



SPECIAL EDUCATION CYCLICAL MONITORING REPORT

Cycle 3, Group 1
Presidio ISD (189902)

February 28, 2022

TABLE OF CONTENTS

| | |
|---|----|
| INTRODUCTION | 3 |
| OVERVIEW OF CYCLICAL MONITORING | 3 |
| COMPLIANCE REVIEW AND NONCOMPLIANCE FINDINGS | 4 |
| Compliance Review | 4 |
| Noncompliance Findings | 5 |
| DATA REVIEW | 7 |
| Data Sources | 7 |
| Student Sampling and Campus Information | 7 |
| Residential Facilities (RFs) | 8 |
| Results Driven Accountability, State Performance Plan Indicators, and Significant Disproportionality..... | 8 |
| STAKEHOLDER ANALYSIS AND RESULTS | 9 |
| LEA SUCCESSES | 10 |
| TECHNICAL ASSISTANCE | 10 |
| DYSLEXIA PROGRAM EVALUATION | 11 |
| Identified Dyslexia Program Successes | 12 |
| Dyslexia Program Areas of Need | 12 |
| Dyslexia Resources..... | 12 |
| SUMMARY OF REQUIRED ACTIONS..... | 12 |
| CONTACT | 13 |
| ADDITIONAL RESOURCES | 14 |
| ACRONYMS..... | 15 |

CYCLE: 3, GROUP: 1

DATE RANGE: October–December

REGION: 18

DISTRICT NAME: Presidio ISD (189902)

DISTRICT TYPE: Independent

SHARED SERVICE ARRANGEMENT (SSA) MEMBER: Yes

FISCAL AGENT: Alpine ISD (022901) as of SY 2020–2021

MONITORING TYPE: Comprehensive Desk Review

COMPLIANCE STATUS: Noncompliant

ACTION REQUIRED: Corrective Action Plan (CAP)

STRATEGIC SUPPORT PLAN (SSP) DUE DATE: NA

CORRECTIVE ACTION PLAN (CAP) DUE DATE: March 30, 2022

DYSLEXIA STATUS: Meets Requirements

DYSLEXIA ACTION REQUIRED: No Action Required

INTRODUCTION

The Texas Education Agency (TEA) extends its appreciation to the parents, students, teachers, staff, and administration for their time and effort dedicated to completing the special education cyclical monitoring review at Presidio ISD (189902).

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 that any findings of noncompliance require corrective action. Noncompliance identified in this report must be corrected no more than one year from the date of notification (for further information on the necessary actions and timeframe for completion, see [OSEP Memo 09-02](#)).

This report has eight main sections. The first six sections cover the cyclical monitoring activities and findings from the monitoring review and stakeholder feedback. The last two sections provide results from the dyslexia program evaluation and a summary of required actions.

OVERVIEW OF CYCLICAL MONITORING

TEA conducts a comprehensive cyclical monitoring review once every six years for each LEA. The balanced monitoring review helps support 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 special education program and the dyslexia program. Monitoring activities include

but are not limited to a policy review, desk review of student folders, on-site campus review, and stakeholder feedback, focused mainly on seven state-identified priority areas:

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

The type of comprehensive cyclical monitoring is either a desk review or an on-site review (in addition to the 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) also receive an on-site visit. For example, an LEA engaged in cyclical monitoring for the school year (SY) 2021–2022 and a 2020 RDA DL 4 would receive both a desk review and an on-site review.

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

COMPLIANCE REVIEW AND NONCOMPLIANCE FINDINGS

The compliance review includes noncompliance findings from the policy review and the desk review focused on the seven state-identified priority areas.

Compliance Review

The compliance review includes a policy and desk reviews of student folders in the seven priority areas. Table 1 shows the total number of policy review questions and student folders reviewed (denominator), the number of policy review questions and student folders found compliant (numerator), and the 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 | 100% (19 of 19) | 100% (19 of 19) |
| IEP Development | 100% (5 of 5) | 68% (13 of 19) |
| IEP Content | 100% (3 of 3) | 100% (19 of 19) |
| IEP Implementation | 100% (21 of 21) | 100% (19 of 19) |
| Properly Constituted ARD | 100% (8 of 8) | 100% (19 of 19) |
| State Assessment | 100% (4 of 4) | 100% (19 of 19) |
| Transition | 100% (6 of 6) | 100% (7 of 7) |

Note. Noncompliant student folders in the desk review had at least one area of noncompliance.

Noncompliance Findings

This report provides the required written notification for an LEA with an overall compliance status of “Noncompliant” shown in Table 2. The overall compliance status includes noncompliance identified in Tables 3 and 4. Table 2 also shows the number of citations with noncompliance that must be addressed in the corrective action plan (CAP).

Table 2. LEA Cyclical Monitoring Compliance Status Overall

| Compliance Status Overall | Number of Areas with a Noncompliance to be Addressed (<i>shown in the “Status” column of Tables 3 and 4</i>) | Required Action |
|---------------------------|--|------------------------------|
| Noncompliant | 1 | Corrective Action Plan (CAP) |

The overall monitoring compliance status includes findings from the desk review and the policy review. The following rules determine the overall status:

- LEA with at least one area of noncompliance in the desk review or policy review is assigned an overall compliance status of “Noncompliant” and requires completing a CAP.
- LEA with no identified areas of noncompliance for the policy review or the desk review, but at least one pre-finding correction is assigned an overall compliance status of “Pre-finding Corrected” (see the following Prong 1 and 2) and does not require completing a CAP.
- LEA with no noncompliance or pre-finding correction is assigned an overall compliance status of “Compliant” and does not require completing a CAP.

Within 30 calendar days of this report, an LEA with a Noncompliant status overall must submit a CAP for all citations of noncompliance identified in Tables 3 and 4. LEAs should access the CAP resources and submission requirements on the [Review and Support TEA webpage](#).

The LEA 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 Prongs 1 and 2:

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

An LEA with no noncompliance and pre-finding correction of noncompliance for two or fewer students (i.e., individual level) and verification of Prongs 1 and 2 before the issuance of this report does not require a CAP. However, LEAs with an individual level of noncompliance (i.e., two or fewer students) not corrected before the issuance of this report or LEAs with a systemic level (i.e., more than two students) of noncompliance require a CAP.

An LEA that does not complete the CAP or completes the CAP after the one-year timeframe is assigned an overall compliance status of “Continuing Noncompliance.”

Table 3. IDEA Noncompliance Findings from the Desk Review

| Area | Citation | Level | Status | Action |
|-----------------|--|------------|-----------------------|------------------------|
| IEP Development | 34 CFR §300.320(a)(2)(i) | Systemic | Noncompliant | Corrective Action Plan |
| IEP Development | 34 CFR §300.320(a)(1) | Individual | Pre-finding Corrected | No Action Required |
| Transition | 34 CFR §300.320(c); 19 TAC §89.1049(a) | Individual | Pre-finding Corrected | No Action Required |
| NA | NA | NA | NA | NA |
| NA | NA | NA | NA | NA |
| NA | NA | NA | NA | NA |
| NA | NA | NA | NA | NA |
| NA | NA | NA | NA | NA |
| NA | NA | NA | NA | NA |

Note. The “Area” column contains the state-identified priority area and has seven possible values. 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. IDEA Noncompliance Findings from the Policy Review

| Area | Citation | Level | Status | Action |
|------|----------|-------|--------|--------|
| NA | NA | NA | NA | NA |
| NA | NA | NA | NA | NA |

DATA REVIEW

The following data were reviewed as part of the comprehensive cyclical monitoring review.

Data Sources

Data from the following areas were reviewed:

- AskTED District Data
- Results Driven Accountability (RDA)
- Significant Disproportionality (SD)
- State Performance Plan (SPP) data
- Desk Review Data
- Policy Review Data
- Qualtrics Monitoring Survey
- Qualtrics Stakeholder Survey
- On-Site Interviews
- RF Summer PEIMS

Student Sampling and Campus Information

Comprehensive cyclical monitoring included a desk review and, if applicable, an on-site review. Both the desk review sample size and the on-site review sample size are in Table 5.

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

| Monitoring Type | Sample Size |
|-----------------|-------------|
| Desk Review | 19 |
| On-Site Review | NA |

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

The student folders selected for the desk review were based on a stratified random sampling method made up 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). Students/campuses from LEAs meeting

the on-site criteria were then randomly selected from the desk review sample to participate in an on-site monitoring review (for more information, see the [DMS Guide to General Supervision and Monitoring, Appendix B: Special Education Sampling Methods](#)).

Residential Facilities (RFs)

LEAs are required to ensure students with disabilities are provided a “free appropriate public education” (FAPE) when attending/being educated at a residential facility (RFs) located in their geographical boundary (see [TAC §89.1115\(d\)\(1\)\(i\)](#)). Presidio ISD (189902) had 0 RFs based on the 2021 RF Tracker yearly data submission in the Texas Student Data System (TSDS).

Results Driven Accountability, State Performance Plan Indicators, and Significant Disproportionality

LEAs are assigned an annual special education determination level (DL) using one of 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 annual determinations include LEA results from the State’s results driven accountability (RDA) system and federally required elements (FREs). The FREs consist of compliance data from three State Performance Plan (SPP) indicators: SPPI-11 (Timely Initial Evaluation), SPPI-12 (Early Childhood Transition), and SPPI-13 (Secondary Transition). Each year, the State also conducts significant disproportionality (SD) analyses, per its obligation under [34 CFR §§300.646-647](#). The RDA DLs, SPP statuses, and SD Year 3 results are in Table 5.

Table 5. RDA, SPP, and SD Year 3 Results (2019–2022)

| Data Source | SY 2019–2020 | SY 2020–2021 | SY 2021–2022 |
|------------------------------|---------------------------|---------------------------|---------------------------|
| RDA Determination Level (DL) | Meets Requirements (DL 1) | Meets Requirements (DL 1) | Meets Requirements (DL 1) |
| SPP 11 Status | Compliance (100%) | Compliance (100%) | Compliance (100%) |
| SPP 12 Status | Compliance (100%) | NA | Compliance (100%) |
| SPP 13 Status | Compliance (100%) | Compliance (100%) | Compliance (100%) |
| SD Year 3 Status | NA | NA | NA |

Note. SY 2019–2020 DLs were called Performance Levels (PLs). NA denotes not applicable to LEA.

SPP indicators have three compliance statuses: (a) noncompliance (< 95%), (b) substantial compliance (>= 95% AND <= 99%), (c) and compliance (100%). The LEA results are also published online on the [Results Driven Accountability \(RDA\) Report](#) webpage and the [District Profile of State Performance Plan Indicators Report](#) webpage.

STAKEHOLDER ANALYSIS AND RESULTS

The TEA collected stakeholder data during the comprehensive cyclical monitoring review from parents/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 for three constructs:

- **Understanding** – This construct measures positive sentiment about their 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 training related to special education.
- **Competency in Implementation** – This construct measures positive sentiment of perceived competency required for implementing special education program requirements.

Table 6 shows stakeholder results for each construct (i.e., understanding, engagement, competency) by role (i.e., parents/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 district and completed the online survey. Therefore, inferences and judgments from the stakeholder results 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 6. Stakeholder Results by Role and Constructs

| Construct | Parent/ Guardian | Special Education | General Education | Administration (<i>Campus and District</i>) |
|------------------------------|---------------------|----------------------|----------------------|--|
| <i>Number of Respondents</i> | FR | FR | FR | FR |
| Understanding | * | * | * | * |
| Engagement | * | * | * | * |
| Competency | * | * | * | * |

Note. FR (Too Few Respondents) denotes respondent ROLE counts <5 AND * denotes masking corresponding percentage values. ** denotes no data submitted for LEA.

LEA SUCCESSES

The successes identified during the comprehensive cyclical monitoring review include:

- Systems for documentation are implemented well as evidenced by descriptive and detailed present levels of academic achievement and functional performance (PLAAFP) statements

that are supported by data.

- Systems for supporting student needs are implemented well as evidenced by LEA staff involvement in admission, review, and dismissal (ARD) committee meetings and IEP development.
- LEA record keeping is evidenced by student files, data, supporting documentation, and artifacts provided to agency staff in a timely, organized, and efficient manner.

TECHNICAL ASSISTANCE

Technical assistance resources recommended from the findings of the comprehensive cyclical monitoring review include (copy and paste URLs into the web browser):

- IEP DEVELOPMENT – The A Step Toward IEP Quality and Rigor is an asynchronous course from the Texas Complex Access Network (TX CAN) that provides support for educators developing high quality individual education plans (IEPs) for students with significant cognitive disabilities (see <https://txcan.tea.texas.gov/courses>).
- IEP DEVELOPMENT – The Writing Effective Impact and Needs Statements in the Full and Individual Evaluation (FIE) is a webinar that provides guidance for writing compliant and effective impact and need statements for identifying and developing present levels of academic achievement and functional performance (PLAAFP) statements (see [https://childfindtx.tea.texas.gov/recorded sessions.html](https://childfindtx.tea.texas.gov/recorded%20sessions.html)).
- TRANSITION – The Pre-Employment Transition Services: A Guide for Collaboration Among State Vocational Rehabilitation Agencies and Education Partners guidance document provides information about building partnership between schools and community agencies (see <https://files.eric.ed.gov/fulltext/ED605980.pdf>).

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 7 and 8. For any dyslexia area of implementation not meeting requirements, the LEA must engage in the Dyslexia Performance Plan (DPP) process. The DPP guides LEAs through the continuous improvement process to address growth areas that may positively impact students with dyslexia. LEAs should complete the DPP no later than 120 days after receiving notification of "Did Not Meet Requirements" in Table 7. The TEA will provide the DPP, or it can be accessed on the [Department of Review and Support Dyslexia Program Evaluation](#) webpage and can then be uploaded to the ShareFile link supplied by the dyslexia specialist assigned to the LEA.

Table 7. Overall Dyslexia Program Status

| Status | Number of Areas Not Meeting Requirements (<i>shown in Table 8</i>) | Required Action |
|--------------------|--|--------------------|
| Meets Requirements | 0 | No Action Required |

The dyslexia monitoring efforts focused on three-core elements:

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

The statuses for the six dyslexia program areas evaluated are in Table 8.

Table 8. Program Status for Each Area of Dyslexia 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 |
| 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:

- Operating procedures identify district roles and responsibilities for addressing dyslexia and related disorders.
- Not Applicable (NA)

Dyslexia Program Areas of Need

The following areas of need were identified during dyslexia monitoring:

- Maintain detailed service logs, progress reports, data, and teacher feedback to address fidelity of dyslexia instruction practices.
- Ensure procedures and practices for the dyslexia program are consistent across the district.

Dyslexia Resources

TEA recommends the following resources to support dyslexia programs:

- TEA Review and Support: [Dyslexia Monitoring](#)
- TEA Special Education: [Dyslexia and Related Disorders](#)
- Dyslexia: TEA Professional Learning Course: [TEALearn Dyslexia Modules](#)

SUMMARY OF REQUIRED ACTIONS

The comprehensive cyclical monitoring review results determine the required actions (see Table 9). Information on the different support levels is contained in the [DMS Guide to General Supervision and Monitoring: RDA Interventions and Differentiated Supports](#).

Table 9. Summary of Required Actions

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

Note. 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).

CONTACT

The LEA should contact the Office of Special Populations and Monitoring (OSPM), Department of Review and Support, to report any concerns within 10 calendar days from the date of this report. After 10 calendar days, this report will become publicly available on the TEA website.

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 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

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](#)

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 |

