

*NDE SPECIAL EDUCATION  
PART B FOCUSED  
(DIFFERENTIATED)  
MONITORING PROCESS*

*A Guide for Implementing Monitoring Activities  
in Support of Program Improvement*

*2016 – 2017*

*Completed August 30, 2016*



*School District Monitoring  
Protocol*

## **Introduction**

Improving educational results for children with disabilities requires a continued focus on the full implementation of IDEA to ensure that each child's educational placement and services are determined on an individual basis, according to the unique needs of each child, and are provided in the least restrictive environment. Focused monitoring provides an opportunity for the district to link the findings from the monitoring activities to support the implementation of a targeted improvement plan.

## **Overview**

The federal regulations require states to monitor the implementation of IDEA. The primary focus of the state's monitoring must be on:

**Ensuring that school districts in the state meet the requirements of the Individuals with Disabilities Education Act (IDEA), with particular emphasis on those requirements that are most closely related to improving educational results for children with disabilities.**

The IDEA has established monitoring priority areas. The Nebraska Department of Education (NDE), Office of Special Education is required to conduct monitoring activities through the use of a five (5) year cycle. Monitoring will be conducted following the 5 year cycle, focusing on the following priority areas:

1. Provision of a free appropriate public education (FAPE).
  - a. IEP Process
  - b. LRE – Settings
  - c. Transition
  - d. Discipline
2. Eligibility Determination
3. Procedural Safeguards
4. General Supervision.

## **Principles of Monitoring**

1. Ensure compliance with the IDEA and 92 NAC 51.
2. Focus on the uniqueness of the individual district.
3. Support the linkages between compliance and improvement (RDA).

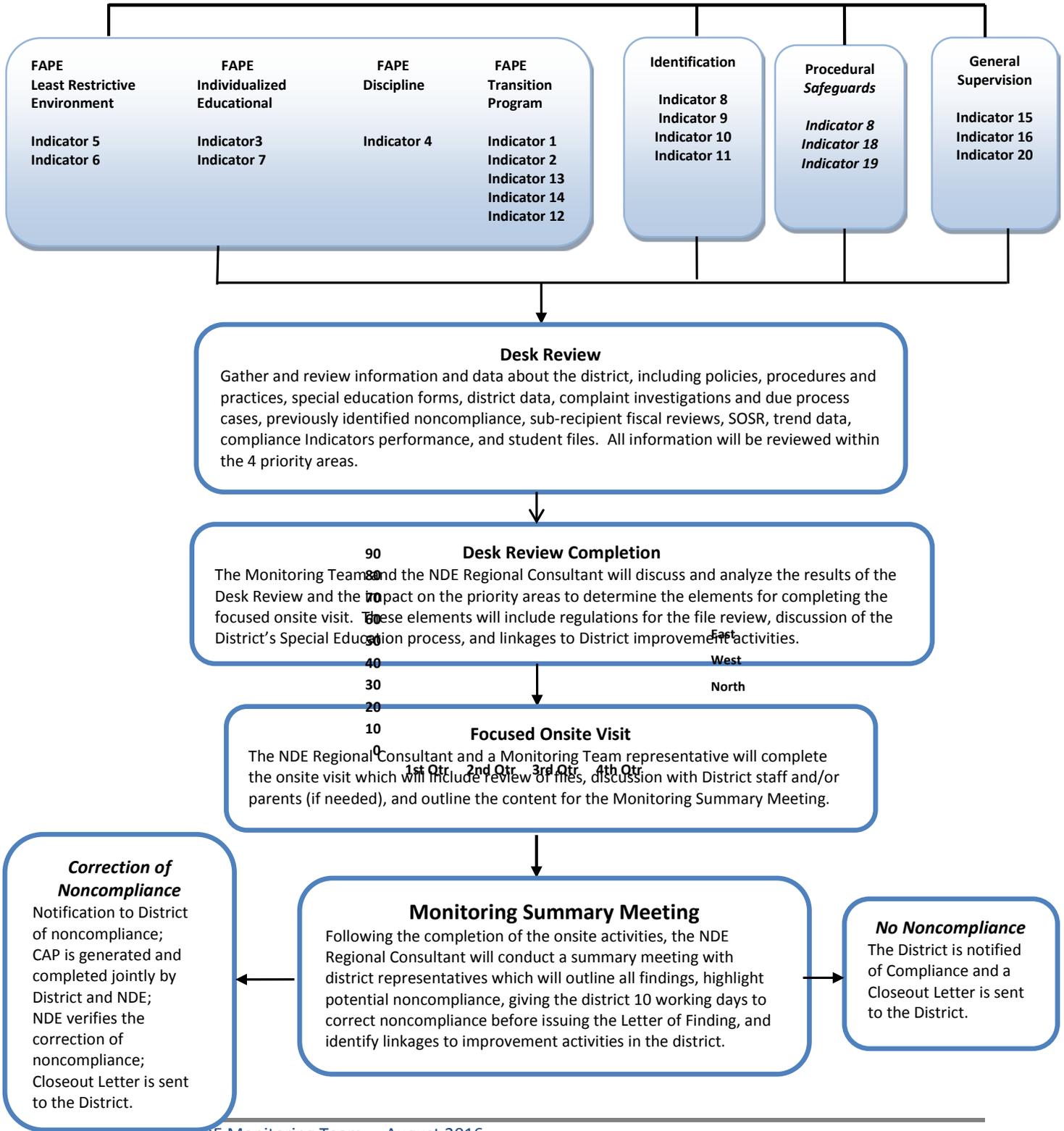
## **Monitoring Outcomes**

1. Compliance with the IDEA and 92 NAC 51.
2. Individualized district response to compliance and implementation of 92 NAC 51.
3. Collect data to support compliance and link to improvement.

## Focused (Differentiated) Monitoring

The framework for Focused (Differentiated) Monitoring is composed of two (2) components, the **Desk Review** and the **Focused Onsite Visit**. The Desk review is completed by the NDE Monitoring Team and the NDE Regional Consultant. The Onsite Visit is completed at the School District, and participants include the NDE Regional Consultant, the designated NDE Monitoring Team representative and District staff.

### Priority Areas: FAPE, Identification, Procedural Safeguards, and General Supervision



## Focused Monitoring Process Timetable

<b>Monitoring Year Planning Steps PART B</b>	<b>NDE Persons Responsible</b>	<b>Timeline</b>
<p><b>Step 1 - Notification of Special Education Monitoring Notification of Special Education Monitoring Activities Letter</b></p> <p>A letter of notification will be sent to the district in May of the previous school year, to alert the district that monitoring activities will be completed during the upcoming school year. Letter is sent to the district Superintendent and Director of Special Education. The letter is sent by the Monitoring Team Leader and the district's NDE Regional Consultant.</p>	<p>Monitoring Team Leader NDE Regional Consultant</p>	<p><b>May</b></p>
<p><b>Step 2 – Desk Review</b></p> <p>The District's NDE Regional Consultant will ask the District to send a limited number of student files for review as part of the NDE Desk Review. The District may also provide access to its electronic system (SRS, Infinite Campus, etc.) so that files can be reviewed during the completion of the Desk Review, without a paper format. This will be decided between NDE and the individual District.</p> <p>The NDE Monitoring Team and the District's NDE Regional Consultant will conduct the Desk Review.</p>	<p>Monitoring Team NDE Regional Consultant</p>	<p><b>August Forward</b></p>
<p><b>Step 3 - Planning the Focused Onsite Visit</b></p> <p>The District's NDE Regional Consultant and the District will set the date for the Focused Onsite Visit. The District's NDE Regional Consultant and a designated member of the NDE Monitoring Team will be in attendance at the onsite visit.</p> <p>At the conclusion of the Desk Review, the Monitoring Team and the District's NDE Regional Consultant will develop a preliminary agenda for the onsite visit, which includes the regulations to be reviewed and any elements of the special education process to be discussed with the district. The NDE Regional Consultant will send a written notification and confirmation of the Focused Onsite Visit to the district.</p>	<p>NDE Regional Consultant</p>	<p><b>After Desk Review is scheduled, and within 60 days of the district's Desk Review.</b></p>
<p><b>Step 4 - Focused Onsite Visit</b></p> <ul style="list-style-type: none"> <li>• Review of additional files, if necessary, and</li> <li>• Conducting interviews with selected administration, staff and parents (if necessary)</li> </ul> <p>* If there is missing documentation of regulations, procedures or practices reviewed during the onsite visit, the district will be given <b>10 working days</b> to provide the documentation of implementation of the regulation, procedure or practice.</p>	<p>NDE Regional Consultant, and Designated Monitoring Team Member</p>	<p><b>Within 60 days of completion of desk review</b></p>
<p><b>Step 5 - Monitoring Summary Meeting</b></p> <p>Meet with district representatives to review all findings.</p> <p><b>*If there is no noncompliance identified the NDE Regional Consultant may finalize the file review at that time, and the Letter of Findings will be electronically issued to the District.</b></p> <p>The NDE Regional Consultant leads a discussion of possible linkages to the District's Targeted Improvement Plan (TIP).</p>	<p>NDE Regional Consultant</p>	<p><b>Occurs the day of the Onsite Visit</b></p>

Monitoring Year Planning Steps PART B	NDE Persons Responsible	Timeline
<b>Step 6 - Correction of Noncompliance (CAP) and Verification of Correction of Noncompliance</b> Follow the process as outlined in the Protocol and documented on the ILCD website, including the verification of correction of noncompliance.	NDE Regional Consultant	Timelines as outlined in the Protocol and documented on the ILCD website.
<b>Step 7 - Closeout Letter</b> This letter could be sent as early as the day of the onsite visit, if the district is in compliance, and as late as 1 year following the onsite visit, if a CAP is required.	NDE Regional Consultant	Sent to district when the CAP is completed or following the Onsite visit if there is no CAP.

## Differentiated Focused Monitoring

### Results Driven Monitoring

- NDE Desk Review/Focused Onsite Visit
- Differentiated (Focused) – Rule 51 and District Special Education Policy, Procedures and Practices
- Desk Review of Rule 51 regulations and procedures and practices
- Limited Number of Regulations Reviewed at Focused Onsite Visit
- Minimal Number of Files Reviewed during Desk Review and Focused Onsite Visit
- Determination of Compliance
- Explore and Identify Linkages to the District’s Targeted Improvement Plan (TIP)

### Desk Review

The desk review is performed to gather information about the district, to evaluate the content of the data, and to develop a profile of the districts strengths and weaknesses surrounding the implementation of Rule 51 and the impact on the monitoring priority areas.

### Focused Onsite Visit

Verify the implementation of the special education rules and regulations (Rule 51) through monitoring specific regulations and indicators to identify the **root** cause for any noncompliance, or unmet targets identified. Selects specific regulations based on areas of noncompliance identified through file reviews, complaints or due process, evaluating the procedures and practices followed for implementation.

### Focused Onsite Summary Meeting

The NDE Regional Consultant will lead the discussion on the outcomes from the Desk Review and the Onsite Visit. The file review results will be finalized by the NDE Regional Consultant, and linkages to improvement identified.

If there is missing documentation of regulations, procedures or practices reviewed during the onsite visit, the district will be given 10 working days to provide the documentation of implementation of the regulation, procedure or practice. Following the 10 working days period,

the onsite visit will be finalized, and this will generate either a **Closeout Letter** of the monitoring process or a **Letter of Findings** of instances of noncompliance.

### **Correction and Verification of Correction of Noncompliance**

Pursuant to 92 NAC 51-004.14D, all noncompliance must be corrected as soon as possible, and in no case later than one year from the date on which the district is notified of a finding of noncompliance. All activities associated with the correction and verification of correction of noncompliance will be completed by the NDE Regional Consultant and the District.

### **Technical Assistance**

Technical assistance regarding the implementation of Rule 51 is available from your NDE Special Education Regional Consultant, upon request.

### **Closeout Letter**

Closeout Letters can be issued at two different times:

1. Immediately following the Focused Onsite Visit if there are no findings of noncompliance and the district appears to be in compliance with Rule 51, or
2. Following the completion of the Corrective Action Plan (CAP) and the Verification of Correction of Noncompliance by NDE.

Each letter will document the closeout of the monitoring process, but will also include the appropriate elements that document the process.

### **Documentation of Monitoring Activities and Process**

The Portal ILCD Website is currently going through major revisions. Therefore during the 2016-2017 Monitoring Year, all communications with the districts on monitoring activities will be documented in a Google Docs folder. The data gathered from the desk review, the onsite visit, and completion of CAP activities, if needed, will be documented in the district's Monitoring Activities Folder, and then uploaded onto the District's secure ILCD website.

## Step 1 - Notification of Special Education Monitor

DATE: May, 2016  
TO: XXXXXXX PUBLIC SCHOOLS  
XXXXXXX, Superintendent  
XXXXXXX, Sped Director  
FROM: Jeanne Heaston, Monitoring Team Leader  
XXXXXXX, NDE Regional Consultant

The Nebraska Department of Education is required by the Individuals with Disabilities Education Act (IDEA) to ensure local districts are fully implementing the requirements of Rule 51 - Regulations and Standards for Special Education Programs, title 92, Nebraska Administrative Code, Chapter 51 (92 NAC 51). The Nebraska Department of Education, Office of Special Education, conducts monitoring activities through the use of a five (5) year cycle. Your district has completed the 5<sup>th</sup> year of the 5 Year Monitoring Cycle, and will be reviewed during the 2016-2017 school year.

The Differentiated Monitoring Process is completed through a Desk Review and a Focused Onsite Visit, and based on the monitoring principles of ensuring compliance with the IDEA and 92 NAC 51; focusing on the uniqueness of each district and building linkages to student growth and improvement. Your NDE Regional Consultant will continue to be your immediate contact in this process.

### **The Monitoring Priority Areas are:**

1. Provision of a free appropriate public education (FAPE) in the areas of: Least Restrictive Environment (LRE); Individualized Education Plan (IEP); Discipline and Transition;
2. Eligibility determination including the identification, evaluation and verification of children and youth with disabilities, including the disproportionate representation;
3. Procedural Safeguards; and
4. General Supervision.

### **Districts Responsibilities:** The District will

1. Provide data, from the previous school year, on the district's ability to meet the target of 100% for compliance indicator Part B SPP Indicator 11 – Completion of the initial evaluation in 45 school days. The upload site will be open from August 1 to August 31. A letter with detailed instruction will be sent to your office in June.
2. Provide hard copies of special education student files, or electronic access to special education student files, for both the Desk Review and the Focused Onsite Visit.
3. Ensure that information and data for Early Childhood Special Education (ECSE) is available in paper form, or electronically, for review for both the Desk Review and the Focused Onsite Visit.

4. Work with the NDE Regional Consultant to set up the Focused Onsite Visit, this will include: provide onsite logistics, provide hard copies of student files, or electronic access, determine District staff participation and share any information or questions from NDE with appropriate District staff.

**NDE Responsibilities:** NDE Regional Consultant will

1. Contact the District to identify student files for both the Desk Review and the Focused Onsite Visit.
2. Contact the District to set the date for the Focused Onsite Visit, review the content of the visit, and answer questions.
3. Conduct the Onsite Visit, review student files, discuss district procedures and practices, determine compliance and explore linkages to student growth and improvement.

If you have any questions, please contact your NDE Regional Consultant.

## **Step 2 – Desk Review**

The NDE Regional Consultant will contact the District to request a limited number of student files for review as part of the NDE Desk Review. The District may:

1. Provide the paper version of the student files, or
2. Provide limited access to their electronic student system (SRS, Infinite Campus, etc.).

This decision will be made by the NDE Regional Consultant and the individual District.

The files will be reviewed during completion of the Desk Review by the Monitoring Team and the Regional Consultant. The Desk Reviews are completed in-house at NDE.

### **The following items are part of the Desk Review:**

#### **Forms Review**

To determine whether the district has in place practices which are likely to result in full implementation of the special education regulations, NDE will review the school district forms for documenting and implementing IDEA and Rule 51 regulations.

#### **Policies Procedures and Practices**

School Districts are required to have policies, procedures and practices which are consistent with the requirements of the IDEA and Rule 51. Annually, districts must submit a checklist indicating whether they have policies, procedures and practices in place to fully implement the requirements of the IDEA and Rule 51. Additionally, districts are required to have on file with the Nebraska Department of Education, their most current policies and procedures.

#### **Complaint Investigations and Due Process Cases**

Complaints and due process hearings filed within the previous five (5) years, with instances of noncompliance identified and corrected through either of these processes must be included in the student file review to ensure that corrections continue to be in place.

#### **Correction of Previously Identified Noncompliance**

As part of the Desk Review, the NDE Special Education Regional Consultant will review the letter of findings from the previous on-site visit conducted in the district. The Regional Consultant will note any finding of noncompliance and the corrective actions taken by the district to ensure correction. A review of the standards which were the basis for the previous finding of noncompliance will be included in the on-site file review conducted in the district.

#### **Previous fiscal reviews or sub-recipient fiscal reviews**

Fiscal reviews or sub-recipient fiscal reviews conducted during the previous five years will be reviewed to determine whether it is necessary to review specific standards during the on-site visit. If a fiscal review or sub-recipient review resulted in a finding of noncompliance, the standard which was the basis for that finding must be reviewed during the on-site visit.

**Data: Performance Report, State of the Schools Report (SOSR), Trend Data**  
All sources of data will be reviewed, looking over the previous five (5) years. Significant elements or results will be discussed and an analysis of the impact on the priority areas of monitoring.

### Review of District Files

The NDE Monitoring Team will select a number of student files to be reviewed during the desk review. The size of the district, the number of buildings within in the district will have an impact on the number of files reviewed during the desk review. During the desk review a general review of the student files will be completed which may include all of the priority area regulations. This will be determined from a review of previous student file review information, complaints, due processes, parent concerns not directly related to a complaint, but required as a follow up by the NDE Regional Consultant.

#### Priority Area 1: Free Appropriate Public Education (FAPE)

- Provision of FAPE
- Service Settings (Placement)
- Discipline Procedures
- Transition Procedures

#### Priority Area 2: Evaluation and Identification

#### Priority Area 3: Procedural Safeguards

#### Priority Area 4: General Supervision Procedures

### Step 3 - Planning the Focused Onsite Visit

At the conclusion of the Desk Review, the Monitoring Team and the District's NDE Regional Consultant will analyze the data, and develop a preliminary agenda for the onsite visit, which includes the regulations to be reviewed and the number of files to be reviewed. Elements of the district's special education process that may need some clarification will be outlined.

The District's NDE Regional Consultant will contact the District to confirm the date of the onsite visit and review the contents of the visit. A letter will be sent to the district outlining all of the information about the visit.

Month, Date, Year

Superintendent  
Director of Special Education Services

This is to confirm that the Special Education Monitoring Onsite Visit for XXXXXXXX Public Schools is scheduled for **Thursday, Date, at 1:00 p.m.**

On **Month Day, Year**, a **Desk Review** was conducted by the NDE Monitoring Team and your Regional Consultant. The results of that review identified a need to conduct an onsite student file review on the implementation of specific regulations from Rule 51 and the implementation of specific procedures and practices.

NDE will select the student files to be reviewed onsite, and the list of files will be shared with the district prior to the onsite visit. Student files must be provided either in hard copy form, or NDE is allowed access to the District's electronic student information system.

Based on the Desk Review, the following regulations and/or procedures will be reviewed during the on-site visit. The onsite visit is completed in two (2) parts.

#### **Part 1: Student File Review**

NDE staff will review student files to determine the compliance status of the following regulations:

##### **SPP Part B Indicator 13: Post Secondary Goals 007.03A10a**

If the purpose of the meeting is to consider postsecondary goals and transition services, the school district or approved cooperative must invite the child;

### **007.03A10b**

To the extent appropriate, with parental informed consent, the district or approved cooperative must invite a representative of any participating agency that is likely to be responsible for the provision of transition services.

### **007.07A9**

Beginning no later than the first IEP to be in effect when the child turns 16, or younger, updated annually.

**007.07A9a** - Appropriate measurable postsecondary goal(s) based on appropriate transition assessments

**007.07A9b** – The transition services (including courses of study) needed to meet the goal(s)

### **007.07A2**

A statement of annual goals.

## Summary of Performance

### **006.06E**

A school district or approved cooperative shall evaluate a child with a disability in accordance with this section before determining that the child is no longer a child with a disability.

**006.06E1** - The evaluation described in 92 NAC 51-006.06E is not required before the termination of a student's eligibility under this Chapter due to graduation from secondary school with a regular high school diploma, or to exceeding the age eligibility for a free appropriate public education under Neb. Rev. Stat. §79-1126. For a child whose eligibility terminates under these circumstances, a school district or approved cooperative shall provide the child with a summary of the child's academic achievement and functional performance, which shall include recommendations on how to assist the child in meeting the child's postsecondary goals.

## Accommodations

### **007.07A5**

A statement of the special education and related services and supplementary aids and services based on peer-reviewed research to the extent practicable, to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided to enable the child:

**007.07A5a** - To advance appropriately toward attaining the annual goals;

**007.07A5b** - To be involved in and progress in the general education curriculum and to participate in extracurricular and other nonacademic activities; and

**007.07A5c** - To be educated and participate with other children with disabilities and nondisabled children in the activities described in 92 NAC 51-007.07A5;

### **007.07A7**

A statement of any individual appropriate accommodations that are necessary to measure the academic achievement and functional performance of the child on state and district-wide assessments; and if the IEP team determines that the child must take an alternate assessment instead of a particular regular state or district-wide assessment of student achievement, a statement of why:

**007.07A7a** - The child cannot participate in the regular assessment; and

**007.07A7b** - The particular alternate assessment selected is appropriate for the child.

### **Other identified regulations specific to the district:**

The regulations will be listed here: Example:

009.05 Prior Written Notice

009.05B1 – A description of the action proposed or refused by the school district or approved cooperative

### **Discussion of Procedures and Practices**

NDE staff and District staff will meet to:

- Discuss special education procedures and practices identified in the Desk Review.

## **Part 2: Findings**

Following the review of files and the discussion of district procedures and practices, the NDE Regional Consultant will recap the findings from the File Review. The findings will illicit one of the following actions:

1. If there is missing documentation of the regulations, procedures or practices reviewed during the onsite visit, the district will be given 10 working days to provide the documentation of implementation.
2. If there is noncompliance identified during the review of the regulations, procedures and practices, a Corrective Action Plan (CAP) must be developed and completed within one (1) year of the notification of noncompliance.
3. If there is no noncompliance identified during the review of the regulations, procedures and practices, the Focused Onsite Visit will be finalized, and a Monitoring Closeout Letter will be issued to the school district or approved cooperative, closing the monitoring activities for that year.

The NDE Regional Consultant will also lead a discussion of the district's plans for improving outcomes for children with disabilities and the present status of the District's Targeted Improvement Plan.

## **Step 4 - Focused Onsite Visit**

Review the Agenda for the visit: Usually visits will have these components

**Introductions**

**Review of Files**

**Discussion of Results from the Desk review and onsite review**

**CAP discussion**

**Program Improvement**

**Celebrating Successes**

**Questions**

The NDE Regional Consultant and the designated NDE Monitoring Team representative review additional student files, if needed, focusing on the regulations identified through the desk review. This will include data for Indicator SPP B-13. The student file review data will be entered onto a score sheet and submitted for review during the Summary Meeting.

- The student file review results will be recorded and saved.
- The NDE Regional Consultant and the District personnel will discuss other identified special education process issues.

### **Ten (10) Working Days**

If there is missing documentation of regulations, procedures or practices reviewed during the onsite visit, the district will be given 10 working days to provide the documentation of implementation of the regulation, procedure or practice. Following the 10 working days period, the onsite visit will be finalized, and this will generate either a **Closeout Letter** of the monitoring process or a **Letter of Findings** of instances of noncompliance.

## Step 5 – Monitoring Summary Meeting

The NDE Regional Consultant will lead the Summary Meeting. Those participating in the meeting will be determined by the NDE Regional Consultant and district staff.

- The NDE Regional Consultant will report to the district the findings of the student file review, interviews and desk review. Pursuant to 92 NAC 51-004.14D, all noncompliance must be corrected as soon as possible, and in no case later than one year from the date on which the district is notified of a finding of noncompliance. All activities associated with the correction and verification of correction of noncompliance will be completed by the NDE Regional Consultant and the District.
- Districts will have an opportunity to discuss the findings,. The meeting will provide an opportunity for the district to link the findings of the monitoring visit to the development and implementation of a targeted improvement plan.

### Monitoring Summary Meeting (Example)

#### Discussion of Results from the Desk review and onsite review

#### CAP discussion

#### Program Improvement

#### Celebrating Successes

#### Questions

If there is **no noncompliance** identified, the NDE Regional Consultant will finalize the Focused Onsite Visit, and will proceed to Step 7, closing the Monitoring Process.

## Step 6 - Correction and Verification of Correction of Noncompliance

Pursuant to 92 NAC 51-004.14D, all noncompliance must be corrected as soon as possible, and in no case later than one year from the date on which the district is notified of a finding of noncompliance. All activities associated with the correction and verification of correction of noncompliance will be completed by the NDE Regional Consultant and the District. A Letter of Findings will be sent to the District, when the Focused Onsite Visit is finalized, no later than 10 working days of the date of the onsite visit.

### ***Notification of Noncompliance***

A Focused Onsite Visit was held on,     Date     finalized on     Date    , and the Letter of Findings issued on     Date    . The corrective action plan must be completed within nine (9) months of the issuance of the letter of finding.

Pursuant to 92 NAC 51-004.14D, all noncompliance must be corrected as soon as possible, and in no case later than one year from the date of this Notification of Noncompliance. In order to demonstrate correction of the noncompliance, the district is required to:

1. Determine the root cause of the noncompliance;
2. Submit a corrective action plan outlining the steps the district will take to correct all instances of noncompliance; and
3. If necessary, revise the district policy related to the noncompliance and review and revise the district procedures that contributed to the noncompliance to ensure the noncompliance does not recur.
4. For any noncompliance concerning a child-specific requirement that is not subject to a specific timeline requirement, the district must correct the individual case of noncompliance, unless the child is no longer in the jurisdiction of the district. Similarly, for any noncompliance concerning a child specific timeline requirement, the district must complete the required action, although late, unless the child is no longer within the jurisdiction of the school district.

The corrective action plan (CAP) must be completed within nine (9) months of the issuance of the letter of finding.

The following regulations were found to be out of compliance:

- Student ID
  - 007.09C
- Student ID
  - 007.07A6
- Student ID
  - 006.03F2e
- Student ID
  - 007.07B3

The CAP, (see attached), must be developed and submitted to this Office within **45 days** of receipt of this Letter of Findings. Prior to implementation of the corrective action plan, it must be approved by this Office. Following approval and implementation, the district must provide NDE with documentation of the effectiveness of the plan in correcting all identified noncompliance, outlining the steps in completing the correction and documentation of the impact. The CAP must be implemented, completed and submitted for verification of correction of noncompliance by NDE, within **9 months** of the issuance of the Letter of Findings.

Following notification from the school district that their CAP has been completed, the NDE's Regional Consultant will conduct follow up activities to document and verify that all noncompliance has been corrected within one year of the date of issuance of the letter of finding. This verification process will be completed within **90 days** of receipt of the notification from the district.

If you have any questions, please contact me.

Regional Consultant's Name

Email

Telephone Number

## **Corrective Action Plan (CAP) Work Flow**

The NDE Regional Consultant will contact the school district to discuss the corrective action plan, review the noncompliance identified during the file review, and assist the school district in developing the corrective action plan. **The overall CAP process, which includes verification by NDE that noncompliance has been corrected must be completed within 9 months from that date of notification of noncompliance.**

Throughout the corrective action process, interaction between the school district and the NDE Regional Consultant will be documented to ensure that the corrective action process is completed within the timeline. Documentation will be maintained regarding each step of the corrective action process (i.e. when the plan is submitted for approval; when the plan is approved by NDE; when the plan is completed; etc.).

The CAP must include each of the regulations found to be out of compliance in individual files. For each regulation found to be in noncompliance, the corrective action plan must contain the actions which will be taken by the district to ensure full implementation of the regulation in the future, the timelines and persons responsible for taking the actions, and the manner in which the effectiveness of the corrective actions will be evaluated.

### **NDE Review and Approval of the Corrective Action Plan**

When the district has developed the CAP, it will be submitted to the District's NDE Regional Consultant for review and approval. The NDE reviewer may either "Approve" or "Disapprove" the corrective action plan. If the corrective action plan is approved, the district is notified and may proceed with the implementation of the corrective action plan. If the corrective action plan is disapproved, the district will need to revise the CAP, and resubmit.

### **Implementation of the Corrective Action Plan**

The NDE Regional Consultant is prepared to assist the district with the implementation of the corrective action plan. Assistance may include:

- Providing training to the district staff;
- Providing materials for trainings;
- Contacting a possible consultant/presenter;
- Reviewing proposed revisions to policy, procedures and practices;
- Assisting the district in developing or revising their forms.

### **NDE Review and Approval of the Completed Corrective Action Plan**

When the district has completed all of the corrective activities outlined in the CAP, it will be submitted to the District's NDE Regional Consultant for review and approval. The NDE reviewer may either "Approve" or "Disapprove" the completed CAP activities. If there is sufficient documentation of correction of noncompliance, the completed CAP is submitted and approved. If there is not sufficient documentation of correction of noncompliance, the completed CAP is

disapproved, and the district will need to revise the documentation of correction of noncompliance, and resubmit.

### **Documentation and NDE Verification of Correction of Noncompliance**

NDE will take the following steps to determine that the noncompliance has been corrected. These are not exclusive steps, other steps may be added as needed, to document that the correction of noncompliance has been completed successfully.

- Review the documentation submitted by the district that the corrective action plan has been implemented (i.e. revised policies/procedures etc.).
- NDE will review the correction of the individual case of noncompliance, unless the child is no longer within the jurisdiction of the school district or approved cooperative.
- NDE will review whether the required action was completed, although late, unless the child is no longer within the jurisdiction of the school district or approved cooperative.
- Based on a review of updated data from subsequent review or data collection, NDE will determine whether the school district is now correctly implementing the specific regulatory requirement.

The Completion Date for the **corrective action activities is not to exceed nine (9) months after the notification of noncompliance.**

## **Step 7 - Closing the Monitoring Process**

The Closeout Letter will be completed by NDE Regional Consultant following the completion of all monitoring activities. This Closeout Letter is a clear statement by NDE that the district is in compliance or has completed the CAP successfully and the district is now in full compliance with IDEA Regulations and 92 NAC 51 (Nebraska Rule 51). The closeout letter will include language that all steps of the monitoring process have been completed and the linkages to improvement have been identified and documented for district use. Whatever methods have been used, the information shared throughout the monitoring process must be documented in the NDE monitoring report.