



Cycle 1 Group 1

Dates: October 2019 – December 2019

TEXAS EDUCATION AGENCY 2020-2021 CYCLICAL MONITORING REPORT STAFFORD MUNICIPAL SCHOOL DISTRICT

CDN: 079970

Non-Compliance Identified

Corrective Actions Completed

INTRODUCTION

The Texas Education Agency (TEA) would like to extend appreciation to Stafford MSD 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), and Significant Disproportionality (SD), 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.

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

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

2019–2020 CYCLICAL REVIEW COMPLIANCE SUMMARY

On August 30, 2019, the TEA conducted a policy review of Stafford MSD. On December 20, 2019, the TEA conducted a comprehensive desk review of Stafford MSD. The total number of files reviewed for the Stafford MSD comprehensive desk review was 36. The review found overall that 30 files out of 36 files were compliant. An overview of the policy review and student file review for Stafford MSD 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	11 of 11	36 of 36
IEP Development	6 of 6	36 of 36
IEP Content	3 of 3	30 of 36
IEP Implementation	8 of 8	36 of 36
Properly Constituted ARD	7 of 7	36 of 36
State Assessment	5 of 5	36 of 36
Transition	4 of 4	36 of 36

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) Performance Level	SPP Indicators 11, 12, 13 Compliance*	Significant Disproportionality
2019	PL 2—Needs Assistance	NONCOMPLIANCE: SPP 11 & SPP 12	N/A

*Indicator 11: Child Find

Indicator 12: Early Childhood Transition

Indicator 13: Secondary Transition

2019–2020 CYCLICAL REVIEW PARENT, TEACHER, ADMINISTRATOR INTERVIEWS/SURVEY

Staff and Family Surveys

On December 7, 2019, the TEA Review and Support team received 19 surveys during the comprehensive desk review. Respondents to the staff and family survey included parents/guardians, general education teachers, special education teachers, evaluation staff, and administration staff (district and campus). The Review and Support surveys focused on the following review areas:

- Community outreach
- Inclusion of special education staff in grade level curriculum planning and training

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 Stafford MSD:

- State assessment results were documented thoroughly within the IEP
- Intensive Program of Instruction was evidenced (as needed)
- Every IEP meeting was attended by all required committee members
- Survey participants identified notices sent home, emails and phone calls as the best and most used methods to communicate with parents, families and stakeholders

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 Stafford MSD:

Technical Assistance

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

Topic	Resource
IEP Content	Legal Framework

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, Stafford MSD 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 Intervention, Stage, and Activity Manager (ISAM).

The LEA must submit the CAP in ISAM within 30 school days from the date of this report and 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 SSP and/or CAP Below:

Required Actions	Submission Due Date	Completion Due Date	Support Level	Communication Schedule
SSP	2/7/2020		Targeted	90 days
CAP	3/13/2020	2/12/2021		30 days

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 CONTENT

STUDENT FILE REVIEW

Item	IDEA Citation	TEC/TAC Citation	Evidence of Findings	Required Actions	Must Be Addressed in CAP
IC1	34 CFR §300.324(b)			<p>Systemic—Yes</p> <p>Review and revise policies and procedures, including operating guidelines and practices addressing this issue.</p> <p>Provide training on these procedures to the appropriate staff.</p> <p>Develop processes that allow for self-monitoring this area of noncompliance.</p> <p>Provide evidence of systemic compliance.</p>	Yes