

Dates: October 2020- December 2020

Texas Education Agency 2020-2021 CYCLICAL MONITORING REPORT

Local Education Agency (LEA) Name: Slocum ISD CDN: 001-909

LEA Compliant \Box

Non-Compliance Identified \boxtimes

Corrective Actions: Complete

INTRODUCTION

The Texas Education Agency (TEA) would like to extend appreciation to Slocum ISD for their efforts, attention, and time committed to the completion of the review process.

The TEA has developed a monitoring approach that reviews compliance-based indicators while also looking for best practices. In commitment to the approach, the cyclical monitoring report will provide the results of the LEA's compliance review related to the Individuals with Disabilities Education Act (IDEA) and federal and state statutes, a summary of data related to Results-Driven Accountability (RDA), State Performance Plan (SPP), Significant Disproportionality (SD), and dyslexia program evaluation will recommend targeted technical assistance and support for LEAs related to special education, and highlight best practices of LEAs that demonstrate success.

CYCLICAL MONITORING

The TEA conducts cyclical reviews of all LEAs statewide over six years. The purpose of cyclical monitoring is to support positive outcomes for students with disabilities and to determine compliance with special education regulations and dyslexia program regulations.

LEAs are required to submit artifacts and/or sources of evidence for compliance and promising practices review in the following areas:

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

2020–2021 CYCLICAL REVIEW COMPLIANCE SUMMARY

On December 18, 2020, the TEA conducted a policy review of Slocum ISD. On December 18, 2020, the TEA conducted a comprehensive desk review of Slocum ISD. The total number of files reviewed for the Slocum ISD comprehensive desk review was 17 The review found overall that 11 files out of 17 files were compliant. An overview of the policy review and student file review for Slocum ISD are organized in the chart below by indicating the number of compliant findings within the reviewed file submissions related to the compliance area. Itemized details of these findings are in the appendix:

Compliance Area	Policy Review (# compliant of # reviewed)	Student File Review (# compliant of # reviewed)
Child Find/Evaluation/FAPE	18 of 18	17 of 17
IEP Development	5 of 5	12 of 17
IEP Content	3 of 3	17 of 17
IEP Implementation	21 of 21	17 of 17
Properly Constituted ARD	8 of 8	17 of 17
State Assessment	4 of 4	17 of 17
Transition	6 of 6	15 of 17

DATA SUMMARY OF RESULTS-DRIVEN ACCOUNTABILITY, STATE **PERFORMANCE PLAN INDICATORS, AND SIGNIFICANT** DISPROPORTIONALITY

The following supplemental data may be used to support development of the Strategic Support Plan (SSP) for continuous improvement and/or a Corrective Action Plan (CAP) if noncompliance is identified.

Year	Results-Driven Accountability (RDA) Determination Level	SPP Indicators 11, 12, 13 Compliance*	Significant Disproportionality
2020	DL 1—Meets Requirements	COMPLIANT	N/A

*Indicator 11: Child Find

Indicator 12: Early Childhood Transition Indicator 13: Secondary Transition

2020-2021 COVID-19 IMPACT NARRATIVE SUBMISSION

In the 2020-2021 academic year, Local Education Agencies (LEAs) had an opportunity to share the practices incorporated to support Child Find and FAPE for students being served by special education during the COVID-19 pandemic by completing the COVID 19 Impact Narrative.

Slocum ISD submitted a COVID-19 Impact Narrative as a supplement to their Cyclical Review:

□Yes ⊠No

2020-2021 CYCLICAL REVIEW PARENT, TEACHER, ADMINISTRATOR INTERVIEWS/SURVEY

Staff and Family Surveys

On December 18, 2020, the TEA Review and Support team received 40 surveys during the comprehensive desk review. The Review and Support surveys focused on the following review areas:

Thirty-seven percent of participants felt they receive sufficient communication from their school. The best way the school/district provides information about trainings, online trainings, support groups and other available resources concerning special education services is via email followed by notices sent home, and the school website.

Most parent/family member participants felt they would be most comfortable attending special education information sessions at the school campus.

Seventy-five participants agree or somewhat agree that they have a clear understanding of special education services.

The most selected areas of special education the participants would like to know about were the Small and Rural Schools Network.

Most participants felt staff training to help meet the needs of students with disabilities was effective or somewhat effective.

Fifty percent of participants felt there were frequent opportunities to collaborate with related service providers.

The obstacles concerning student's special education programming and services were reported as:

- Timely updates on student progress
- Knowledge of available services and programming
- Assuring students receive accommodations and/or modifications as outlined in the IEP.

Ninety percent of respondents agree with the importance of including students interests/life goals in the transition process with eighty percent of participants strongly agreeing.

The majority of participants indicated they chose the in-person learning model. More than sixty percent of respondents indicated that remote learning for students receiving special education was effective or somewhat effective.

Almost 70% of participants felt that during COVID school closures/remote learning, the Emergency Contingency Plan was effective in supporting student progress.

During COVID closures the top three ways indicated that teachers provided support to students with moderate to severe disabilities were:

- teachers provided supports needed for students to be successful.
- teachers modified work.
- teacher provided individualized support.

Participants indicated that during COVID school closure/remote learning additional professional development is needed, although student choice offerings was reported as an area where training had been provided.

Participants indicated that during COVID school closure/remote virtual instruction and online submission of assignments did not work well for students with disabilities.

Most participants indicated that they agreed or strongly agreed that they worked with parents/guardians in addressing severe behavior and work refusal.

This survey was approved by the Texas Education Agency's data governance board. Participation in this survey was both voluntary and anonymous. No data was collected identifying a name so that individual responses cannot be linked to any respondent. Participants were given the option to stop the survey at any time.

Strengths

Based on results of the policy review and student file review, along with data collected from LEA staff and family surveys, the Review and Support team identified the following strengths for Slocum ISD:

- Evaluations are completed within the timeframes as expected and conducted with a multidisciplinary team approach.
- It is evidenced that there are strong lines of communication between the LEA and families by the high parent attendance rate at ARD meetings.

Considerations

Based on results of the policy review and student file review, along with data collected from LEA staff and family surveys, the Review and Support team identified the following considerations for Slocum ISD:

- Ensure there is an internal process to check student paperwork for accuracy. Clerical errors could have a negative impact on student services.
- Present Levels of Academic Achievement and Functional Performance should give a clear roadmap on the impact of the students' identified eligibility and how that affects their achievement and progression in the general education curriculum.
- Measurable annual goals need to include a regular frequency of feedback on the students' progress towards those goals. Ensure all student IEPs include the frequency with which progress toward measurable annual goals will be reported.

Technical Assistance

As a result of monitoring, the TEA has identified the following technical assistance resources to support Slocum ISD engaging in **targeted** support as determined by the RDA performance level data and artifacts within the compliance review:

Торіс	Resource
PLAAFP Statements	Intensive Interventions. The National Center on Intensive Intervention – The linked page is intended to help state and local leaders, including school, district, and state administrators and staff responsible for leading multi-tiered systems of support (MTSS) and special education initiatives, find tools and resources to support data-based individualization (DBI) implementation.
	High Quality PLAAFP Statements. This IRIS Center module focuses on the key components of high quality PLAAFP statements.
Measurable Annual Goals	<u>Technical Assistance: IEP Development</u> : The IEP Development document is part of an ongoing series to provide technical assistance to LEAs from the Texas Education Agency.
Commonly Made Errors in the IEP Process	IRIS Center. Page 4: Procedural Requirements: Guidelines & Common Errors: This IRIS Center module provides clarification on commonly made errors and how to remedy each item specifically.
Technical Assistance Network Requested	Small and Rural Schools Network: This network strives to build capacity of small and rural LEAs to provide a more equitable level of access for students with disabilities in these communities. The network will develop state-level infrastructures, resources, and professional development to support LEAs who face unique challenges, such as resource limitations and geographic remoteness.

Findings of Noncompliance

A finding is made when noncompliance is identified with the Review and Support report findings, SPP notification, and/or individualized education program (IEP) requirements. Noncompliance that is systemic in nature must be included in a comprehensive corrective action plan (CAP) with action steps to address each of the noncompliance findings. *When noncompliance has been identified as part of this cyclical review, Slocum ISD will receive formal notification of noncompliance in addition*

to this report.

The TEA Division of Special Education Monitoring will further advise the LEA on the corrective action process, if applicable.

The TEA follows procedures for the correction of noncompliance consistent with federal guidelines (OSEP Memo 09-02.)

Before the TEA can report that noncompliance has been corrected, it must first verify the LEA:

- Has corrected each individual case of noncompliance (Prong 1); and
- Is correctly implementing the specific regulatory requirements (i.e., subsequently achieved 100% compliance) (Prong 2).

The TEA is required to monitor the completion of a corrective action plan if any noncompliance is discovered. The corrective action plan must be designed to correct any and all areas of noncompliance *as soon as possible, but in no case later than one year from the date of notification.*

Corrective Action Plan (CAP)

The LEA will develop a CAP to address any items identified as noncompliance in this summary report. An approved form for the CAP can be accessed on the Review and Support website or in the resources located in Ascend Texas.

The LEA must submit the CAP in Ascend within 30 school days from the date of this report and/or formal notification of noncompliance. The TEA will review the CAP submitted by the LEA for approval. If the TEA determines that a revision(s) is necessary, the LEA will be required to revise and resubmit. The Review and Support team will contact the LEA to provide notification when the CAP has been approved.

Individual Correction

The educational agency has **60 school days** from the date of this summary report to correct all identified findings of noncompliance for individual students, unless noted otherwise in the report.

LEA ACTIONS

Timeline for Strategic Support Plan (SSP) and/or Corrective Action Plan (CAP) Below:

	Submission Due	Completion Due		Communication
Required Actions	Date	Date	Support Level	Schedule

SPP	N/A		Universal	Not Applicable
САР	3/22/2021	1/28/2022		30 day

For more information about cyclical monitoring and the Differentiated Monitoring and Support process, please visit the Review and Support website

**LEA may have previously identified corrective actions in addition to findings in this report.

REFERENCES

- Differentiated Monitoring and Support System
- Review and Support General Supervision Monitoring Guide
- State Performance Plan and Annual Performance Report and Requirements
- Results-Driven Accountability Reports and Data
- Results-Driven Accountability District Reports
- Results-Driven Accountability Manual

APPENDIX

IEP Development

STUDENT FILE REVIEW

Item	IDEA Citation	TEC/TAC Citation	Evidence of Findings	Required Actions	Must Be Addressed in CAP
ID2	34 CFR § 300.320(a)(1)		Yes □ No	Individual—Yes Convene ARD committee meetings for student whose records indicate noncompliance in this area to ensure all identified areas of weaknesses are addressed through their annual goals. Consider whether the students' free, appropriate public education (FAPE) has been impacted and whether compensatory services are required. Systemic—Not Applicable	☐ Yes ⊠ No
ID5	34 CFR § 300.320(a)(3)		A review of student files revealed one or more student goals did not indicate when progress reports would be shared with the parent.	Individual—Yes Convene ARD committee meetings for student's whose records indicate noncompliance in this area to ensure all goals indicate when parent or guardians	⊠ Yes □ No

Item	IDEA Citation	TEC/TAC Citation	Evidence of Findings	Required Actions	Must Be Addressed in CAP
				 should receive progress updates on the students' performance. Consider whether the students' free, appropriate public education (FAPE) has been impacted and whether compensatory services are required. Systemic—Yes Review and revise policies and procedures, including operating guidelines and practices addressing this issue. Provide training on these procedures to the appropriate staff. Develop processes that allow for self-monitoring this area of noncompliance. Demonstrate systematic, ongoing compliance in this area. 	