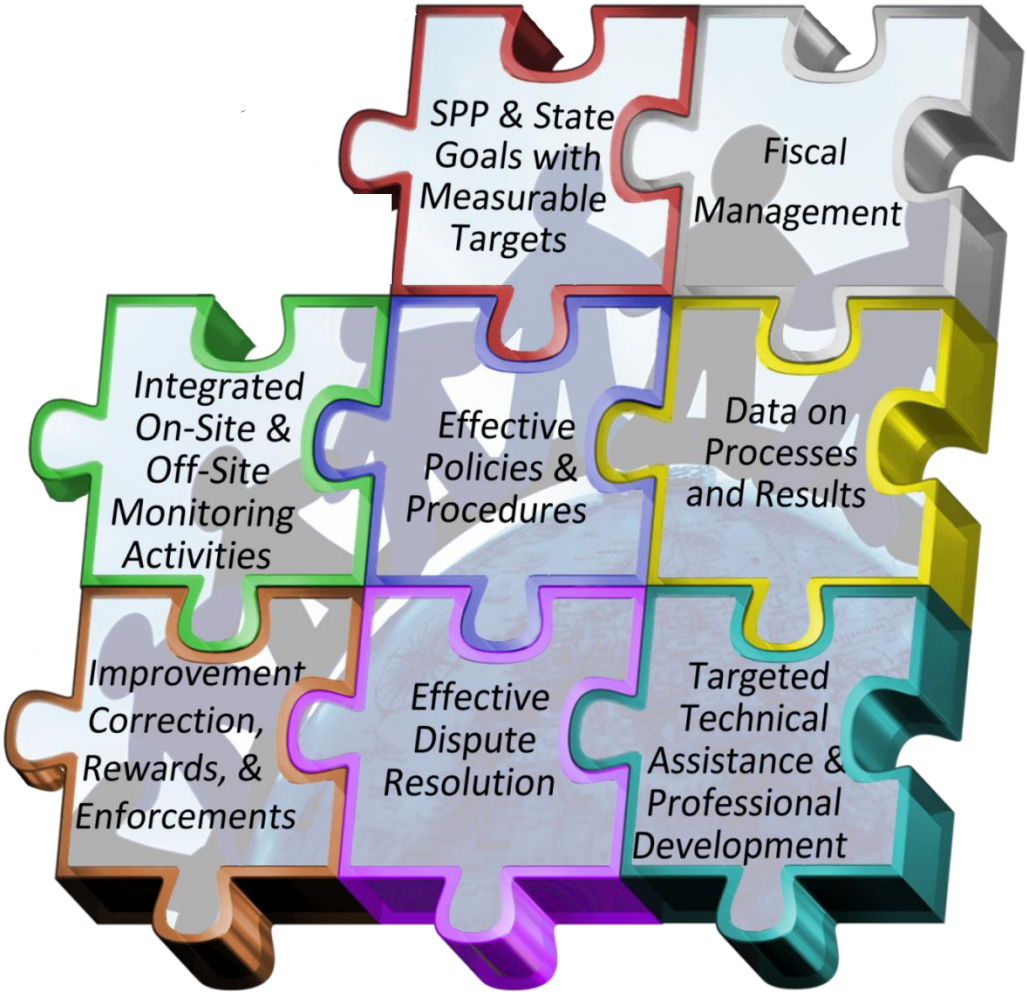
Kansas Integrated Accountability System



Investigative Questions – July 2012

This is a working document that will be reviewed and updated annually.

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Investigative Questions

Purpose

The purpose of this document is to provide questions a local team may consider to identify and analyze factors contributing to noncompliance. The contributing factors provide a hypothesis for further data analysis so that the root cause(s) may be discovered and provide for the development of meaningful strategies. The root cause(s) and the meaningful strategies can be used for completing the District Corrective Active Plan (DCAP) or can be used before noncompliance is identified as a preventative measure.

Using the Document

It is recommended that a local team of parents, teachers, administrators and other stakeholders relevant to the areas of noncompliance/concern be convened to use the questions contained in this document. Suggested questions are categorized into two main areas: (1) Policies/Procedures and (2) Providers/Practice. The questions provided are examples of the types of questions a team would consider in analyzing factors contributing to the noncompliance identified. This is not meant to be an exhaustive list of questions and local teams may consider additional questions. Some questions are designed to analyze adequacy of local management and oversight while others are geared for gathering information from administrators, teachers and about actual practices.

This document includes investigative questions for State Performance Plan (SPP) indicators 4b, 9, 10, 11, 12, 13; as well as IDEA Requirements, Gifted, and Fiscal file reviews. A local team would only complete analysis in areas of noncompliance or concern. However, consideration should be given to the fact that many of the factors and strategies identified for one area may in fact impact performance in other areas.

Technical assistance provided through Kansas' Technical Assistance System Network (TASN) is available to support districts in meeting state and federal requirements. Upon district request or KSDE direction, technical assistance providers deliver both general and targeted support to districts as data are analyzed and plans for improvement are developed, implemented and evaluated. More information regarding technical assistance can be located at: www.ksdetasn.org.

Questions for Indicator 4b

SPP/APR Indicator B 4B: Percent of districts that have: (a) a significant discrepancy, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs; and (b) policies, procedures of practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. (20 U.S.C. 1416(a)(3)(A); 1412(a)(22))

Policies/Procedures	Provider/Practice
Are the district's policies and procedures periodically reviewed and updated based on relevant discrepancy data? • What do district data show concerning disproportionate representation of racial/ethnic groups in suspensions and expulsions? • What do district data show in terms of a relationship between office referrals, suspension, and expulsion and referrals for evaluation? Does the district have policies and procedures for prevention and intervention prior to office referrals for discipline? Do district behavior policies and procedures incorporate awareness of student needs, including conducting Functional Behavioral Assessments (FBA) and development and implementation of Behavior Intervention Plans (BIP)? Does policy allow for the suspension and/or expulsion of a student for conduct other than behavior (i.e. dress code)? How are the policies and procedures provided to all employees, including new employees? Are district policies and procedures on code of conduct sensitive to diverse cultures?	Do providers apply policies and procedures about prevention and intervention prior to office referrals? Do behavior intervention plans reflect application of PBIS? Do providers know: • How to conduct an FBA? • Discipline procedures pursuant to state and special education law? Do providers receive professional development and coaching on the application of positive behavior interventions and supports?

Questions for Indicators 9/10

SPP/APR Indicator B-9: Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification. (20 U.S.C. 1416(a)(3)(C))

SPP/APR Indicator B-10: Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. (20 U.S.C. 1416(a)(3)(C))

Policies/Procedures	Provider/Practice
Does the district have policies and procedures that address appropriate evaluation and identification? • Are the policies and procedures periodically reviewed and updated based on relevant disproportionate representation data? • How are the policies and procedures provided to all employees, including new employees? Does your district consider prevention and intervention strategies at the general education level as a viable means of addressing disproportionate representation? Do schools provide an effective system of school-wide, classroom, small group and individualized supports. Do the screening and GEI processes work effectively and consistently across the district to address the disproportionate disability category or race /ethnicity? Are the assessment measures sensitive to culturally diverse practices or culturally diverse students? Does the district have policies and procedures that address students who transfer into the district? Do these policies and procedures ensure consideration of factors contributing to potential inappropriate identification?	Do providers consider the following with evaluation and identification: • For students who are referred, do data support the referral? • Are assessment and other evaluation materials provided and administered in the child's native language or other mode of communication and in a format most likely to yield accurate information on what the child knows and can do? • Are assessment and other evaluation materials selected and administered so as to be nondiscriminatory with respect to language, culture, race, and gender? Do providers have appropriate training in administering and interpreting assessment measures?

Questions for Indicator 11

SPP/APR Indicator 11: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, with that timeframe. (20 U.S.C. 1416(a)(3)(B)),
In Kansas 60 days is 60 school days as per K.A.R. 91-40-8(f) (g)

Policies/Procedures	Provider/Practice
Do we have clear policies and procedures in place regarding obtaining parental consent for evaluation and completing the evaluation within 60 school days? Do we have local timelines established for activities that are not defined by the State? If so, do we meet these timelines? Are our assessment tools designed to gather relevant information about what the child knows and can do academically, developmentally, and functionally? Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers have the necessary knowledge and skills to complete all required activities; from obtaining parental consent through the evaluation process? Do providers know based upon review of student records what was the contributing factor for the delay in providing the initial evaluation within the 60 school day?

Questions for Indicator 12

SPP/APR Indicator B-12: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.
(20 U.S.C. 1416(a)(3)(B))

Policies/Procedures	Provider/Practice
How do we ensure that children referred by Part C are found eligible for Part B, if appropriate, and have an IEP developed by their third birthday? Do we have clear policies and procedures in place regarding obtaining parental consent for evaluation, completing the evaluation within 60 school days determining eligibility, and developing an IEP prior to the child's third birthday? Does the number of days between each activity, as specified in our procedures, ensure that the IEP is developed by the child's third birthday? Do we provide opportunities for providers to receive training and TA? Do we have adequate numbers of personnel to develop IEPs by children's third birthdays? If not, what are we doing to recruit and retain qualified personnel? Do we have adequate coordination with Part C programs to ensure we receive referrals in sufficient time to conduct the evaluation and develop the IEP by the child's third birthday? Do we have mutually agreed upon timelines and procedures with Part C? Do we have an memorandum of agreement (MOA) or other written policy to address the coordination, timelines and procedures? Do we coordinate with Part C programs in accessing and using existing information and evaluations of the child to assist us in having the IEP by the third birthday?	Do our providers have the necessary knowledge and skills to implement policies and procedures related to completing all required activities -- from referral through developing the IEP? Based on a review of child records, including those where the IEP is not developed by the child's third birthday, and/or other available local data: • How many days from referral was parental consent obtained for evaluation? • How many days from parent consent was the evaluation completed? • How many days from completion of the evaluation was eligibility determined? • How many days from eligibility was the IEP completed? • What percent of the delays are related to parents not providing consent for the evaluation? • What percent of the delays are related to not completing evaluations in a timely manner? What are the reasons for those delays? • What percent of the delays are related to late referrals from Part C providers (not due to parent delay)? • In looking at disaggregated data, is there a difference in timeliness based on specific personnel who provide evaluations? Based on some other variable in our program? What were the reasons?

Policies/Procedures	Provider/Practice
Is our monitoring and supervision adequate for this requirement (e.g., are we tracking referrals, including when the referrals are made and the reason for "late referrals" in order to manage development of IEP by the child's third birthday)? Did we know we had a problem with our performance for this indicator before the State issued a finding? Do we have valid and reliable data available to address this indicator?	Based on provider interviews: • Why do our providers think we have delays in this area? • What solutions do they think will address this issue? • Do providers know how to include families in the IEP process, information sharing, and team decisions? • Do providers know how to adapt the IEP process for culturally or linguistically diverse families?

Questions for Indicator 13

SPP/APR Indicator B-13: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.
(20 U.S.C. 1416(a)(3)(B))

Question 3: Is there an appropriate measurable postsecondary goal or goals for Education/Training?

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement monitored? Are there district procedures in place for: • Providing assessment of the post-secondary education and training interests of the student? • Providing youth with disabilities the skills, services, and supports to successfully complete high school as well as enroll in and complete postsecondary education or training programs? • Supporting youth with disabilities to enroll in academic and general education classes that will prepare them for success in postsecondary education and training programs? • Informing youth and their parents about postsecondary education/training programs?	Do providers know what to consider when developing the goal(s): • Can the goal for post-secondary education and training be measured or counted? • Based on the information available about this student, does the post-secondary goal for education and training seem appropriate? • Are the student's strengths, interests, preferences, and needs taken into consideration in the development of this measurable post-secondary goal? • Does the goal for post-secondary education and training state that it will occur ***after*** the student graduates or completes high school? • Does the goal for post-secondary education and training state (the student's name) ***will*** enroll/attend a post-secondary training opportunity? • Are parents and youth engaged as active participants in the decision making process relative to identifying post-school goals for further education?

Policies/Procedures	Provider/Practice
• Providing opportunities for youth to learn about postsecondary education/training programs?	

Question 4: Is there an appropriate measurable postsecondary goal or goals for Employment?

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement monitored? Are there district procedures in place for: • Providing assessment of the employment interests of the student? • Providing services that contribute to youth becoming competitively employed once they exit school (e.g., job coaches, agreement with the local vocational rehabilitation office, etc.)? • Supporting paid, work-based learning opportunities for youth with disabilities while they are in high school (e.g., provide Carnegie unit credit, provide transportation to and from worksites, etc.)?Providing unpaid work-based learning opportunities to youth with disabilities while they are in high school?	Do providers know what to consider when developing the goal(s): • Can the goal for employment be measured or counted? • Based on the information available about this student, does the post-secondary goal for employment seem appropriate? • Are the student's strengths, interests, preferences, and needs taken into consideration in the development of this measurable post-secondary goal? • Does the goal for employment state that it will occur ***after*** the student graduates or completes high school? • Does the goal for employment state (the student's name) ***will*** work in a place of employment? • Are parents and youth engaged as active participants in the decision making process relative to identifying post-school goals for employment?

Question 5: Is there an appropriate measurable postsecondary goal or goals for Independent Living?
Note: this question is optional. A measurable post-secondary goal for independent living is only necessary if the team has determined it is needed.

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been	Do providers know what to consider when developing the goal(s):

Policies/Procedures	Provider/Practice
identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement monitored? Are there district procedures in place for: • Providing assessment of the independent living interests of the student? • Providing youth with disabilities the skills, services, and supports to successfully complete high school and pursue independent living opportunities? • Supporting youth with disabilities to work with various agencies that provide independent living services for adults with disabilities? • Informing youth and their parents about independent living options and opportunities • Providing opportunities for youth with in school to acquire independent living skills?	• Can the goal for independent living be measured or counted? • Based on the information available about this student, does the post-secondary goal for independent living seem appropriate? • Are the student's strengths, interests, preferences, and needs taken into consideration in the development of this measurable post-secondary goal? • Does the goal for independent living state that it will occur ***after*** the student graduates or completes high school? • Does the goal for independent living state (the student's name) ***and where/how he or she will*** be living? • Are parents and youth engaged as active participants in the decision making process relative to identifying post-school goals for independent living?

Question 6: Is the postsecondary goal(s) updated annually?

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement monitored?	Do providers know what to consider when updating the postsecondary goal(s) annually: • After review of the postsecondary goals, does the team consider whether the postsecondary goals need to be changed or whether the goals are still appropriate for the student? • Are parents and youth engaged as active participants in the decision making process relative to updating post-school goals? • Are the student's strengths, interests, preferences, and needs taken into consideration in the annual update of measurable post-secondary goal(s)?

Question 7: Is there evidence that the measurable postsecondary goals were based on age appropriate transition assessment?

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement monitored? Does the district provide the resources that personnel need to implement this requirement including providing a variety of age-appropriate transition assessments? Are there district procedures in place for: • Assessing the student's strengths, needs, preferences, and interests related to their goals after high school? • Using transition assessments to help the IEP team develop the student's measurable post-secondary goal(s)? • Giving new assessments as the student's interests, strengths, and preferences change at *each IEP?*	Do providers know the documentation requirements? • Is the use of age-appropriate transition assessments that inform the measurable post-secondary goals mentioned in the IEP or evident in the student's file? • Is there information located in the IEP or other student file documents where age-appropriate transition assessments are identified and results are reported? • Is there documentation in the student's file that age-appropriate transition assessments have been given that inform each of the current IEP's measurable post-secondary goals?

Question 8: Are there transition services in the IEP that will reasonably enable the student to meet his or her postsecondary goal(s)?

Policies/Procedures	Provider/Practice

Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable?
How is knowledge of this requirement provided to all employees, including new employees?
How is correct implementation of this requirement monitored?
	Do providers know the documentation requirements:
	• Is some type of activity considered under each of the following areas under transition services*:*
	  ○ Instruction,
	  ○ related services,
	  ○ community experience, development of employment and other post-school adult living

Policies/Procedures	Provider/Practice
	outcomes, and if appropriate: acquisition of daily living skills and the provision of a functional vocational evaluation. • Is there a listed transition service area and associated activity that assists in meeting each of the listed measurable post-secondary goals? • Are the transition services and corresponding activities presented as a coordinated plan for the transition from school to post-school environments? Do providers consider: • Are the parents and youth actively involved in the decision making of which transition service areas and activities are appropriate? • How student opportunities are provided for transition service activities? • When a transition service activity is experienced by the student, how is it recorded and used in the development of the next IEP?

Question 9: Do the transition services include courses of study that will reasonably enable the student to meet his or her postsecondary goal(s)?

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement monitored?	Do providers know the documentation requirements: • Do the transition services include a course of study? • Do the courses of study provide a multi-year description of the coursework that is designed to help achieve the student's desired measurable post-secondary goals? • Do the courses in the course of study align with the student's measurable post-secondary goals listed?

Question10: Is (are) there annual IEP goal(s) that are related to the student's transition services needs?

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement monitored?	Do providers know the documentation requirements? Do providers know how to assess whether the goals relate to the student's measurable post-secondary goals?

Question 11: Is there evidence that the student was invited to the IEP Team meeting where transition services were discussed?

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement monitored?	Do providers know the documentation requirements? • Is there documentation in the IEP or the student's cumulative file that the student was invited to the IEP meeting? ○ Is there a record or copy in the student's file of a student invitation to the IEP meeting, a telephone log inviting the student to the IEP or a 10 day meeting notice with the student listed as an addressee in the student's file? Do providers consider: • How to support student involvement in the IEP process? • How soon before the IEP does the student need to be invited to support the student's attendance and participation?

Question 12: *If appropriate*, is there evidence that a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority?

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement monitored? Are there district procedures in place for developing and updating MOUs with adult service agencies in the community which provide services to individuals with disabilities and their families?	Do providers know the documentation requirements? • If determined appropriate to invite one or more agency representatives, did the parents, or adult student, provide consent for the invitation? • Is there evidence on the current IEP signature page or on the 10 day meeting notice form that a representative from any agency that provides services related to one or more of the following areas (but not limited to) was invited to attend the IEP (if deemed necessary by the IEP team): *post-secondary education, vocational education, integrated employment, continuing or adult education, adult services, independent living, or community experiences?*

Guiding Questions for IDEA File Review Items

Question 5: Did the Part B agency participate in the transition planning conference? (34 CFR 300.124(c))

Policies/Procedures	Provider/Practice
Does a local MOA exist? Was the MOA developed jointly with Part C and Part B personnel? Does the MOA clearly describe the responsibilities of both Part C and Part B? • Identifies appropriate personnel to be involved Has the MOA been given and explained to all providers? Is the MOA reviewed and updated at least annually? Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers have the necessary knowledge and skills to implement the MOA? Based on what was documented/recorded, were the responsibilities in the MOA carried out? • Meeting notice/invitation by Part C • List of participants/sign in • Any alternate method of participation by Part B

Question 6: Were the Parent Rights document, prior written notices, and requests for consent, provided to the parents/legal education decision maker in language understandable to the general public and in the native language of the parent? (34 CFR 300.503(c)(1)(i) through (ii)

Policies/Procedures	Provider/Practice
Are there procedures that inform providers how to access the content of applicable documents in the native language of the parents/education decision maker to ensure understanding?	Do providers know how to access these documents?

Policies/Procedures	Provider/Practice
Is there a procedure to ensure that providers document the provision of applicable documents in the native language of the parents/education decision maker? Have resources been identified and/or utilized to meet this regulatory requirement? Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers have a method to determine when the content of applicable documents needs to be provided in the native language of the parents/education decision maker? Do providers know how and where to document the provision of applicable documents in the native language of the parents/education decision maker?

Question 7: Were the parents/legal education decision makers given their Notice of Parental Rights (procedural safeguards) on all required occasions? (34 CFR 300.504)

Policies/Procedures	Provider/Practice
Are there procedures that outline when the provision of Notice of Parental Rights is required? Are there procedures that outline how to determine to whom the document will be provided (i.e. parent(s); education decision maker; student if 18 or older)? Is there a procedure to ensure that providers document the provision of the Notice of Parental Rights to the parents/education decision maker? Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees?	Do providers know how to access the Notice of Parental Rights document? Do providers know on what occasions the Notice of Parental Rights must be provided? Do providers know how and where to document the provision of the Notice of Parental Rights?

Policies/Procedures	Provider/Practice
How is correct implementation of this regulatory requirement monitored?	

8. Was the notice of the IEP meeting given to the parents (and student if 18 years or older) at least 10 calendar days before IEP meeting? (34 CFR 300.322(a))

Policies/Procedures	Provider/Practice
Are there procedures that outline when the IEP meeting notice is required? Are there procedures that outline how to determine to whom the meeting notice will be provided (i.e. parent(s); education decision maker; student if 18 or older)? Is there a procedure to ensure that providers document the provision of the IEP meeting notice to the parents/education decision maker? Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know how to access the IEP meeting notice document? Do providers know on what occasions the IEP meeting notice must be provided? Do providers know how and where to document the provision of the IEP meeting notice?

9. Did the IEP meeting notice indicate the date, time, location, and purpose of the meeting and titles or positions of the persons who will attend on behalf of the agency. (34 CFR 300.322(b)(i))

Policies/Procedures	Provider/Practice
Are there procedures that outline what must be included in the IEP meeting notice? Is there a procedure to ensure that providers document the provision of the IEP meeting notice that contains the required information? Have roles and responsibilities of personnel involved in implementing this requirement been	Do providers know the required components of the IEP meeting notice? Do providers know where to file a copy of the IEP meeting notice to document that all required components were included?

Policies/Procedures	Provider/Practice
identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	

10. Did one or both of the child's parents (or child if 18 or older) attend? (34 CFR 322(d))

Policies/Procedures	Provider/Practice
Is there a process for documenting that the parents/education decision maker (child if 18 or older) attended the IEP meeting? If the parents did not attend the IEP meeting, is there a process for documenting that the parents/education decision maker (child if 18 or older) were given an opportunity to participate in the IEP? • Invited • Considered alternate means of participation. • Efforts to convince parents/education decision maker to attend. At least two attempts using two different methods. How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know what steps to take to ensure parent participation in the IEP meeting and how to document these steps? Are IEP meetings scheduled far enough in advance so there is time to accommodate valid parent/education decision maker (child if 18 or older) requests for rescheduling meetings?

11. If the child is or may be, participating in the regular education environment, did at least one regular education teacher of the child attend? (34 CFR 300.321(a)(2))

Policies/Procedures	Provider/Practice
For school age children, is there a process for identifying which regular education teacher(s) of the child will be invited to attend the IEP meeting to ensure that at least one will attend?	Do providers have the necessary knowledge and skills to implement the steps (including excusal requirements) required to ensure regular education teacher participation in the IEP meeting

Policies/Procedures	Provider/Practice
For school age children, is there a process for documenting that at least one regular education teacher of the child attended the IEP meeting? For preschool age children, is there a process for identifying whether there is a regular education teacher, and if so, who will be invited to attend the IEP meeting? For preschool age children, is there a process for documenting that at least one regular education teacher of the child, if required, invited/attended the IEP meeting? Are there procedures that outline all requirements related to excusing a required IEP team member? • Determine who has LEA authority to request excusal versus rescheduling the meeting. • Determine forms to be used. • Obtaining written parent agreement. • Obtaining written input from excused team member, if required. Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	and how to document these steps?

12. Did at least one special education teacher of the child attend or, where appropriate, one special education provider of the child? (34 CFR 300.321(a) (3))

Policies/Procedures	Provider/Practice
Are there procedures that outline all requirements related to excusing a required IEP team member? Have roles and responsibilities of personnel	Do providers have the necessary knowledge and skills to implement the steps (including excusal requirements) required to ensure a special education teacher participation in the IEP meeting

Policies/Procedures	Provider/Practice
involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	and how to document these steps?

13. Did a LEA representative attend? Did an LEA representative attend? (34 CFR 300.321(a) (4))

Policies/Procedures	Provider/Practice
Are there procedures that outline all requirements related to excusing a required IEP team member? Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers have the necessary knowledge and skills to implement the steps (including excusal requirements) required to ensure a LEA representative participation in the IEP meeting and how to document these steps? Does the LEA representative meet the following criteria: • Qualified to provide or supervise provision of special education services; • has knowledge of the general education curriculum; and • knowledgeable about the availability of the school's resources.

14. Did an individual who can interpret the instructional implications of evaluation results attend? (This may be a regular education teacher, special education teacher, or LEA representative already mentioned.) (34 CFR 300.321(a) (5))

Policies/Procedures	Provider/Practice
Are there procedures that outline all requirements related to excusing a required IEP team member? Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable?	Do providers have the necessary knowledge and skills to implement the steps (including excusal requirements) required for someone who can interpret instructional implications participation in the IEP meeting and how to document these steps?

Policies/Procedures	Provider/Practice
How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	

15. Does the file and/or IEP contain documentation that the IEP team considered the concerns of the parents for enhancing the education of their child? (34 CFR 300.324(a) (1) (ii))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know the documentation requirements? Do providers know how to address concerns of the parents?

16. Is there documentation in the special education file that the educational placement was reviewed annually? (34 CFR 300.116(b) (1))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know the documentation requirements? Do providers know what circumstances might necessitate a review of the IEP (i.e. annual review, parent or staff request, transfer student)?

17. Did the IEP team consider any potential harmful effects of the placement on the child (educational and/or social consequences), or on the quality of services that he or she needs? (34 CFR 300.116(d))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know the documentation requirements? Do providers know how to analyze whether there are harmful effects of the placement?

18. Does the IEP indicate how progress toward measurable annual goals will be measured? (34 CFR 300.320(a) (3)(i))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know what elements are required to include in how progress will be measured for annual goals? Do providers receive training and coaching on using progress data for decision making (i.e instructional changes that may need to be made; formative monitoring)?

19. Is documentation included which indicates when periodic reports on the child's progress toward meeting the annual goals will be provided to the parent? (34 CFR 300.320(a) (3) (ii))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement	Do providers know timeline requirements of when periodic reports are due? Do providers know the documentation requirements?

provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	

20. Does the IEP indicate: a. Which State and District Assessments the student will participate in for each content area? b. Accommodations that are necessary on State and District Assessments (34 CFR 300.320(a)(6)). c. If the child participates in the KAMM, KAA, or is not assessed, and, if so does the IEP specify: Which assessment the child will participate in; Why the child cannot participate in the regular assessment; Why the particular assessment selected is appropriate for the child.

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do the providers know the criteria for selecting appropriate assessments (i.e. KAMM eligibility criteria)? Do the providers know the documentation requirements? Do the providers know how to select appropriate accommodations? Do the providers know how to use the assessment schedule?

21. Will the student be taking the Kansas Assessment of Modified Measures (KAMM) in at least one subject? This is a skip logic question.

22. If the student is taking the Kansas Assessment of Modified Measures (KAMM) in at least one subject (reading or math) are all academic goals based on the content standards for the grade in which the student is enrolled? (34 C.F.R. 200.1(e) (iii),)(34 C.F.R. 200.1(f) (2) (ii) (a))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know how to write appropriate standards based goals?

23. Does the IEP include the projected date for the beginning of services, program accommodations, and/or modifications or supports for school personnel? (34 CFR 300.320(a) (7))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know how to document frequency, location and duration so the level of the school's commitment of resources will be clear to parents and IEP members? Note: For data collection purposes, KSDE requires that the frequency of the services and modifications be reported as minutes/day/weeks. However, regulations do not require the documentation on the IEP to follow this format. Do providers know the purpose of the requirement?

24. Does the IEP include the anticipated frequency, location, and duration of services and modifications? (34 CFR 300.320(a) (7))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know how to document frequency, location and duration so the level of the school's commitment of resources will be clear to parents and IEP members? Note: For data collection purposes, KSDE requires that the frequency of the services and modifications be reported as minutes/day/weeks. However, regulations do not require the documentation on the IEP to follow this format. Do providers know the purpose of the requirement?

25. Was the IEP amended either by the IEP team or through written amendment process during the current school year? (CFR 300.324 (a) (4)) This is a skip logic question.

26. If the IEP was amended during the current school year, was written Prior Notice provided to the parent informing them of the proposed action to amend the IEP? (34 CFR 300.503(a))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable?	Do providers know that Prior Written Notice is required for any change to an IEP?

Policies/Procedures	Provider/Practice
How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	

27. Was this student reevaluated within the current school year? This is a skip logic question.

28. Was Written Prior Notice provided to the parents and informed parental consent obtained before conducting the reevaluation? (34 CFR 300.300(c)), (34 CFR 300.503(a))

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored? How is correct implementation of this regulatory requirement if no additional data is available?	Do providers know how to access the Prior Written Notice and Consent form? Do providers know when Prior Written Notice is provided and how to obtain Consent? • What activities occur before notice is provided? • Who prepares the notice form? • What methods are used to obtain consent? • How is the date that consent was received documented? • How is receipt of consent communicated so that the evaluation can begin? Do providers know what to do if consent is not given?

Questions for Gifted File Review Items

The purpose of this document is to provide ideas for the types of questions a LEA team would consider in analyzing factors contributing to noncompliance. It is recommended that the LEA use a team of parents, teachers, administrators and other relevant stakeholders to analyze data in order to determine the factors contributing to the noncompliance. Suggested questions are categorized into two main areas: (1) Policies/Procedures and (2) Providers/Practice. This is not meant to be an exhaustive list of questions. Some questions are designed to analyze adequacy of LEA management and oversight while others are geared for gathering information from administrators, teachers and about actual practices. The questions provided are examples of the types of questions a team would consider in analyzing factors contributing to the noncompliance identified. The contributing factors, once identified, can lead to the development of meaningful strategies for the District Corrective Active Plan (DCAP).

Question 4. Was notice of the IEP meeting given to the parents at least 10 calendar days in advance of the IEP meeting? K.A.R. 91-40-17(a)(2)

Policies/Procedures	Provider/Practice
Are there procedures that outline when the IEP meeting notice is required? Are there procedures that outline how to determine to whom the meeting notice will be provided (i.e. parent(s); education decision maker; student if 18 or older)? Is there a procedure to ensure that providers document the provision of the IEP meeting notice to the parents/education decision maker? Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement assured/monitored?	Do providers know how to access the IEP meeting notice document? Do providers know on what occasions the IEP meeting notice must be provided? Do providers know how and where to document the provision of the IEP meeting notice?

Question 5. Was Prior Written Notice provided to the parent and written parental consent obtained before conducting an initial evaluation or any reevaluation? K.A.R. 91-40-27(a)(1)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement assured/monitored?	Do providers know how to access the Prior Written Notice and Consent form? Do providers know when Prior Written Notice is provided and how to obtain Consent? • What activities occur before notice is provided? • Who prepares the notice form? • What methods are used to obtain consent? • How is the date that consent was received documented? • How is receipt of consent communicated so that the evaluation can begin? Do providers know what to do if consent is not given?

Question 6. Did at least one of the parents attend the IEP meeting? If not, is there a detailed record of at least two attempts to contact them using at least two different methods of communication? KAR 91-40-17(e)(1)(A)-(D)

Policies/Procedures	Provider/Practice
Is there a process for documenting that the parents/education decision maker (child if 18 or older) attended the IEP meeting? If the parents did not attend the IEP meeting, is there a process for documenting that the parents/education decision maker (child if 18 or older) were given an opportunity to participate in the IEP? • Invited • Considered alternate means of participation. • Efforts to convince parents/education decision maker to attend. At least two attempts using two different methods. How is knowledge of this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement assured/monitored?	Do providers know what steps to take to ensure parent participation in the IEP meeting and how to document these steps? Do providers schedule IEP meetings far enough in advance so there is time to accommodate valid parent/education decision maker (child if 18 or older) requests for rescheduling meetings?

Question 7. Does the IEP include a description of the student's present level of academic achievement and functional performance (PLAAFP) including how the student's giftedness affects their involvement and progress in the general education curriculum? K.S.A. 72-987(c)(1)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement assured/monitored?	Do providers know the 3 required components of the PLAAFPS? 1. Current performance (strengths, weaknesses, social issues…) 2. Impact of exceptionality (instructional/subject levels, assessment scores) 3. Baseline data is provided for EACH identified need. Do providers receive training and coaching on writing PLAAFPS?

Question 8. Does the IEP include a statement of measurable annual goals, including academic and functional, designed to meet the student's needs that result from giftedness, to enable the student to be involved in and make progress in the general education or advanced curriculum? K.S.A. 72-987(c)(2)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this requirement assured/monitored?	Do providers know the four parts of the measurable annual goal? • Timeframe • Condition • Behavior • Criterion Do providers receive training and coaching on writing measurable annual goal(s)?

Question 9. Does the IEP indicate how progress toward meeting the annual goals will be measured? K.S.A. 72-987(c)(3)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable?	Do providers know what elements are required to include in how progress will be measured for annual goals?

Policies/Procedures	Provider/Practice
How is knowledge of this requirement provided to all employees, including new employees How is correct implementation of this regulatory requirement assured/monitored?	Do providers receive training and coaching on using progress data for decision making (i.e instructional changes that may need to be made; formative monitoring)?

Question 10. Does the IEP include when periodic reports on the progress the student is making toward meeting the annual goals will be provided to the parent? K.S.A. 72-987(c)(3)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement assured/monitored?	Do providers know the timeline requirements of when periodic reports must be provided to parents? Do providers know the documentation requirements?

Question 11. Does the IEP include a projected date for the beginning of the services and modifications, and the anticipated frequency, location, and duration of those services? K.S.A. 72-987(c)(7)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement assured/monitored?	Do providers know how to document frequency, location and duration so the level of the school's commitment of resources will be clear to parents and IEP members? Note: For data collection purposes, KSDE requires that the frequency of the services and modifications be reported as minutes/day/weeks. However, regulations do not require the documentation on the IEP to follow this format. Do providers know the purpose of the requirement?

Question 12. Does the IEP indicate the document was reviewed at least annually? K.S.A. 72-987(f)(1)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement assured/monitored?	Do providers know the documentation requirements? Do providers know what circumstances might necessitate a review of the IEP (i.e. annual review, parent or staff request, transfer student)?

Question 13. Does the file or IEP contain documentation that the IEP team take into account the concerns of the parents for enhancing the education of their child? K.S.A. 72-987(d)(1)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know how to document parental participation in the development or review of the student's IEP? Do providers know the purpose of this requirement?

Question 14. Does the file contain documentation that in determining the educational placement of the student, the placement decision was made by a group of peoples, including the student's parents and other persons knowledgeable about the student? K.A.R. 91-40-21(c)(2)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this regulatory	Do providers know the documentation requirements? Do providers know what educational placement options are available in the district and community?

requirement monitored?	

Question15. Was the student reevaluated within the current year? This is a skip logic question

Question16. Did the reevaluation team consider information from a variety of existing sources, including aptitude and achievement tests, parent input, teacher recommendations, and social or cultural background and adaptive behavior (K.A.R. 91-40-10(d)(1)(A)-(C)(E), and not merely those that are designed to provide a single general IQ (intelligent quotient) measure? K.A.R. 91-40-9(a)(6)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored? Are sufficient resources available to providers to meet this requirement?	Do providers know the documentation requirements? Do providers have specific responsibilities for gathering, analyzing, and reporting the reevaluation data?

Question 17. Did the reevaluation team and the parent of the student prepare a written reevaluation report? K.A.R. 91-40-10 (a)(1)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know the documentation requirements? Do providers know the purpose of a written reevaluation report? Do providers know how to involve the parent in preparing a written reevaluation report?

Question 18. Were the parents provided, at no cost, a copy of the reevaluation report? K.A.R. 91-40-10(b)

Policies/Procedures	Provider/Practice
Have roles and responsibilities of personnel involved in implementing this requirement been identified, including procedures to be followed in the event that identified personnel are unavailable? How is knowledge of this requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do providers know how and where to document that the parents were provided, at no cost, a copy of the reevaluation report?

Questions for Fiscal File Review Items

Question 3: Does the district have policies and procedures outlining how draw requests of Title VI-B IDEA funds are determined?

Policies/Procedures	Provider/Practice
How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply the policies and procedures concerning drawdowns? Are interested parties (business manager and special ed director) adequately communicating in regard to how VIB funds should be requested for the district?

Question 5: Are policies and procedures in place to ensure requested funds are expended within 30 days so as not to earn interest on federal funds? (34 CFR 80.21)

Policies/Procedures	Provider/Practice
How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply the policies and procedures to prevent earning interest on federal funds drawn down on a monthly need basis?

Question 7: Does the district have policies and procedures to ensure Title VI-B IDEA funds are used in accordance with all federal requirements of allowable costs? (34 CFR 80.22 & OMB Circular A-87, Appendix A, C)

Policies/Procedures	Provider/Practice
How is this regulatory requirement provided to new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply the policies and procedures concerning allowable cost for VIB funds?

Question 8: Does the district have written policies and procedures covering the use, management, and disposition of property acquired under Federal programs (such as Title VI-B IDEA funds)?

Policies/Procedures	Provider/Practice
How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply the policies and procedures concerning equipment purchases with VIB (or any federal funds) funds?

Question 11: Are semi-annual certificates maintained for employees whose activity is solely dedicated to special education and salaries are supported by Title VI-B IDEA funds? (OMB Circular A-87)

Policies/Procedures	Provider/Practice
Are standard forms or district documentation for time and effort clearly identified? Are employees adequately informed as to their assigned duties either through annually updated job descriptions and/or training? Are employees adequately trained so they understand the purpose of the time and effort documentation? How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply the policies and documents for federal time and effort?

Question 12: Are the certifications signed by the employee or supervisory official who has firsthand knowledge of the work performed by the employee? (OMB Circular A-87)

Policies/Procedures	Provider/Practice
Are procedures in place to ensure the supervisor has knowledge of their employee's activity? How is this requirement relayed to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Are supervisors aware of the activities on which their employees are (and should be) working?

Question 13: Are Personnel Activity Reports or equivalent documentation maintained for employees whose activity is split between special education and another program and whose salaries or wages are supported by Title VI-B IDEA funds? (OMB Circular A-87)

Policies/Procedures	Provider/Practice
Are standard forms or district documentation for time and effort clearly identified? Are employees adequately informed as to their assigned duties either through annually updated job descriptions and/or training? Are employees adequately trained so they understand the purpose of the time and effort documentation? How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply the policies and documents for federal time and effort?

Question 14: Does the district have policies and procedures that meet or exceed Federal retention requirements of three years from the final expenditure report or audit resolution or other action (whichever is later) for the supporting documentation of VI-B IDEA draw requests? (34 CFR 80.42(b)(1) & 34 CFR 80.42(b)(2))

Policies/Procedures	Provider/Practice
How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply the policies and procedures for retaining supporting documentation associated with VIB drawdowns?

Question 15: Is the supporting documentation readily available for review?

Policies/Procedures	Provider/Practice
Does the current storage system allow for immediate retrieval of such documents? Is documentation (either training guides or procedures) available for staff who may not be familiar with the system so such information can be produced in the absence of key personnel?	Do all applicable staff know and understand how to apply these policies and procedures? Are employees adequately trained in using the system?

Policies/Procedures	Provider/Practice
How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	

Questions 17: Describe how the LEA provides Title VI-B IDEA funds to those charter schools on the same basis and at the same time as the other schools in the LEA? (34 CFR 300.209(b))

Policies/Procedures	Provider/Practice
Are policies in place detailing the procedures for distributing VIB funds evenly through the LEA? Do special education and related staff provide services to students with disabilities in charter schools? If such services are being provided, how is it being documented? How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply these policies and procedures? Do all applicable staff know and understand how to report such service performed to the district?

Question 19: Describe how the LEA ensures the proportionate amount of Section 611 and 619 funds are used to provide special education and related services to children with disabilities parentally placed in private elementary and secondary schools located in the LEA? (34 CFR 300.133)

Policies/Procedures	Provider/Practice
Are policies in place detailing the procedures for reconciling expenditures for privately placed students with disabilities to the allocated amount listed in the allocation chart? How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply these policies and procedures? Do all applicable staff know how to report services performed for private school students with disabilities to the district so an accurate reconciliation can be accomplished? Is adequate communication established between private schools and LEA?

Question 20: Does the LEA review the actual expenditures toward providing private school children with special education and related services against the Private School Proportionate Share allocation to ensure the entire Title VI-B IDEA portion was expended on such services before state and local funds are used? (34 CFR 300.133(d))

Policies/Procedures	Provider/Practice
Are policies in place detailing the procedures for reconciling expenditures for privately placed students with disabilities to the allocated amount listed in the allocation chart? How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply these policies and procedures? Do all applicable staff know how to report services performed for private school students with disabilities to the district so an accurate reconciliation can be accomplished? Is adequate communication established between private schools and LEA?

Question 21: How does the district ensure state and local funds supplement, not supplant, the proportionate amount of federal funds required to be expended for children with disabilities parentally placed in private schools?

Policies/Procedures	Provider/Practice
Are policies in place detailing the procedures for reconciling expenditures for privately placed students with disabilities to the allocated amount listed in the allocation chart? How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply these policies and procedures? Do all applicable staff know how to report services performed for private school students with disabilities to the district so an accurate reconciliation can be accomplished? Is adequate communication established between private schools and LEA?

Question 22: Does the LEA maintain control over all Part B funds, property, equipment, and supplies used for children who are placed in private school by their parents? (34 CFR 300.144(a))

Policies/Procedures	Provider/Practice
Are policies in place detailing the requirement for the LEA to maintain control over all Part B funds, property, equipment, and supplies used for children with disabilities who are placed in private schools? How is this regulatory requirement provided to all employees, including new employees?	Do all applicable staff know and understand how to apply these policies and procedures? Do provides understand all Part B funds, property, equipment, and supplies used for children with disabilities who are placed in private schools must remain under the control of the LEA?

Policies/Procedures	Provider/Practice
How is correct implementation of this regulatory requirement monitored?	

Question 24: Were the services provided by the public school personnel necessary services not normally provided by the private school? (34 CFR 300.142(a))

Policies/Procedures	Provider/Practice
Is there an understanding, which is documented, of the services provided by the private school? How is correct implementation of this regulatory requirement monitored?	Is adequate communication established between private schools and LEA?

Question 26: Were services performed by the private school personnel outside of the regular duty hours and under the supervision of the public agency? (34 CFR 300.142(b))

Policies/Procedures	Provider/Practice
Are policies in place detailing the procedures of VIB funds supporting the salary of private school personnel providing equitable services? Are these policies and procedures shared with the private school? How is this regulatory requirement provided to all employees, including new employees? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply these policies and procedures? Is adequate communication established between private schools and LEA?

Question 29: Did the LEA reserve and use the required 15% of its total Part B 611 and 619 funds allocation for comprehensive CEIS? (34 CFR 300.646(b)(2))

Policies/Procedures	Provider/Practice
Did the LEA understand such an amount was required to use for CEIS? Did the LEA review the guidance on CEIS requirements? Was the LEA informed by the state of such a requirement?	Do all applicable staff know and understand how to apply these policies and procedures?

Policies/Procedures	Provider/Practice
How is correct implementation of this regulatory requirement monitored?	

Question 30: Were CEIS funds used to implement core instruction or fund universal screening?

Policies/Procedures	Provider/Practice
Did the LEA review the guidance on appropriate CEIS expenditures? Was that guidance adequately distributed among staff? How is correct implementation of this regulatory requirement monitored?	Do all applicable staff know and understand how to apply the guidance on CEIS expenditures?

Question 31: Describe how the LEA ensures CEIS funds are only used for allowable costs?

Policies/Procedures	Provider/Practice
Did the LEA review the guidance on appropriate CEIS expenditures? Was that guidance adequately distributed among staff? How is correct implementation of this regulatory requirement monitored?	Do providers understand and know and understand how to apply the guidance on CEIS expenditures?

Question 32: If the LEA aligns CEIS funds with Elementary and Secondary Education Act (ESEA) funded activities, how does the LEA ensure the CEIS funds supplement, not supplant funds made available under ESEA? (34 CFR 300.226(e))

Policies/Procedures	Provider/Practice
Did the LEA review the guidance on CEIS requirements? How is correct implementation of this regulatory requirement monitored?	Do providers understand and know and understand how to apply the guidance on CEIS requirements?

Question 33: Does the LEA use CEIS funds to provide services to only students, in grade K through 12, who are not identified as needing special education and related services, but who need additional support to succeed in the general education environment? (34 CFR 300.226)

Policies/Procedures	Provider/Practice
Did the LEA review the guidance on CEIS requirements? Was that guidance adequately distributed among staff? Was the goal of the CEIS project clearly stated to other associated staff? How is correct implementation of this regulatory requirement monitored?	Do providers know and understand how to apply the guidance on CEIS requirements?

Question 35: Does the LEA review the Schoolwide actual expenditures against the calculation of the allowable amount to ensure only the allowable amount was expended?

Policies/Procedures	Provider/Practice
Was the LEA aware of the requirements of the Consolidated Schoolwide Program? Did the LEA have a process to measure expenditures against the allowable limit? How is correct implementation of this regulatory requirement monitored?	Did applicable staff know and understand how to apply the process and/or guidance on the allowable limit?

Question 36: Describe the process used to ensure Schoolwide expenditures do not surpass the allowable amount.

Policies/Procedures	Provider/Practice
Was the LEA aware of the requirements of the Consolidated Schoolwide Program? Did the LEA have a process to measure expenditures against the allowable limit? How is correct implementation of this regulatory requirement monitored?	Did applicable staff know and understand how to apply the process and/or guidance on the allowable limit?