction of the LEA or EIS program. In ensuring that each individual case of noncompliance has been corrected, the State does not need to review each child's record in the LEAs or EIS programs where the noncompliance occurred, but rather may review a reasonable sample of the previously noncompliant files to verify that the noncompliance was corrected.

### **Issue 2 – Factoring Correction into Evaluation of Substantial Compliance**

For purposes of the Department's IDEA section 616 determinations issued since June 2007, we considered a State to be in substantial compliance relative to a compliance indicator if the State's data indicate a very high level of compliance (generally 95% or above), or if the State nonetheless demonstrated correction of identified noncompliance related to that indicator. In the interest of fairness to all States, we will evaluate whether a State demonstrated correction of identified noncompliance related to an indicator when we make our 2009 determinations based on the FFY 2007 APRs, and will use the same approach we used in 2007 and 2008. However, some States are reporting very low levels of compliance year after year, while also reporting that they have corrected previously identified noncompliance. This concerns us because it indicates that systemic correction of noncompliance did not occur. Thus, in the interest of improving LEA and EIS program performance and ultimately improving results for infants, toddlers, children and youth with disabilities, beginning with our 2010 determinations:

- (1) We will no longer consider a State to be in substantial compliance relative to a compliance indicator based on evidence of correction of the previous year's noncompliance if the State's current year data for that indicator reflect a very low level of compliance (generally 75% or below); and
- (2) We will credit a State with correction relative to a child-specific compliance indicator only if the State confirms that it has addressed each instance of noncompliance identified in the data for an indicator that was reported in the previous year's APR, as well as any noncompliance identified by the Department more than one year previously. The State must specifically report for each compliance indicator whether it has corrected all of the noncompliance identified in its data for that indicator in the prior year's APR as well as that identified by the Department more than one year previously.

For example --

- Reporting correction of noncompliance identified in on-site monitoring findings alone will not be sufficient to demonstrate correction if the data reported in a State's prior year's APR showing noncompliance were collected through the State's data system, and the monitoring findings do not include all of the instances of noncompliance identified through the prior year's data.
- In order to report correction of noncompliance identified in data based on a statewide sample, the State would need to track the noncompliance identified in the sample data reported in its prior year's APR back to the specific LEAs or EIS programs with noncompliance and report correction for those LEAs or EIS programs.

In other words, a State's demonstration of correction needs to be as broad in scope as the noncompliance identified in the prior year's data.

We hope that you find the information in this memorandum helpful in collecting and reporting data for your future SPP/APR submissions. OSEP is committed to supporting your efforts to improve results for infants, toddlers, children and youth with disabilities and looks forward to working with your State over the next year. If you have any questions, would like to discuss this further, or would like to request technical assistance, please do not hesitate to call your OSEP State Contact.

cc: Part B State Directors  
Part C Coordinators

**Appendix C:**  
**NDE Special Education Data Calendar**

## Special Education Data Collections

Date Due:	Opens:	NDE Form Number:	Data Collection Title:	Review Window Ends:	Collection Location:	Contact Person:	Contact Information:
<b><i>As Required</i></b>							
<b><i>As Required</i></b>	<b><i>As Required</i></b>	GMS	Special Education IDEA Consolidated Application (Base, E/P Preschool, CEIS, Non-public)	<b><i>As Required</i></b>	GMS	SPED Regional Representative	402-471-2471
<b><i>As Required</i></b>	After GMS app is approved	GMS	Special Education IDEA Consolidated Expenditures ( Base, E/P, Preschool, CEIS, Non-Public )	10/15	GMS	Help Desk, Financial Services Staff	888-285-0556
<b><i>As Required</i></b>	<b><i>As Required</i></b>	GMS	Special Education Discretionary Grant Applications (PRT-EDN; Collaborative; Secondary Transition)	<b><i>As Required</i></b>	GMS	SPED Regional Representative / Amy Bunnell-PRT-EDN/ Pete Biaggio, Collaborative/ Rita Hammitt-Secondary Transition	402-471-2471
<b><i>As Required</i></b>	After GMS app is approved	GMS	Special Education Discretionary Grant Expenditures (PRT – EDN; Collaborative)	10/15	GMS	Help Desk, Financial Services Staff	888-285-0556
<b><i>As Required</i></b>	After GMS app is approved	GMS	Special Education Discretionary Grant Expenditures (Secondary Transition)	11/15	GMS	Help Desk, Financial Services Staff	888-285-0556
<b><i>As Required</i></b>	<b><i>As Required</i></b>	NA	Special Education Discretionary Grant Applications (not in GMS), paper-based grant packages	<b><i>As Required</i></b>	Paper submission	SPED Regional Representative	402-471-2471
<b><i>As Required</i></b>	<b><i>As Required</i></b>	28-003	Report of Expenditures & Estimated Requirements of Grant Funds (Paper based Discretionary Grants – not in GMS	<b><i>As Required</i></b>	Paper submission	SPED Regional Representative Suzie Pierce	402-471-2471

Date Due:	Opens:	NDE Form Number:	Data Collection Title:	Review Window Ends:	Collection Location:	Contact Person:	Contact Information:
<b>As Required</b>	<b>As Required</b>	NA	Statement of Assurances for a Free Appropriate Public Education (included in paper based discretionary grant package)	<b>As Required</b>	Paper submission	SPED Regional Representative	402-471-2471
<b>As Required</b>	<b>As Required</b>	GMS	Statement of Assurance for a Free Appropriate Public Education (included within Special Education IDEA consolidated Application)	<b>As Required</b>	GMS	SPED Regional Representative	402-471-2471
<b>September</b>							
<b>30</b>	9/1	06-016	Special Education Final Financial Claim For Transportation	2/28	Paper submission	Shane Rhian, Financial Services	402-471-4314
<b>October</b>							
<b>1</b>	9/1	06-025	Special Education Final Financial Report for Children with Disabilities, Birth to Age Five	NA	Paper submission	Greg Prochazka, SPED	402-471-4314
<b>15</b>	10/1	NSSRS	Special Education October Child Count Snapshot (Birth through age 21)	10/31	NDE Portal	Pam Kasl, SPED	402-471-4341
<b>29</b>	8/1	TS GOLD	Results Matter GOLD Fall checkpoint for all children B-5 served by district (including SPED children) Exception: not required for children B-3 with IFSP's in home-based settings only	10/29	TS GOLD Online	Teresa Berube, SPED	402-471-4319
<b>31</b>	9/1	06-008	Special Education & Support Services Final Financial Report for School Age, ages 5-21	6/15	Consolidated Data Collection, NDE portal	Greg Prochazka, SPED	402-471-4314

Date Due:	Opens:	NDE Form Number:	Data Collection Title:	Review Window Ends:	Collection Location:	Contact Person:	Contact Information:
31	9/1	ILCD	Part B Indicator 11: Appropriate, Timely Assessments & Evaluations (collected only in monitoring years)	NA	ILCD website	Rita Hammitt, SPED	402-595-2092
31	9/1	ILCD	Part B Indicator 12: Children transitioning from Part C, delayed evaluation or initial services caused by parental refusal to provide consent	11/15	ILCD website	John Marcucci, SPED	402-595-1639
<b>November</b>							
15	Sept.	None	MOE Eligibility (based on budget)	None	NDE Portal	Pete Biaggio, SPED	402-471-4308
<b>February</b>							
1	1/1	06-015	Special Education Claim Form for Transportation Expenses of Children with Disabilities, 1 <sup>st</sup> Semester	3/1	Paper submission	Greg Prochazka, SPED	402-471-4314
14	10/30	TS GOLD	Results Matter GOLD Winter checkpoint for all children B-5 served by district (including SPED children) Exception: not required for children B-3 with IFSP's in home-based settings only	2/14	TS GOLD Online	Teresa Berube, SPED	402-471-4319
<b>April</b>							
30	4/1	06-094	Part B Indicator 14: Post-School Outcomes, Student Contact Information	5/15	NDE Portal	Rita Hammitt, SPED	402-595-2092
<b>May</b>							
20	4/6	None	IDEA MOE Compliance Standard (based on actual costs)	None	Consolidated Data Collection, NDE portal	Pete Biaggio, SPED	402-471-4308

Date Due:	Opens:	NDE Form Number:	Data Collection Title:	Review Window Ends:	Collection Location:	Contact Person:	Contact Information:
31	2/15	TS GOLD	Results Matter GOLD Spring checkpoint for all children B-5 served by district (including SPED children) Exception: not required for children B-3 with IFSP's in home-based settings only	5/31	TS GOLD Online	Teresa Berube, SPED	402-471-4319
<b>June</b>							
15	6/1	TS GOLD	Part B Indicator 7/Part C Indicator 3, Child Outcomes: 2013-14 GOLD final OSEP exit reports for children with disabilities <ul style="list-style-type: none"> <li>• Preschool Special Education (3-5)</li> <li>• Early Intervention (Birth -3)</li> </ul>	7/15	TS GOLD Online	Teresa Berube, SPED	402-471-4319
16	5/1	06-020	Report of Children with Disabilities Unilaterally Removed to an Interim Alternative Setting, or Suspended or Expelled	6/30	NDE Portal	John Marcucci, SPED	402-595-1639
16	6/1	NSSRS	NSSRS Special Education June Child Count Snapshot (Birth through age 21)	6/30	NSSRS	Pam Kasl, SPED	402-471-4341
<b>July</b>							
31	TBD	NDE Portal	Proportionate Share Worksheet for Nonpublic Schools	TBD	Consolidated Data Collection, NDE portal	Pete Biaggio, SPED	402-471-4308

**CEIS:** Coordinated Early Intervening Services

**ILCD:** Improving Learning for Children with Disabilities

**NDE:** Nebraska Department of Education

**SPED:** Special Education

**EP:** Enrollment Poverty

**MOE:** Maintenance of Effort

**NSSRS:** Nebraska Student & Staff Reporting System

**TBD:** To be Determined

**GMS:** Grants Management System

**NA:** Not Applicable

## **Appendix D:**

### **Part B District Determinations**

#### **“Rules of the Road”**



## Rules of the Road District Determinations – Part B

*The following steps are completed automatically via the website.*

1. The **Part B Performance Reports** for the previous and current years are used to complete the district determinations.
2. If the district's performance meets or exceeds the state target for an indicator, one point is awarded.
3. A district may earn one point for a target **if**:
  - ⚠ The performance demonstrated improvement from the previous year; or
  - The performance was maintained from the previous year.
4. For a **COMPLIANCE** indicator (9, 10, 11, 12, 13 and 15) that does not meet the target, the district may score one point **if**:
  - ⚠ the compliance rate exceeds 75% and stays the same or improves from 2007-08 to 2008-09, **and**
  - ⚠ the correction of noncompliance within the indicator occurred in one



The Performance Report accounts for 37 points!

## Special Education Timely/Accurate Data Reporting

1. **Timely:** Data must be received by NDE **on or before the due date**. One point is awarded for all Timely data reporting.
2. **Accurate:** Data must pass **all** edit checks, i.e., all errors must be corrected **on or before the due date**. One point is awarded for accurate data reporting.



Data Collections account for a maximum of **2** points!

## Special Education Financial Reports

1. **Timely:** Reports must be received by NDE **on or before the due date**. One point is awarded for all financial reports.
2. **Significant Audit Finding:** All reports are also reviewed for significant audit findings. The review of school district financial data is based on the most recent year of complete data. Additionally, the following criteria are used when determining a significant audit finding:
  - Audit finding exceeds +/-10% of total special education expenditures reported; and/or
  - Major audit finding exceptions (claiming costs that are not allowable).



Financial Reports account for a maximum of **2** points!

In Summary: The total number of points possible for the District Determinations 2016:

37 possible points from the Performance Report

2 possible points for timely and accurate data

2 possible points for financial data with no significant audit findings

**41 possible points**

The District Determination Worksheet Summary 2016, on the ILCD website, will automatically calculate the overall district percentage. The district's level of determination will also be provided. The level of determination is based on the district's overall percentage.

The levels of determination include:

- Meets Requirements (100% to 70%)
- Needs Assistance (69% to 50%)
- Needs Intervention (49% to 31%)
- Needs Substantial Intervention (30% and below)