Texas Education Agency

SPECIAL EDUCATION
CYCLICAL MONITORING REPORT

School Year (SY) 2021–2022

Cycle 3, Group 3

April–June

Queen City ISD (034907)

July 29, 2022

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SCHOOL YEAR (SY): 2021–2022
MONITORING PATH: Cyclical Monitoring
CYCLE: 3, **GROUP:** 3 (April–June)

REGION: 08
DISTRICT NAME: Queen City ISD (034907)
DISTRICT TYPE: Independent

SHARED SERVICE ARRANGEMENT (SSA) MEMBER: NA
FISCAL AGENT: NA

TEXAS VIRTUAL SCHOOL NETWORK CAMPUS: NA
RESIDENTIAL FACILITY (RF): Yes

MONITORING TYPE: Comprehensive Desk Review
SELF-REPORTED NONCOMPLIANCE: NA
COMPLIANCE STATUS: Noncompliant
ACTION REQUIRED: Corrective Action Plan (CAP)

STRATEGIC SUPPORT PLAN (SSP) DUE DATE: NA
CORRECTIVE ACTION PLAN (CAP) DUE DATE: August 29, 2022

DYSLEXIA STATUS: Meets Requirements
DYSLEXIA ACTION REQUIRED: NA
DYSLEXIA PERFORMANCE PLAN (DPP) DUE DATE: NA

INTRODUCTION

The Texas Education Agency (TEA) extends its appreciation to the parents, students, teachers, staff, and administration for their time and effort supporting the special education cyclical monitoring review at Queen City ISD (034907).

The special education cyclical monitoring report provides the local education agency (LEA) with findings from the comprehensive cyclical monitoring review and serves as official notification from the TEA that any findings of noncompliance will require corrective action. Noncompliance findings must be corrected no more than one year from the date of notification (for information on the required actions and timeframe for completion, see OSEP Memo 09-02).

The report has nine sections. The first six sections describe the cyclical monitoring activities and findings from the monitoring review and stakeholder feedback. The last two sections describe results from the dyslexia program evaluation, summary of required actions, if any, and contact information for questions or requesting report corrections.

OVERVIEW OF CYCLICAL MONITORING

TEA conducts a comprehensive cyclical monitoring review once every six years for each LEA. The balanced monitoring review supports positive student outcomes and ensures the LEA maintains compliance with the requirements and purposes of the Individuals with Disabilities Education Act (IDEA), per 34 CFR § 300.600 State Monitoring and Enforcement.

The comprehensive cyclical monitoring review includes different monitoring activities to evaluate the LEA's special education program and dyslexia program. Monitoring activities focus on seven state-identified priority areas and may include but are not limited to a policy review, desk review of student folders, onsite campus review, and stakeholder feedback:

- Child Find/Evaluation/FAPE
- IEP Development
- IEP Content
- IEP Implementation
- State Assessment
- Properly Constituted ARD
- Transition

The comprehensive cyclical monitoring review includes either a desk review or an onsite review (in addition to a desk review) based on the LEA's previous year's results driven accountability (RDA) determination level (DL). All LEAs in cyclical monitoring receive a desk review, but LEAs with a DL 3 (Needs Intervention) or DL 4 (Needs Substantial Intervention) receive an onsite review. For example, an LEA engaged in cyclical monitoring for the SY 2021–2022 and a 2020 RDA DL 4 from SY 2019–2020 would receive both a desk review and an on-site review.

Both targeted monitoring and intensive supports occur during the five interim years for LEAs with elevated DLs and significant disproportionality (SD Year 3).

COMPLIANCE REVIEW AND NONCOMPLIANCE FINDINGS

The compliance review section includes a summary of student compliance by priority area for the policy review and the desk review. The noncompliance findings section includes citations of noncompliance from the desk review, onsite review, and/or self-reported noncompliance.

Compliance Review

The compliance review includes both a policy review and desk review of student folders for seven priority areas. Table 1 shows the number of policy review questions and student folders reviewed (denominator), the number of policy review questions and student folders found compliant (numerator), and the overall compliance percentage for each priority area.

Table 1. Summary of the Policy Review and Desk Review by Priority Area

Priority Area	Policy Review	Desk Review
Child Find/Evaluation/FAPE	95% (18/19)	100% (23/23)

Priority Area	Policy Review	Desk Review
IEP Development	100% (5/5)	100% (23/23)
IEP Content	100% (3/3)	100% (23/23)
IEP Implementation	100% (21/21)	100% (23/23)
Properly Constituted ARD	100% (8/8)	100% (23/23)
State Assessment	100% (4/4)	100% (23/23)
Transition	83% (5/6)	100% (6/6)

Note. Noncompliant student folders had at least one finding of noncompliance for a priority area.

Noncompliance Findings

This report provides the required written notification for an LEA with a "Noncompliant" status in Table 2. The overall compliance status includes noncompliance findings from Tables 3 and 4 and self-reported noncompliance from APPENDIX I. Table 2 also shows the number of noncompliant citations that must be addressed in the corrective action plan (CAP).

Table 2. Overall Cyclical Monitoring Compliance Status

Compliance Status Overall	Number of Noncompliance to be Addressed *(shown in "Status" column of Tables 3 and 4 and Appendix I)*	Required Action Overall
Noncompliant	2	Corrective Action Plan (CAP)

The overall LEA compliance status includes noncompliance findings from the desk review, policy review, on-site review, and/or self-reported noncompliance identified by the LEA.

The following rules determine an LEA's overall compliance status:

- LEAs with at least one finding of noncompliance from the desk review, onsite review, policy review, or self-reported noncompliance are assigned an overall compliance status of "Noncompliant" and require a CAP.
- LEAs with no findings of noncompliance from the desk review, onsite review, policy review, or self-reported noncompliance but at least one pre-finding correction of noncompliance are assigned an overall compliance status of "Pre-finding Corrected" and have "No Action Required" (i.e., LEA does not require a CAP).
- LEAs with no findings of noncompliance or pre-finding correction from the desk review, onsite review, or self-reported noncompliance are assigned an overall compliance status of "Compliant" and have "No Action Required" (i.e., LEA does not require a CAP).

LEAs with an overall noncompliant status must submit a CAP within 30 calendar days of this report. The CAP must include all citations with a noncompliance finding. LEAs should access the CAP resources and submission requirements on the Review and Support TEA webpage.

LEAs must complete the required actions ***as soon as possible, but in no case later than one year from the date of this notification*** (see OSEP Memo 09-02). TEA determines if noncompliance has been addressed according to the following criteria:

- Prong 1 – Each individual case of noncompliance has been corrected
- Prong 2 – Regulatory requirements are implemented with 100% compliance

LEAs with pre-finding correction of noncompliance for a citation with two or fewer students (i.e., individual level) and verification of Prongs 1 and 2 before the issuance of this report do not require a CAP. However, LEAs with an individual level of noncompliance for a citation (i.e., two or fewer students) not corrected before the issuance of this report or LEAs with a systemic level of noncompliance (i.e., more than two students) require a CAP.

LEAs that do not complete their CAP or complete their CAP after the one-year timeframe from the date of this report will be assigned a status of "Continuing Noncompliance."

Table 3. Noncompliance Findings from the Desk Review

Area	Citation	Level	Status	Action
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA

Note. The "Area" column has seven possible values representing the state-identified priority areas. The "Citation" column contains unique citations of applicable laws and regulations. The "Level" column contains two possible values: Individual (two or fewer students) and Systemic (more than two students). The "Status" column contains two possible values: Noncompliant and Pre-findings Corrected. The "Action" column contains two possible values: Corrective Action Plan and No Action Required.

Table 4. Noncompliance Findings from the Policy Review

Area	Citation	Level	Status	Action
Evaluation	CF1 – TAC § 26.0081(c)	Systemic	Noncompliant	Corrective Action Plan
Transition	PR61 – 34 CFR § 300.124(b), and consistent with § 300.323(b)	Systemic	Noncompliant	Corrective Action Plan

Note. The "Area" column contains seven possible priority areas. The "Citation" column contains citations of applicable laws/regulations. The "Level" column contains one value: Systemic. The "Status" column contains one value: Noncompliant. The "Action" column contains one value: Corrective Action Plan.

DATA REVIEW

This section describes the data sources considered for the monitoring review, sampling information, residential facility (RF) information, and performance and compliance results.

Data Sources

Data from the following areas were considered for the cyclical monitoring review:

- AskTED District Identification Data
- Results Driven Accountability (RDA) Data
- Significant Disproportionality (SD) Data
- State Performance Plan (SPP) Data
- Desk Review Data
- On-site Review Data (if applicable)
- Policy Review Data
- Stakeholder Survey Data
- Residential Facility (RF) Summer PEIMS Data
- LEA Self-Reporting Noncompliance Data (if applicable)

Student Sampling and Campus Information

Comprehensive cyclical monitoring includes a desk review and, if applicable, an on-site review. The LEA's desk review sample size and on-site review sample size are shown in Table 5.

Table 5. Sample Sizes for the Desk Review and On-Site Review

Monitoring Type	Sample Size
Desk Review	23
On-Site Review	NA

Note. NA denotes on-site review not applicable to LEA.

The student folders included in the comprehensive desk review were selected using a stratified random sampling method consisting of two strata: elementary and secondary. Each stratum was composed of aggregate grade levels to ensure special education student representation from the 3 active campuses listed in AskTED (as of September 1, 2021). Student/campus samples from LEAs meeting the on-site review criteria were randomly selected from the desk review sample for an on-site monitoring review (see the DMS Guide to General Supervision and Monitoring, Appendix B: Special Education Sampling Methods).

Residential Facilities (RFs)

LEAs must ensure students with disabilities receiving special education are provided a "free appropriate public education" (FAPE) when attending and being educated at an RF located in their geographical boundary (see TAC §89.1115(d)(1)(i)). Queen City ISD (034907) had 1 RF based on the 2021 RF Tracker yearly data submission in the Texas Student Data System.

Results Driven Accountability (RDA), State Performance Plan Indicators (SPP), and Significant Disproportionality (SD)

LEAs are annually assigned special education DLs using four categories (see 34 CFR §300.603(b)(1)): Meets Requirements (DL 1), Needs Assistance (DL 2), Needs Intervention (DL 3), and Needs Substantial Intervention (DL 4). The DLs are based on results from both the RDA special education program area and the federally required elements (FREs). The FREs include but are not limited to compliance data from three SPP indicators: SPPI-11 (Timely Initial Evaluation), SPPI-12 (Early Childhood Transition), and SPPI-13 (Secondary Transition). The State also conducts annual SD Year 3 analyses, per 34 CFR §§300.646-647 (see Table 6).

Table 6. RDA, SPP, and SD Year 3 Results

Data Source	SY 2019–2020	SY 2020–2021	SY 2021–2022
RDA SPED DL	Meets Requirements (DL 1)	Meets Requirements (DL 1)	Meets Requirements (DL 1)
SPP 11 Status	Compliant (100%)	Compliant (100%)	Compliant (100%)
SPP 12 Status	Compliant (100%)	Compliant (100%)	Compliant (100%)
SPP 13 Status	Compliant (100%)	Compliant (100%)	Compliant (100%)
SD Year 3 Status	NA	NA	NA

Note. SY 2019–2020 DLs were called Performance Levels (PLs). NA denotes "Not Applicable."

SPP compliance indicators are assigned one of the following three statuses: (a) noncompliance (< 95%), (b) substantial compliance (>= 95% AND <= 99%), (c) and compliance (100%).

The LEA results are also published online in the results driven accountability (RDA) report and the District Profile of State Performance Plan Indicators Report.

STAKEHOLDER ANALYSIS AND RESULTS

TEA collected stakeholder data during the comprehensive cyclical monitoring review from family/guardians, special education providers, general education providers, and district/campus administration. The purpose of analyzing survey and interview data was to identify positive stakeholder sentiment related to three constructs:

- Understanding – This construct measures positive sentiment about knowledge of special education program requirements and LEA provisions of service.
- Engagement – This construct measures positive sentiment regarding engagement with special education and opportunities for involvement in special education training related.
- Competency in Implementation – This construct measures positive sentiment of perceived competency required for implementing special education program requirements.

Table 7 shows stakeholder results for each construct (i.e., understanding, engagement, competency) by role (i.e., family/guardians, special education providers, general education providers, district/campus administration). Stakeholder data were collected using a non-probabilistic sampling method and included respondents who self-identified their role and LEA when completing the online survey. Therefore, inferences and judgments from the stakeholder analysis should be approached with caution. The number of respondents refers to the number of unique respondents for a particular role. Roles with fewer than five respondents are masked. The percentages are the total number of positive responses out of all responses.

Table 7. Stakeholder Results by Role and Construct

Construct	Family/ Guardian	Special Education	General Education	Administration *(Campus and District)*
Number of Respondents	6	FR	8	FR
Understanding	90.63%	*	91.95%	*
Engagement	100.00%	*	79.17%	*
Competency	81.25%	*	94.67%	*

Note. "FR" (Too Few Respondents) denotes respondent ROLE counts <5 AND "*" denotes masked data for the corresponding percentage values. "**" denotes no data reported for LEA.

SUCCESSES

The following successes were identified from the monitoring review:

- SUCCESS: Systems for parent involvement are implemented well as evidenced by parent invitations and their attendance at admission, review and dismissal (ARD) committee meetings.
- SUCCESS: Systems for supporting student needs are implemented well as evidenced by local education agency (LEA) staff attendance and involvement in the admission, review and dismissal (ARD) committee meetings and the development of students' individual education programs (IEPs).
- SUCCESS: Exceptional record keeping is evidenced by student files, supporting documentation, and artifacts provided to agency staff in a timely, organized, and efficient manner.

TECHNICAL ASSISTANCE

The following technical assistance (TA) resources are recommended from the monitoring review (copy/paste URLs into web browser). If any of the following TA links do not work, please contact the Division of Review and Support.

- CHILD FIND AND EVALUATION – The Timelines and Assessment Log resource from the Child Find, Evaluation, and ARD Supports Network is a downloadable file that includes a special education referral timeline, a full and individual initial evaluation (FIIE) timeline, and an assessment log to track State Performance Plan Indicator (SPP) 11 and 12 data (see https://childfindtx.tea.texas.gov/initial_eval.html).
- IEP DEVELOPMENT – The TEA Guidance: Goals, Accommodations, and Modifications training video provides information on the sections of the IEP Development Guidebook pertaining to IEP goals, accommodations, and modifications (see https://www.youtube.com/watch?v=lSG25kaVT0Y&feature=youtu.be).
- TRANSITION – The Texas Transition: Centered Transitions Network (SCTN) website provides transition information for students with disabilities (see https://www.texastransition.org/).

DYSLEXIA PROGRAM EVALUATION

The Dyslexia Program Evaluation Rubric, aligned to Senate Bill 2075 of the 86th Legislature, TEC 38.003 (c-1), and 19 TAC Chapter 74.28, is utilized for determining program statuses shown in Tables 8 and 9. For any dyslexia area of implementation not meeting requirements, the LEA must complete a Dyslexia Performance Plan (DPP). The DPP guides LEAs through the continuous improvement process to address areas needing growth to positively impact students with dyslexia. LEAs should complete the DPP no later than 120 days after receiving notification of "Did Not Meet Requirements." The TEA will provide the DPP, or it can be accessed on the Department of Review and Support Dyslexia Program Evaluation webpage and can be uploaded to the ShareFile link supplied by the dyslexia specialist assigned to the LEA.

Table 8 shows the LEA's overall dyslexia program status (i.e., Meets Requirements, Pre-finding Corrected, or Did Not Meet Requirements), the number of areas evaluated that did not meet requirements, and associated required actions, if any. The overall dyslexia program status is based on findings from the seven dyslexia program areas shown in Table 9.

Table 8. Overall Dyslexia Program Status

Status	Number of Areas Not Meeting Requirements *(shown in Table 9)*	Required Action
Meets Requirements	0	NA

The overall LEA dyslexia program status is based on the following three rules:

- If at least one "Did Not Meet Requirements" for the seven dyslexia program areas evaluated, then the overall dyslexia status is "Did Not Meet Requirements".
- If no "Did Not Meet Requirements" but at least one "Pre-finding Corrected" for the seven dyslexia areas evaluated, then the overall dyslexia status is "Pre-finding Corrected".
- If "Meets Requirements" for all dyslexia program areas, then the overall dyslexia status is "Meets Requirements".

The dyslexia monitoring efforts focused on three-core elements:

- Early Intervention and Identification
- Program of Instruction
- Parent Notification

The status for each of the seven dyslexia program areas is shown in Table 9.

Table 9. Program Status for Dyslexia Area Implementation

Area	Legal Requirement	Status
Dyslexia Procedures	TEC §28.006; TEC §38.003; 19 TAC §74.28	Meets Requirements
Communication	19 TAC §74.28 (h),(l)	Meets Requirements

Area	Legal Requirement	Status
Screening	TEC §§28.006(g) and (g-2); TEC §38.003(a); TEC §21.054(b); 19 TAC §§74.28 (c),(d),(e),(f),(i),(m)	Meets Requirements
Reading Instruments	TEC §28.006(c); TEC §28.006(c-1); TEC §28.006(c-2); TEC §28.006(d)(2); TEC §28.006(g); TEC §28.006(g-1); TEC §28.006(g-2); 19 TAC §§74.28(d),(m),(j)	Meets Requirements
Evaluation and Identification	TEC §§28.006(g),(g-1); TEC §§38.003(a),(b),(b-1); 19 TAC §§74.28 (b),(c),(d),(e),(f),(i),(m)	Meets Requirements
Instruction	TEC §38.003(b); 19 TAC §74.28(a),(c),(e),(i)	Meets Requirements
Progress Monitoring	TEC §28.021(b); TEC §38.003; 19 TAC §97.1071	Meets Requirements

Identified Dyslexia Program Successes

The following successes were identified during dyslexia monitoring:

- INSTRUCTION – Extensive training and preparation for dyslexia specialists.
- PROGRESS MONITORING – Evidence of alignment in procedures and practice of progress monitoring and tracking of accommodations.

Dyslexia Program Areas of Need

The following areas of need were identified during dyslexia monitoring:

- NOT APPLICABLE (NA)
- NOT APPLICABLE (NA)

Dyslexia Resources

TEA recommends the following resources to support the LEA's dyslexia program:

- TEA Review and Support: Dyslexia Monitoring
- TEA Special Education: Dyslexia and Related Disorders
- Dyslexia: TEA Professional Learning Course: TEALearn Dyslexia Modules

SUMMARY OF REQUIRED ACTION

The required actions from the comprehensive cyclical monitoring review are shown in Table 10. More information about the support levels is in the DMS Guide to General Supervision and Monitoring: RDA Interventions and Differentiated Supports.

Table 10. Summary of Required Action

Required Action	Due Date	Support Level	Communication Cadence
Strategic Support Plan (SSP)	NA	Universal (DL 1)	NA
Corrective Action Plan (CAP)	August 29, 2022	Intensive	30 Days
Dyslexia Performance Plan (DPP)	NA	NA	NA

Note. SSP due date was when the initial SSP submission was due. The SSP communication cadence uses the current year's RDA DLs (e.g., 2021 DL from SY 2020–2021) and includes a check-in frequency of 30 days (DL 4), 60 days (DL 3), or 90 days (DL 2). The SSP support level is based on the current year's RDA DLs and includes three possible values: Intensive (DL 4), Targeted (DL 3 or 2), and Universal (DL 1).

CONTACT

The LEA should notify the Division of Review and Support about any concerns within 5 business days from the date of this report. The report will subsequently become publicly available on the TEA Differentiated Monitoring and Support (DMS) website shortly thereafter.

- **Report Date:** July 29, 2022
- **Deadline to Request Report Corrections:** August 05, 2022 at 11:59 PM

For more information about the general supervision and monitoring requirements, required actions, or related resources, please visit the Review and Support website or contact:

Office of Special Populations and Monitoring
Department of Special Populations and General Supervision
Division of Review and Support
Phone: (512) 463–9414
Monday–Friday (8:00 AM to 5:00 PM)
Fax: (512) 463-9560
Email: ReviewandSupport@tea.texas.gov

APPENDIX I: SELF-REPORTED NONCOMPLIANCE

Table 11 lists self-reported noncompliance identified by the LEA. This noncompliance is also included in the overall total count of noncompliance in Table 2.

Table 11. Self-Reported Noncompliance

Area	Citation	Level	Status	Action
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA

APPENDIX II: ADDITIONAL RESOURCES

Differentiated Monitoring and Support System

Review and Support General Supervision Monitoring Guide

State Performance Plan and Annual Performance Report and Requirements

Race and Ethnicity in Special Education: Difference Between Data Collection and Data Reporting

Results Driven Accountability Reports and Data

Results Driven Accountability District Reports

Results Driven Accountability Manual

APPENDIX III: ACRONYMS

Acronym	Description
ARD	Admission, Review, and Dismissal
CAP	Corrective Action Plan
CFR	Code of Federal Regulations
CISD	Consolidated Independent School District
DMS	Differentiated Monitoring and Support
DPP	Dyslexia Performance Plan
DL	Determination Level
ESC	Education Service Center
FAPE	Free Appropriate Public Education
ISD	Independent School District
IDEA	Individuals with Disabilities Education Act
LEA	Local Education Agency
OSEP	Office of Special Education Programs
OSPM	Office of Special Populations and Monitoring
PEIMS	Public Education Information Management System
RDA	Results Driven Accountability
RF	Residential Facilities
SD	Significant Disproportionality
SPP	State Performance Plan
SSA	Shared Service Arrangement
SSP	Strategic Support Plan
TAC	Texas Administrative Code
TEA	Texas Education Agency
TEC	Texas Education Code
TSDS	Texas Student Data System