Standard Record Reviews (SRR) and Transition Age File Reviews: Indicator 13 (I 13) SY2020-2021

What's New, Review Process, Data Submission, and Correction Process

Today's Plan

- What's New
- File review process
- Data submission & reporting
- Correction of Indicator 13 noncompliance process
- Levels of support for Indicator 13

Purpose of IEP Record Reviews

1. To improve academic achievement, career and college readiness and post school outcomes for students with disabilities

2. To identify trends and areas of strength in IEP development and implementation

3. To make informed decisions about professional development and technical assistance needs in IEP development, implementation and transition planning

4. To gather statewide data required for the Colorado State Performance Plan/Annual Performance Review (SPP/APR) submitted annually to the Office of Special Education Programs (OSEP)

What's New?

New

- Timeline:
  - Data Management System (DMS) samples are open October 1, 2020 – June 2, 2021
- Maximum number of total reviews from all age groups reduced from 50 to 30
  - Minimum 10
  - Maximum 30

Same

- AUs will review 3% of all IEPs
- Sample stratified in 3 age categories: 3-4, 5-14, 15+
- Transition IEP reviews
  - Minimum 5
  - Maximum 10

File Review Process – Standard Record Review
School Age and Preschool

Overview

- Samples pulled from the 2019 December Count data

- Sample Size - double the required number – provides flexibility in file selection

- Review active IEPs dated between July 1, 2020 – June 2, 2021

- Full record reviews – protocol is built in to the DMS

- June 2, 2021 – data collection window closes and DMS files locked

How many files do I have to review?

The CDE uploaded a document to the Attachments List in the DMS Compliance tab that identifies the number of required number of reviews for each age category and the doubled number in each age group for flexibility.

Profile	Dispute Resolution	**Compliance**	Fiscal

Attachments List - Full Details

⊕ **Upload Attachment**

	File
☒	2020-21 Transition Tracker and List
☒	Standard student list 20-21
☒	EC student list 20-21
☒	IEP Record Review Directions SY2020-21

Required number of reviews

during SY2020-21:

Preschool Age 3-4	School age Age 5-14	Transition age Age 15 and above	Total number of IEPs reviewed by your AU
3	19	5	27

Students who were enrolled as of December 1, 2019 may no longer be enrolled in your AU at the time of the IE review. To provide flexibility to AUs in selecting files to review, we sampled an extra number of IEPs for each a group:

Preschool Age 3-4	School age Age 5-14	Transition age Age 15 and above	Total number of IEPs sampled
6	38	10	54

- Detailed individual student lists are provided for each age category.

| Profile | Dispute Resolution | Compliance | Fiscal | Family-School | Performance | Summary |

Attachments List - Full Details

Print   Help

+ Upload Attachment

	File	Confidential?	AU Access?	Date	
☒	2020-21 Transition Tracker and List	No	No	10/1/2020	Edit
☒	Standard student list 20-21	No	No	10/1/2020	Edit
☒	EC student list 20-21	No	No	10/1/2020	Edit

- Separate columns in the Compliance tab of the Data Management System (DMS)

<u>Early Childhood Review age 3 through 4 10/1/2020</u>   <u>Standard Record Review age 5 through 14 10/1/2020</u>   <u>Transition Record Review 15 years and older 10/1/2020</u>
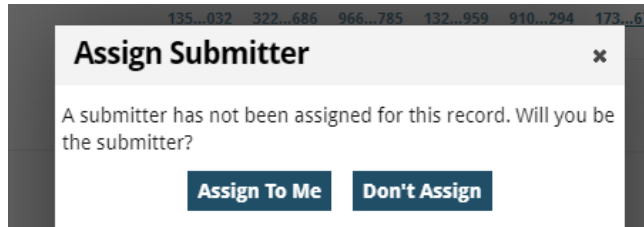
Completing file reviews

1. Click on the age-range column

| Early Childhood Review age 3 through 4 10/1/2020 | Standard Record Review age 5 through 14 10/1/2020 | Transition Record Review 15 years and older 10/1/2020 |

2. Click on the Record Number you want to review

Records (10)

1   2   3   4   5   6   7   8   9   10

3. Click on Assign To Me and fill in your name

Assign Submitter ✕

A submitter has not been assigned for this record. Will you be the submitter?

[Assign To Me] [Don't Assign]

4. Complete full record review using the protocol in the DMS
5. Upload documents to the DMS

Profile | Dispute Resolution | Compl

Reviewer: none

Present Levels of Academic Achieve ▼

In developing each child's IEP, the IEP Team must consider the results of the initial or most recent evaluation of the child 300.320(a)(1)(iii) and the academic, developmental, and functional needs of the child. 300.320(a)(1)(iv). Strengths of the child. 300.324(a)(1)(i); 4.03

▼

The IEP team must consider the results of the initial or most recent evaluation of the child 300.324(a)(1)(iii); 4.03 NOTE: Consider benchmark testing, curriculum-based assessments, progress monitoring data of interventions, etc. Data should be a summarized discussion or triangulation of data presented in order to develop measurable goals. For CLD students, look for input pertinent to second language (e.g., ACCESS scores, ELA input, parental input)

▼

Uploading documents to the DMS

- Upload the IEP documents for the selected students, including the Notice of Meeting, from your IEP system (e.g. Enrich) to the DMS.

  Instructions for uploading IEPs for Enrich and non-Enrich users can be found under Resources on the Directors' Corner of the CDE website

  Note: At 5:00 PM on June 2, 2021, the data submission window closes and your access to these files in the DMS will be locked.

- A one-page checklist for completing the Standard Record Reviews can be found on the General Supervision and Monitoring webpage.

By popular demand
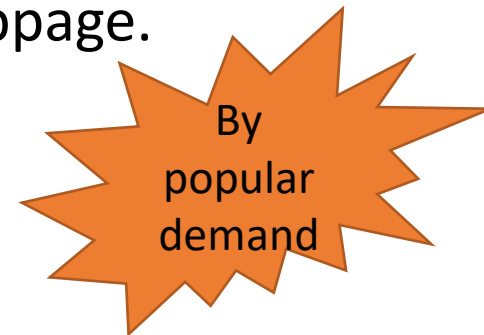
File Review Process – Transition Age Indicator 13

- Samples pulled from the 2019 December Count data

- Sample Size - double the required number – provides flexibility in file selection

- Review active IEPs dated between July 1, 2020 – June 2, 2021

- Full record reviews – protocol is built in to the DMS

- June 2, 2021 – data collection window closes and DMS files locked

Calculating % Compliance for I 13

- Target for Indicator 13 = 100% compliance

- Indicator 13 is an "all or nothing" indicator - a Transition IEP is considered compliant when <u>ALL 8</u> required components are evident in the document.

- Calculation: % Compliant = (Number of youth age 15 and above with IEPs that contain each of the required components for secondary transition/required number of reviews) * 100.

Example:

- Required number of file reviews = 5
- Compliant IEPs = 4
- % Compliant: 4/5 = 0.8 x 100 = 80%

1. Appropriate measurable postsecondary goals (PSGs) in education/training, career/employment, and, where appropriate, independent living skills

2. PSGs are updated annually (N/A option added to the DMS if you are reviewing the first Transition Age IEP for the student at age 15)

3. Age-appropriate transition assessments

4. Courses of study that will assist the student in reaching the PSGs

5. Transition services that will reasonably enable the student to meet his or her PSGs

6. Annual goals related to the student's transition services

7. Documentation of student invitation to the IEP

8. Prior consent of the parent to invite a representative of any participating agency that is likely to be responsible for providing or paying for transition services. (N/A is okay)

Notice of Meeting must indicate a purpose of the meeting will be the consideration of the postsecondary goals and transition services (IDEA required but not part of the I 13 measure)

Download the pre-populated 2020-21 Transition Tracker and List from the Attachment section of the Compliance tab in the DMS.

- Excel spreadsheet – 2 tabs at the bottom
    - Tracker – used for this process
    - Full Record – student detail for your use in selection

QUALITY SCHOOLS

Transition Tracker (this is your friend!)

Identifies required number of reviews

Prepopulated: DMS Record Number, SASID, First Name, Last Name, and Date of Birth

Required - AUs complete: Date of IEP, Compliance Verified (Yes/No drop-down menu)

Optional – AUs complete: Case Manager, Reason not reviewed

Use this tool to verify your compliance results before the deadline (no surprises)

Number of Transition IEPs available for review=	20		You have been given *double* the number of records that are required. The extra records are here to give you flexibility in the records you choose to review (e.g., different schools, case managers, districts).
Number of Transition IEP reviews required=	10		Required: Fill in the "Date of IEP" and "Compliance Verified" columns for reviewed files then upload the completed Transition Tracker to the Attachment section in the Compliance tab by *June 2, 2021*.

Optional: The "Case Manager" and "Reason not reviewed" columns are for your use. |

Please select 10 from the Table below.								
DMS Record Number	SASID	First Name	Last Name	DOB	Date of IEP July 1, 2020 to June 2, 2021	Compliance Verified?	Case Manager	Reason not reviewed

CDE

- Select the students you want to include in your review from the Transition Tracker
  - Remember that your sample includes double the number required for flexibility

- Transition Tracker - Excel spreadsheet – 2 tabs at the bottom
  - Tracker – used to select students and submit data
  - Full Record – student detail for your use in selection (school, grade level, disability category, etc.)

- Upload the IEP documents for the selected students, including the Notice of Meeting, from your IEP system (e.g. Enrich) to the DMS.

  Instructions for uploading IEPs for Enrich and non-Enrich users can be found under Resources on the Directors' Corner of the CDE website

Expand

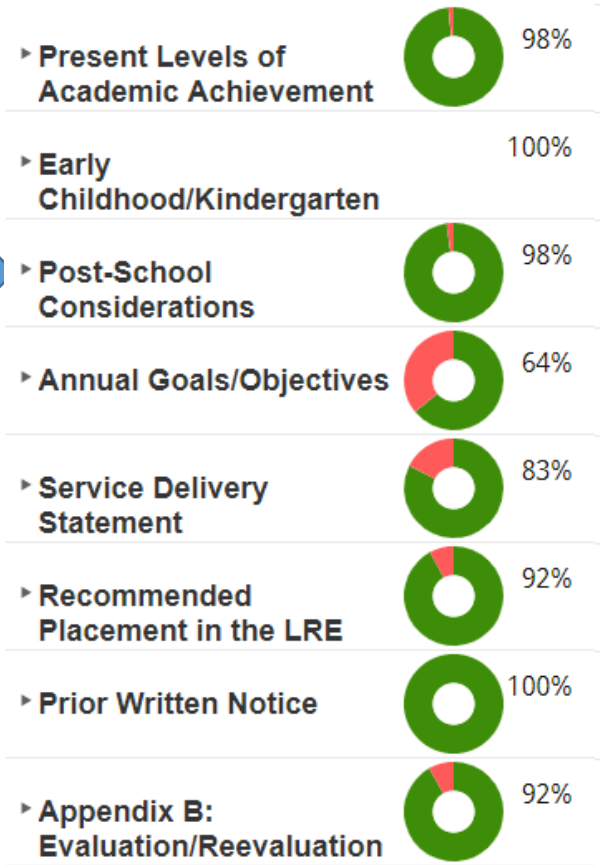|	
▸ Present Levels of Academic Achievement	98%
▸ Early Childhood/Kindergarten	100%
▸ Post-School Considerations	98%
▸ Annual Goals/Objectives	64%
▸ Service Delivery Statement	83%
▸ Recommended Placement in the LRE	92%
▸ Prior Written Notice	100%
▸ Appendix B: Evaluation/Reevaluation	92%

I 13 Elements Expanded View

IDEA/ECEA

▾ Post-School Considerations	98%			
Post Goals - Education	90%	●	●	●
Post Goals - Career	100%	●	●	●
Post Goals - Living	100%	●	●	●
Post Goals Reviewed	100%	●	●	●
Age App Assessments	100%	●	●	●
Course of Study	100%	●	●	●
Transition Services	100%	●	●	●
Student Invitation	100%	●	●	●
Postsecondary Meeting	90%	●	●	●
Outside Agency	100%	NA	NA	NA
▾ Annual Goals/Objectives	64%			
Goals Link to Postsecondary Goals	80%	●	●	●
Measurable Goals	50%	●	●	●
Aligned with Targets	30%	●	●	●

Verification of Data

- Please verify your DMS data before the deadline to ensure that any IEP with noncompliant elements have been corrected and amended. **There should be no blanks or red indicators** in your reviewed IEP protocol on the DMS when the data collection window closes.

Important: Corrections of any noncompliant sections must be completed, and new IEPs/amendments uploaded to the DMS by June 2, 2021. Remember to change your answers from "No" to "Yes".

Data Submission & Reporting
Indicator 13

Complete and Upload Transition Tracker

For each of the reviewed student files complete the following steps:

1. Fill in the date of the IEP – IEPs that fall outside of the range will not be accepted

2. Use the drop-down menu to indicate verification of compliance of the record (Yes/No)

3. Upload the completed Tracker to the Attachments section: label it "Completed I 13 Tracker 2020-21"

Reminder: Use the Tracker to verify your compliance results before the deadline (no surprises)

| Number of Transition IEPs available for review= | 20 | | You have been given *double* the number of records that are required. The extra records are here to give you flexibility in the records you choose to review (e.g., different schools, case managers, districts). |
| Number of Transition IEP reviews required= | 10 | | Required: Fill in the "Date of IEP" and "Compliance Verified" columns for reviewed files then upload the completed Transition Tracker to the Attachment section in the Compliance tab by *June 2, 2021*. Optional: The "Case Manager" and "Reason not reviewed" columns are for your use. |

Please select 10 from the Table below.

DMS Record Number	SASID	First Name	Last Name	DOB	Date of IEP July 1, 2020 to June 2, 2021	Compliance Verified?	Case Manager	Reason not reviewed

Required   Required

At 5:00 PM on June 2, 2021, the data submission window closes and your access to these files in the DMS will be locked.

Important: Requests to reopen the files after the deadline will result in one point lost for Accurate and Timely Submission of Data on the Compliance Matrix for 2022 AU Determination.

August 2021: CDE will notify AUs that the I 13 results letter is available in the Attachment section of the DMS Compliance tab

February 2022: The CDE reports state-wide Indicator 13 compliance data and evidence to demonstrate correction of any noncompliance to OSEP in the SPP/APR.

Spring 2022: Indicator 13 compliance percentage included in the Compliance Matrix of each AU's Determination

✓ Sign in to the DMS

✓ Go to the Attachment Section in the Compliance Tab

✓ Download Transition Tracker

✓ Select IEPs to review

✓ Upload selected Transition IEPs to the DMS

✓ Complete full record review in the DMS

✓ Corrections of any non-compliant sections must be completed, and new IEPs/amendments uploaded to the student record by June 2, 2021

✓ On the Transition Tracker, fill in IEP date and compliance outcome

✓ Upload completed Transition Tracker to the Attachment section in Compliance tab

Indicator 13 Checklist is available on the Secondary Transition webpage.

Office of Special Education Programs (OSEP) clarification to

State Education Agencies (SEAs) 12/16/19

- "while the SEA may provide an LEA the opportunity to correct noncompliance prior to the issuance of a written finding, the percentage reported in the APR must reflect the AU's actual level of compliance **prior to the opportunity to correct any noncompliance**."

What does this mean for CDE/AU reporting?

- Once CDE reviews a transition IEP (has eyes on it), and
- finds noncompliance in one or more elements required for I 13, then
- the IEP must be considered noncompliant for I 13 reporting purposes.
    - Individual corrections of noncompliance are still required to be completed per OSEP Memo 09-02.

27
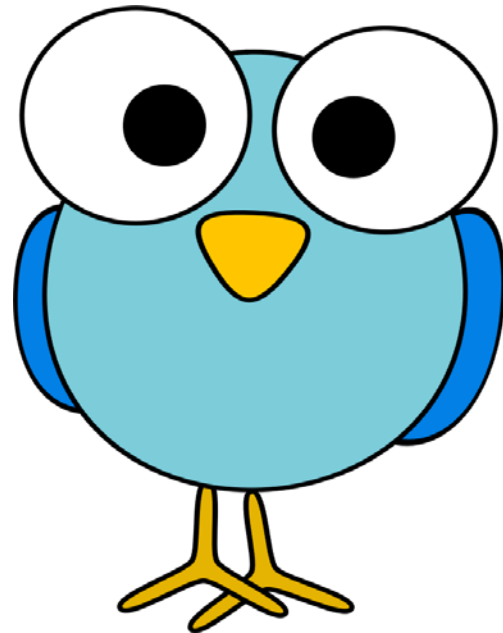
What this means for AUs that participate in CDE/AU collaborative IEP reviews

The AUs reported compliance percentage for Indicator 13 is based on results of the side-by-side file reviews ***prior to any corrections******.***

Example: 5 IEPs are reviewed, 1 IEP is determined to be noncompliant, the AU's Indicator 13 compliance percentage is reported as 80%, 4 out of 5 IEPs compliant.

Correction process remains unchanged:

- At the end of these meetings, the Director has access to a list of any individual corrections of noncompliance.
- AUs have 45 days following the date of the record reviews to complete any corrections of noncompliance, upload new documents to the DMS, and notify CDE of the completed corrections.
- The CDE team reviews the corrections for compliance and advises the Director of the status of the corrections.

Suggestions, tools and resources

Suggestions to lessen the likelihood of noncompliance when the data window closes:

- Provide training on the DMS record review process to staff conducting file reviews
- Review files for compliance on a regular basis: monthly, bi-monthly, quarterly
- Review files prior to a side-by-side collaborative review with CDE
- Use the Secondary Transition IEP File Review Checklist
- Require the AU's designated reviewer to submit the completed Transition Tracker to the Director **well ahead** of the June deadline
- Establish a systemic accountability check procedure

Important:

Don't wait until May to review IEPs

Correction of Noncompliance for I 13

Demonstrating Correction of Noncompliance for I 13
Per OSEP Memo 09-02

- Indicator 13 Compliance Target = 100%

- Reported to OSEP every February in the Colorado State Performance Plan (SPP)/Annual Performance Report (APR)

- If Colorado reports less than 100% (93% SY2017-18; 88% SY2018-19;)

Then,

The CDE must demonstrate correction of noncompliance for each noncompliant IEP in every AU with less than 100% compliance

OSEP Memo 09-02

Demonstrating Correction of Noncompliance (2 prongs)

- Prong 1 "Individual Correction"
  - The CDE must ensure that each AU has corrected all individual cases of noncompliance unless the child is no longer within the jurisdiction of the AU, and the AU must identify the root cause of the noncompliance.
    - DMS reported data – AUs must correct all individual IEPs that contain noncompliance for Indicator 13 requirements

Important not to wait until May 2021 to review IEPs

Demonstrating Correction of Noncompliance (2 prongs)

- Prong 2 "Review of Updated Data"
  - The CDE must review updated data to determine that the AU is correctly implementing the specific regulatory requirements related to Indicator 13.
    - CDE/AU collaborative side-by-side record reviews

The CDE has been doing collaborative reviews as part of our differentiated levels of support for several years and will continue this process. This alone was not enough to satisfy the requirements in OSEP Memo 09-02.

Levels of Support

Levels of Support

Years 2015-16 and 2016-17 were recalibration years. The baseline year for levels of support is 2017-2018.
***Directors can find the AUs trend data used to determine their level of support in the Summary tab in the DMS**
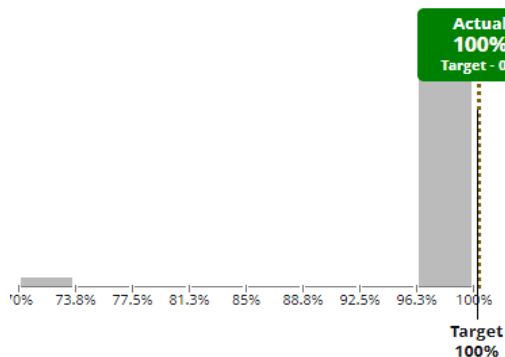
Levels of Support

All transition IEPs are compliant

Universal Support

Universal Support

- Written communication, "Indicator 13 Overview and What's New" dated 10/1/2020 available on the Secondary Transition website

- Webinar on September 30, 2020 will provide training on the record review process. The PowerPoint will be posted on the Secondary Transition website and can be used by AUs for staff training.

- A checklist of steps to follow in completing the review and the certification of data submission process can be found on the Secondary Transition website.

Targeted Support - Includes all element of Universal Support plus:

- Collaborative side-by-side record reviews
  - August 2021 - AUs will be contacted to set up collaborative record review meetings, either in person or virtually, to be completed by February 15, 2021.
  - At the end of this meeting, the Director will have access to a list of any individual corrections that need to be made on the Compliance tab of the DMS.
  - AUs will have 45 days following the record reviews to complete the corrections, upload them to the DMS and notify CDE of the completed corrections.
  - The CDE team will review the corrections for compliance and advise the Director of the status of the corrections.

One or more noncompliant IEPs for the first year

Targeted Support

Targeted Support - Includes all element of Universal Support plus

Demonstration of Correction:

- Prong 1: Individual Correction - AUs must correct the noncompliant section(s) of the individual student's most recent IEP by November 1, 2021 and identify the root cause of the noncompliance.
  - AUs will receive a letter with details about this process in August 2021.

- Prong 2: Review of Updated Data - Collaborative side-by-side record reviews
  - August 2021 - AUs will be contacted to set up collaborative record review meetings, either in person or virtually, to be completed by February 15, 2021.
  - At the end of this meeting, the Director will have access to a list of any individual corrections that need to be made on the Compliance tab of the DMS.
  - AUs will have 45 days following the record reviews to complete the corrections, upload them to the DMS and notify CDE of the completed corrections.
  - The CDE team will review the corrections for compliance and advise the Director of the status of the corrections.

One or more noncompliant IEPs for the 2nd consecutive year

Intensive Support

Intensive Support – Includes all elements of Universal and Targeted Support plus:

- The CDE will provide required individualized professional development in the area(s) of Secondary Transition IEP development based on the AU's need.
- The CDE will conduct a second check of IEPs written after the professional development.

Questions??

Contact Information
Gloria Durosko, Data and General Supervision Liaison
General Supervision & Monitoring
Exceptional Student Services Unit
Durosko_g@cde.state.co.us
303-866-6885