**Checklist for Assessing the   
State General Supervision System**

## Introduction

On July 24, 2023, the Office of Special Education Programs (OSEP) released its “State General Supervision Responsibilities Under Parts B and C of the Individuals with Disabilities Education Act (IDEA): Monitoring, Technical Assistance, and Enforcement” questions and answers document 23-01. The guidance (referred to as OSEP QA 23-01) outlines OSEP’s expectations to exercise their general supervision responsibilities under IDEA and supersedes (as well as consolidates) previously issued OSEP guidance.

## How to Use This Document

This resource is focused on Part B responsibilities under IDEA and is designed to support state educational agency (SEA) staff in assessing their general supervision systems, policies, procedures, and practices against the expectations outlined in OSEP QA 23-01. This document is organized around the five sections of OSEP QA 23-01. Each of the five sections delineates between expectations that are required versus recommended. For instance, “must” indicates a requirement that is mandatory. “Should” suggests a strongly recommended practice. “May,” “could,” and “encouraged” typically denote optional or discretionary practices. Understanding this terminology should help states rate each criterion according to state capacity as well as priority in terms of required actions.

Further, each row includes space for state staff to consider the extent to which their agency has responsive policies and procedures in place and the current level of documentation. SEAs are encouraged to assemble a team of relevant staff to collaboratively review and reflect on this resource to identify any gaps or misalignments with federal expectations and serve as a useful starting point for determining priorities for general supervision system improvement.

NCSI would like to thank the IDEA Data Center (IDC) and the Center for IDEA Fiscal Reporting (CIFR) for their input and engagement into creating this resource to make it useful for our shared audiences.

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## State General Supervision Responsibilities

To complete the following sections, rate each criterion based on your state’s current level of implementation and documentation.

For each **criterion**, select either **Needs Improvement**, **Somewhat in Place**, or **In Place**, and provide links to **Documentation** that support your rating. If your documentation is not online, you may also list the names of supporting documents.

### General Supervision System

| Criterion | Needs Improvement | **Somewhat in Place** | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state’s general supervision system for monitoring its LEAs ensures a primary focus on   * improving educational results and functional outcomes for infants and toddlers with disabilities, their families, and children with disabilities; * ensuring that local educational agencies (LEAs) meet the requirements under IDEA: 20 U.S.C. §§ 1412(a)(11), 1416(a); 34 C.F.R. §§ 300.149, 300.600–300.604, and 300.608; and * ensuring that the state has a system that collects and reports valid and reliable data.   See OSEP QA 23-01 A-2. |  |  |  | Click or tap here to enter text. |
| MUST: The state’s general supervisory system under IDEA includes other federal monitoring requirements, including those under   * the Office of Management and Budget (OMB)  Uniform Guidance,[[1]](#footnote-2) * the General Education Provisions Act (GEPA) in 20 U.S.C. § 1232d(b)(3)(A), and * the Education Department General Administrative Regulations (EDGAR) in 34 C.F.R. Part 76.   See OSEP QA 23-01 A-1. |  |  |  | Click or tap here to enter text. |
| MUST: The SEA makes annual determinations about the performance of each of its LEAs and enforces Part B requirements.  See OSEP QA 23-01 A-1. |  |  |  | Click or tap here to enter text. |
| MUST: The state’s general supervision system addresses IDEA implementation for **each** educational program for children with disabilities administered within the state, including   * programs administered by any other state or local agency (but not including elementary schools and secondary schools for Indian children operated or funded by the Secretary of the Interior), * Section 619 (preschool) programs, * public charter schools, * children with disabilities residing in nursing homes, and * educational programs in juvenile and adult correctional facilities.   See OSEP QA 23-01 A-1 and A-10, and 34 C.F.R. §§300.149, 300.600–300.604, and 300.608. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state monitors all LEAs within a reasonable period of time and at least once within a six-year period (which is based on the duration of the State Performance Plan/Annual Performance Report [SPP/APR]).  See OSEP QA 23-01 A-11. |  |  |  | Click or tap here to enter text. |
| SHOULD: Where LEA data or other available information indicates an area of concern, the state considers whether more frequent or targeted monitoring (i.e., a monitoring activity that occurs outside of the normal cycle to address emerging or new issues, and typically is limited in scope) is necessary.  See OSEP QA 23-01 A-11. |  |  |  | Click or tap here to enter text. |
| MUST: The state has the ability to ensure the requirements and implementation of IDEA are met even when there is a disaster.  If traditional on-site monitoring activities are not possible during a pandemic or natural disaster, there is flexibility to collect information needed to ensure the implementation of IDEA by LEAs through other means and by using the multiple components of the state’s general supervision system.  See OSEP QA 23-01 A-14.[[2]](#footnote-3) |  |  |  | Click or tap here to enter text. |
| SHOULD: The state informs stakeholders—including children with disabilities and parents of children with disabilities—and groups that represent the families and communities served by the LEAs, as well as engages OSEP-funded Parent Training and Information Centers (PTIs), about its general supervision systems and monitoring activities.  Examples include making the state’s monitoring schedule available to the public, including the names and number of LEAs monitored in a given year, the results of those monitoring activities, and any additional targeted monitoring activities that may have occurred.  See OSEP QA 23-01 A-12 and A-13. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state involves local-level staff, teachers, specialized instructional support personnel, Section 619 (preschool) coordinators, and related service providers to better understand how LEAs are applying state and local policies, procedures, and practices in the implementation of IDEA.  See OSEP QA 23-01 A-12 and A-13. |  |  |  | Click or tap here to enter text. |

### Integrated Monitoring Activities

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state monitors the LEAs located in the state in each of the following priority areas:   * The provision of free appropriate public education (FAPE) in the least restrictive environment. * General supervision, including   + effective monitoring;   + child find;   + a system of transition services;   + the use of resolution meetings;   + mediation; and   + disproportionate representation of racial and ethnic groups in special education and related services, to the extent the representation is the result of inappropriate identification. 34 C.F.R. § 300.600(d).   See OSEP QA 23-01 A-3. |  |  |  | Click or tap here to enter text. |
| **COULD**: The state’s integrated monitoring activities include the following:   * Interviewing LEA and local program staff—including specialized instructional support personnel—on-site or virtually and reviewing local policies, procedures, and practices for compliance and improved functional outcomes and results for children with disabilities. * Conducting interviews and listening sessions with parents of children with disabilities, children with disabilities, and other stakeholders to learn about an LEA’s implementation of IDEA, including functional outcomes and results. * Analyzing local child find data across the state to determine if there are significant disparities in the groups or communities of children and families who are referred for evaluation or who are provided services. * Reviewing information collected through the state’s data systems relating to local compliance with IDEA requirements, such as compliance with individualized education program (IEP) meeting timelines, evaluation and reevaluation timelines, content of IEPs, early childhood and secondary transition, exiting, and other key IDEA provisions. This could include data collected under IDEA Section 618 and other data sources available to the state. * Examining and evaluating performance and results data on specific IDEA requirements, such as early childhood outcomes, family outcomes and involvement, graduation and drop-out, and other key IDEA provisions. This could include data collected under IDEA Section 618 and other data sources available to the state. * Analyzing assessment data to determine if the data represent improved results for children with disabilities on regular assessments and alternate assessments aligned with alternate academic achievement standards compared with the achievement of all children. * Evaluating an LEA’s policies, procedures, and practices for fiscal management, or reviewing local budget and expenditure data for a particular year to ensure that IDEA funds are distributed and expended in accordance with federal fiscal requirements. * Examining information gleaned from the state’s dispute resolution system, including state complaints and due process complaints. The state’s complaint resolution system is a tool for states to identify and correct noncompliance as stated in  OSEP QA 23-01 A-7.   See OSEP QA 23-01 A-3. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state’s monitoring activities assess the equitable implementation of IDEA through examination of local policies, procedures, and evidence of implementation (or practices).  See OSEP QA 23-01 A-3. |  |  |  | Click or tap here to enter text. |

### SPP/APR and Data Processes

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state’s general supervision system includes other components outside of the SPP/APR. The SPP/APR is one component of a general supervision system. It is not the only tool.  See OSEP QA 23-01 A-4. |  |  |  | Click or tap here to enter text. |
| MUST: The state’s data systems are able to collect and report valid and reliable data under IDEA Sections 616 and 618.  See OSEP QA 23-01 A-5. |  |  |  | Click or tap here to enter text. |
| MUST: The state considers how it will review the information in its data system to determine compliance and reflect in its monitoring policies how that review of data will be used to identify noncompliance. 34 C.F.R. § 300.600.  See OSEP QA 23-01 A-5. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state policies do not delay the identification of noncompliance until the submission of SPP/APR data or the state’s annual determination process.  See OSEP QA 23-01 A-5. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state’s general supervision system is reasonably designed to ensure the state examines data collected through its data system at regular intervals to determine LEA compliance with IDEA requirements (e.g., monthly, quarterly, annually).  See OSEP QA 23-01 A-5, A-11 |  |  |  | Click or tap here to enter text. |
| SHOULD: The state informs LEAs when and how the data system is being used, including the time period it reflects, for the purposes of determining compliance and identifying noncompliance.  See OSEP QA 23-01 A-5, A-11 |  |  |  | Click or tap here to enter text. |
| **MAY**: As the state uses data systems for integrated monitoring activities, it reviews how the data system fits into the state’s general supervision system to make it most effective in ensuring compliance and improving functional outcomes and results for children with disabilities.  See OSEP QA 23-01 A-5. |  |  |  | Click or tap here to enter text. |

### Fiscal Management

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state’s monitoring and oversight of the operation of its federal award-supported activities includes monitoring activities that ensure compliance with the applicable federal requirements and achievement of performance expectations, and the state’s monitoring covers each program, function, or activity.  See OSEP QA 23-01 A-6. |  |  |  | Click or tap here to enter text. |
| MUST: The state’s general supervision system includes fiscal monitoring for IDEA Part B fiscal requirements such as   * the LEA’s compliance with IDEA maintenance of effort provisions (34 C.F.R. §§ 300.203–300.205), and * the LEA’s expenditure of a proportionate share of IDEA funds to provide equitable services to children with disabilities placed in private schools by their parents consistent with 34 C.F.R. § 300.133.   See OSEP QA 23-01 A-6. |  |  |  | Click or tap here to enter text. |
| MUST: For programs with subrecipients such as subgrantees, the state conducts the following activities:   * Evaluates each subrecipient’s risk of noncompliance with federal statutes, regulations, and the terms and conditions of the subaward (i.e., subgrants) to determine appropriate subrecipient monitoring. * Monitors the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with federal statutes, regulations, and the terms and conditions of the subaward, and that subaward performance goals are achieved. * Issues a management decision for applicable audit findings pertaining only to the federal award provided to the subrecipient from the pass-through entity as required by 2 C.F.R. §§ 200.332 and 200.521.   See OSEP QA 23-01 A-6. |  |  |  | Click or tap here to enter text. |

### Effective Dispute Resolution

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state’s general supervision system is designed to collect and analyze dispute resolution information, and determine whether systemic noncompliance is occurring and, if so, issue written findings of noncompliance and ensure correction.  See OSEP QA 23-01 A-7. |  |  |  | Click or tap here to enter text. |
| MUST: The state examines each due process hearing decision to determine if the decision identifies any procedural or substantive violations of IDEA in the LEA.  See OSEP QA 23-01 A-7. |  |  |  | Click or tap here to enter text. |
| MUST: The state ensures each due process hearing decision is implemented and any violations corrected within the timeframe specified by the hearing officer or, if no timeframe is provided, within a reasonable time.  See OSEP QA 23-01 A-7. |  |  |  | Click or tap here to enter text. |
| MUST: Where patterns are present in state complaint decisions and due process decisions, the state is able to determine whether systemic noncompliance occurred or is occurring and issue written findings of noncompliance and ensure correction.  See OSEP QA 23-01 A-7. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state considers and addresses due process complaints and the resulting hearing decisions, and state complaints and the SEA’s decisions on those complaints, as a source of compliance information available to the state in implementing a reasonably designed general supervision system.  See OSEP QA 23-01 A-7. |  |  |  | Click or tap here to enter text. |
| **COULD:** The state uses information gathered through their dispute resolution system to help identify areas of IDEA implementation to provide statewide guidance, training, or technical assistance, or improve implementation of specific requirements.  See OSEP QA 23-01 A-7. |  |  |  | Click or tap here to enter text. |

### Priority Area—Child Find

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state ensures it meets its IDEA child find responsibilities by examining and analyzing data and other information from its child find systems and conducting monitoring to ensure compliance with related requirements.  See OSEP QA 23-01 A-8. |  |  |  | Click or tap here to enter text. |
| MUST: The state has in effect policies and procedures that ensure all children with disabilities residing in the state who need special education and related services are identified, located, and evaluated, regardless of the severity of the disability. Child find includes children who   * are experiencing homelessness; * are wards of the state; * are highly mobile, including migrant children; * are English learners; * have complex medical needs; * reside in nursing homes because of serious health problems; * are in correctional facilities; and * have disabilities and are attending private schools.   See OSEP QA 23-01 A-8. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state examines equity issues that can exist in the child find system, including   * significant racial disparities; * disparities between children from low-income and high-income families; and * geographic disparities, such as between urban and rural areas.   This examination may include analyzing data and other information to determine if there are significant disparities in the groups or communities of children who are referred for evaluation or provided services.  See OSEP QA 23-01 A-8. |  |  |  | Click or tap here to enter text. |
| **MAY**: The state uses data to determine whether targeted monitoring is appropriate.  See OSEP QA 23-01 A-8. |  |  |  | Click or tap here to enter text. |
| **COULD**: The state provides technical assistance, including identifying outreach strategies to better connect with underserved groups and communities.  See OSEP QA 23-01 A-8. |  |  |  | Click or tap here to enter text. |

### Priority Area—Significant Disproportionality[[3]](#footnote-4)

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state provides for the collection and examination of data to determine if significant disproportionality based on race and ethnicity is occurring in the state and the LEAs of the state with respect to the   * identification of children as children with disabilities, including the identification of children as children with disabilities in accordance with a particular impairment described in IDEA Section 602(3); * placement in particular educational settings of such children; and * incidence, duration, and type of disciplinary actions, including suspensions and expulsions.   The IDEA regulations **require** states to use a standard methodology to determine if significant disproportionality based on race and ethnicity is occurring in the state and its LEAs.  States have set a threshold above which disproportionality in the identification, placement, or discipline of children with disabilities within an LEA is considered significant.  See OSEP QA 23-01 A-9. |  |  |  | Click or tap here to enter text. |
| **COULD:** The state reviews Section 618(d) to assist LEAs in identifying the factors contributing to any identified over-or under-representation. Among the data states and/or LEAs can review are school-level data, academic achievement data, relevant environmental data that may be correlated with the prevalence of a disability, or other data relevant to the educational needs and circumstances of the specific group of students identified.  See OSEP QA 23-01 A-9. |  |  |  | Click or tap here to enter text. |
| MUST: The state requires that LEAs identified with significant disproportionality set aside a total of 15 percent of their IDEA Part B (Sections 611 and 619) funds to provide comprehensive coordinated early intervening services (CCEIS) to address the factors contributing to the significant disproportionality.  See OSEP QA 23-01 A-9. |  |  |  | Click or tap here to enter text. |
| MUST: The state reports annually to OSEP on the number of LEAs identified with significant disproportionality, the area in which significant disproportionality was identified, and the amount of IDEA Part B funds those LEAs reserved for CCEIS.  See OSEP QA 23-01 A-9. |  |  |  | Click or tap here to enter text. |
| MUST: The state monitors the LEAs required to set aside 15 percent of their IDEA Part B funds to ensure the required amount of funds was used to address factors contributing to the significant disproportionality.  See OSEP QA 23-01 A-9. |  |  |  | Click or tap here to enter text. |
| MUST: For LEAs identified with significant disproportionality, the state reviews and, if appropriate, requires revision of policies, procedures, and practices it identifies as contributing to the significant disproportionality, including any policy, procedure, or practice that results in a failure to identify, or the inappropriate identification of, members of a racial or ethnic group. 34 C.F.R. § 300.646(d)(1)(iii).  If the review identifies noncompliance, the state ensures that the noncompliance is corrected as soon as possible, and in no case later than one year after the identification of the noncompliance (i.e., a finding).  See OSEP QA 23-01 A-9. |  |  |  | Click or tap here to enter text. |
| MUST: The state has in effect, consistent with IDEA and Section 618(d), policies and procedures designed to prevent the inappropriate overidentification or disproportionate representation by race and ethnicity of children as children with disabilities, including children with disabilities with a particular impairment.  See OSEP QA 23-01 A-9. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state monitors for and addresses any implementation challenges that may result from confusion about the interplay between federal and state laws, including those challenges that may arise from the examination of data disaggregated by race and ethnicity.  See OSEP QA 23-01 A-9. |  |  |  | Click or tap here to enter text. |

### Key Takeaways

|  |  |
| --- | --- |
| Priority Area | Next Steps |
| 1. Click or tap here to enter text. | Click or tap here to enter text. |
| 2. Click or tap here to enter text. | Click or tap here to enter text. |
| 3. Click or tap here to enter text. | Click or tap here to enter text. |
| 4. Click or tap here to enter text. | Click or tap here to enter text. |
| 5. Click or tap here to enter text. | Click or tap here to enter text. |

## Identification and Correction of Noncompliance

Identification of noncompliance (i.e., a finding) means the determination by a state that an LEA’s policy, procedure, or practice—including those that are child-specific—is inconsistent with an applicable IDEA requirement, another IDEA-related federal requirement, or any specific IDEA grant award’s terms or conditions (hereafter “IDEA implementation requirement”).

Applicable IDEA-related federal requirements include requirements under GEPA at 20 U.S.C. 1221 et seq., under EDGAR in 34 C.F.R. Parts 76 and 81, and the OMB Uniform Guidance in 2 C.F.R. Part 200.

OSEP uses the terms “written notification of noncompliance,” “written finding of noncompliance,” “identified noncompliance,” or “finding” interchangeably within this document to mean the state’s “identification of noncompliance” with a requirement of IDEA Part B consistent with 34 C.F.R. § 300.600(e).

To complete this section, rate each criterion based on your state’s current level of implementation and documentation.

### Area of Concern

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| **MUST:** The state ensures that its general supervision system includes policies, procedures, and practices that are reasonably designed to consider and address areas of concern (i.e., credible allegations of LEA noncompliance) in a timely manner.  An “area of concern” means a credible allegation regarding an IDEA policy, procedure, practice, or other requirement that raises one or more potential implementation or compliance issues, if confirmed true.  Credible allegations (e.g., information and awareness) may come from integrated monitoring activities, data reviews, grant reviews, stakeholder calls, media reports, dispute resolution systems, or other mechanisms that relate to IDEA implementation.  See OSEP QA 23-01 B-1 and B-2. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state conducts due diligence when made aware of an area of concern regarding an LEA’s implementation of IDEA and reaches a conclusion in a reasonable amount of time.  A state’s proper due diligence activities may include but are not limited to   * conducting clarifying legal research; * interviewing staff, parents of children with disabilities, children with disabilities, and groups that represent the families and communities served by the LEAs; and * reviewing and analyzing data or information (e.g., fiscal contracts or other relevant financial information, state customer service information, administrative or judicial decisions, media reports, previous LEA self-reviews or self-assessments, document submissions, and any other relevant LEA monitoring information).   See OSEP QA 23-01 B-1 and B-2. |  |  |  | Click or tap here to enter text. |
| **MUST:** When the state determines that an LEA is out of compliance with an applicable IDEA requirement, the state issues a written notification of noncompliance (i.e., a finding) to the LEA.  The state issues the finding in a timely manner, generally within three months of the state exercising due diligence, regarding the area of concern, and reaches a conclusion, in a reasonable amount of time, that the LEA has violated an IDEA requirement, unless the LEA immediately (i.e., before the state issues a finding) corrects the noncompliance and the state is able to verify the correction.  See OSEP QA 23-01 B-1 and B-2. |  |  |  | Click or tap here to enter text. |

### Identification of Noncompliance

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| **MUST:** The state maintains effective controls that provide a reasonable assurance of compliance with federal statutes, regulations, and laws: GEPA, EDGAR, and the OMB Uniform Guidance; the IDEA implementation requirements; and the terms and conditions of the federal award, as required by OMB Uniform Guidance 2 C.F.R. § 200.303(a).  See OSEP QA 23-01 B-3 and B-14. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** The IDEA does not specify the type and amount of information the state should review when monitoring LEAs for compliance with IDEA requirements, but the state is able to explain the methodology used to ensure that the type and amount of data accurately reflect the LEAs’ levels of compliance.  The type of information reviewed may vary depending on the specific requirement but could include   * data collected as part of a state’s data system; * information contained in the education record of a child with a disability; * interviews conducted with relevant staff, parents, and others; or * a review of LEA written policies, procedures, and practices.   See OSEP QA 23-01 B-3. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** The information reviewed when determining compliance is representative of the population served within a given LEA to ensure validity and reliability of the data used.  See OSEP QA 23-01 B-3. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state does not set a threshold of less than 100 percent for determining an LEA’s compliance. If a state determines an LEA’s compliance level is less than 100 percent, the state issues a finding and requires correction of the noncompliance unless the state has a pre-finding correction policy.  See OSEP QA 23-01 B-8. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state issues a written notification of noncompliance (i.e., a finding), generally within three months of exercising due diligence and reaching a conclusion, in a reasonable amount of time that the LEA has violated an IDEA requirement unless the LEA immediately (i.e., before the state issues a finding) corrects the noncompliance and the state is able to verify the correction.  See OSEP QA 23-01 B-5 and B-7. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** The state’s written notification of noncompliance contains   * a description of the identified noncompliance; * the statutory or regulatory IDEA requirement(s) with which the LEA is in noncompliance; * a description of the quantitative and/or qualitative data (i.e., information supporting the state’s conclusion that there is noncompliance); * a statement that the noncompliance must be corrected as soon as possible, and in no case later than one year from the date of the state’s written notification of noncompliance; * any required corrective action(s); and * a timeline for submission of a corrective action plan or evidence of correction.   See OSEP QA 23-01 B-5 and B-6. |  |  |  | Click or tap here to enter text. |
| **MUST:** If a state uses a self-assessment and **receives** the results of a self-assessment in which an LEA acknowledges noncompliance, the state exercises due diligence and confirms, in a reasonable amount of time, whether the information submitted represents noncompliance.  If the state confirms noncompliance, the state issues a written finding unless the LEA immediately (i.e., before the state issues a finding) corrects the noncompliance and the state is able to verify the correction.  See OSEP QA 23-01 B-9. |  |  |  | Click or tap here to enter text. |

### Correction of Noncompliance

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| **MUST:** The state verifies that the LEA   * is correctly implementing the specific regulatory requirements (i.e., has achieved 100 percent compliance with the relevant IDEA requirements) based on a review of updated data and information, such as data and information subsequently collected through integrated monitoring activities or the state’s data system (systemic compliance); and (if applicable) * has corrected each individual case of child-specific noncompliance unless the child is no longer within the jurisdiction of the LEA and if no outstanding corrective action exists under a state complaint or due process hearing decision for the child (child-specific compliance).   See OSEP QA 23-01 B-10. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state verifies the correction of child-specific noncompliance to ensure FAPE, regardless of whether the child is no longer under the jurisdiction of the LEA and the LEA has been relieved of its obligation to ensure correction.  See OSEP QA 23-01 B-10, footnote 24. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state ensures that any outstanding corrective action ordered through a state complaint or due process hearing to remedy the denial of appropriate services is completed, even if the child relocates to another state, if the ordered relief can reasonably be implemented in the new state and the parent does not reject the remaining services under the ordered relief.  See OSEP QA 23-01 B-10, footnote 25. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state maintains documentation and evidence demonstrating that   * the LEA has corrected each individual case of the previously noncompliant files, records, data files, or whatever data source was used to identify the original noncompliance (child-specific compliance), if applicable; and * the review of updated data and information did not reveal any continued noncompliance (systemic compliance).   See OSEP QA 23-01 B-10. |  |  |  | Click or tap here to enter text. |
| **MAY:** The state uses the flexibility for pre-finding correction. Pre-finding correction occurs when the state has exercised due diligence and reached a conclusion, in a reasonable amount of time, that the LEA has violated an IDEA requirement, and the LEA immediately (i.e., before the state issues a finding) corrects the noncompliance and the state is able to verify the correction that the LEA   * is correctly implementing the specific regulatory requirements (i.e., has achieved 100 percent compliance with the relevant IDEA requirements) based on a review of updated data, such as data subsequently collected through monitoring or the state’s data system (systemic compliance); and  (if applicable) * has corrected each individual case of child-specific noncompliance unless the child is no longer within the jurisdiction of the LEA and no outstanding corrective action exists under a state complaint or due process hearing decision for the child (child-specific compliance).   See OSEP QA 23-01 B-10 and B-11. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** If the state uses the flexibility of pre-finding correction, the state maintains documentation of the nature and extent of the noncompliance, documenting the opportunity to correct the noncompliance.  See OSEP QA 23-01 B-12. |  |  |  | Click or tap here to enter text. |
| **MUST:** If the state uses the flexibility of pre-finding correction, it does not use this flexibility to allow its LEAs an indiscriminate amount of time, generally within three months, to correct any noncompliance prior to a finding being issued.  See OSEP QA 23-01 B-11. |  |  |  | Click or tap here to enter text. |
| **MUST:** If a state uses the flexibility of pre-finding correction, it ensures that the LEA has corrected the noncompliance, generally within three months of the state exercising due diligence and reaching a conclusion—in a reasonable amount of time—that the LEA has violated an IDEA requirement, and before the state has issued the finding.  See OSEP QA 23-01 B-12. |  |  |  | Click or tap here to enter text. |
| **MUST:** If a state uses the flexibility of pre-finding correction, it maintains documentation and evidence demonstrating that   * the LEA has corrected each individual instance of child-specific noncompliance, if applicable; and * the review of updated data and information did not reveal any continued noncompliance (systemic compliance).   See OSEP QA 23-01 B-12. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state requires correction as soon as possible, but no later than one year after the state’s written notification of noncompliance.  See OSEP QA 23-01 B-13. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state maintains effective internal controls that provide a reasonable assurance of compliance with federal statutes, regulations, and terms and conditions of the federal award. In addition, the state maintains, as required by GEPA and EDGAR, documentation of program implementation for audit purposes. 20 U.S.C. § 1232d(b)(3)(A) and 34 C.F.R. § 76.731.  See OSEP QA 23-01 B-14. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** The state considers a variety of factors in determining whether an LEA has corrected identified noncompliance, including ensuring that   * the correction of noncompliance addresses the extent and root cause of the identified noncompliance, in addition to ensuring child-specific and systemic correction; * the extent of the identified noncompliance—whether it was across the entire LEA or only in a small percentage of files concentrated within the LEA (e.g., one school, one service provider, or one teacher); * the identified noncompliance was an isolated incident or a longstanding issue that was the subject of repeated corrective action plans, and whether the noncompliance showed a denial of a basic right under IDEA (e.g., a long delay in an initial evaluation beyond applicable timelines with a corresponding delay in the child’s receipt of FAPE, or a failure to provide services in accordance with the IEP); and * the information reviewed to determine correction represents the population served within a given LEA.   See OSEP QA 23-01 B-14. |  |  |  | Click or tap here to enter text. |
| **MUST:** In order to verify correction of child-specific noncompliance, the state reviews each individual case (not a subset or sample) of previously noncompliant files, records, data files, or whatever data source was used to identify the original noncompliance to verify correction by the LEA of child-specific noncompliance unless the child is no longer within the jurisdiction of the LEA and no outstanding corrective action exists under a state complaint or due process hearing decision for the child.  See OSEP QA 23-01 B-15. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** In situations where an extremely small LEA does not have sufficient updated data to demonstrate systemic compliance (i.e., is correctly implementing the specific regulatory requirements and has achieved 100 percent compliance with the relevant IDEA requirements based on a review of updated data), the state uses other evidence of change. States could review   * revised policies, procedures, and practices; * documentation of training provided; and * changes made to supervision and oversight that demonstrate systems are in place to ensure systemic compliance.   Regardless of the size of an LEA, any child-specific noncompliance **must** be corrected, even if late, including any remedy determined necessary to address a denial of services in accordance with the IEP.  See OSEP QA 23-01 B-14. |  |  |  | Click or tap here to enter text. |
| **ENCOURAGED:** When ensuring correction, the state promotes the use of evidence-based activities that are designed not only to improve the LEA’s compliance with the IDEA requirements but also to also achieve and sustain compliance.  See OSEP QA 23-01 B-14. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state issues a management decision for applicable audit findings pertaining to the IDEA funds it provides to an LEA. In doing so, the state determines whether to sustain the auditor’s finding (i.e., confirming identified noncompliance with a fiscal requirement of IDEA and/or the OMB Uniform Guidance) and ensure corrective action is taken.  The state ensures that the steps required to verify correction of noncompliance depend on the nature of the fiscal finding of noncompliance.  Fiscal findings of noncompliance related to fiscal requirements may be a result of either a single state audit or fiscal monitoring and would not reflect individual child-specific noncompliance.  See OSEP QA 23-01 B-16. |  |  |  | Click or tap here to enter text. |

### Longstanding Noncompliance

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| **MUST**: If an LEA does not correct the identified noncompliance in a timely manner (i.e., within one year from the written notification of noncompliance), the state still verifies that the noncompliance was subsequently corrected.  See OSEP QA 23-01 B-17. |  |  |  | Click or tap here to enter text. |
| **MUST:** If an LEA is not yet correctly implementing the statutory or regulatory requirement(s), the state identifies the cause(s) of continuing noncompliance and takes steps to address the continued lack of compliance including, as appropriate, enforcement actions.  See OSEP QA 23-01 B-17. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** When determining what further action is needed to support the LEA in achieving compliance, the state evaluates data trends and patterns, which will provide the state with information on the root cause of the noncompliance.  See OSEP QA 23-01 B-17. |  |  |  | Click or tap here to enter text. |
| **MUST:** If the state has not verified that the noncompliance has been corrected within the one-year timeline, the state does not close the original finding and should impose additional corrective actions, if necessary.  See OSEP QA 23-01 B-17. |  |  |  | Click or tap here to enter text. |
| **MAY:** If the state determines the noncompliance has not been corrected within the one-year timeline, the state **may**, but is not required to, issue a new finding of noncompliance to the LEA, even if the state has already issued a finding to that same LEA in the prior year.  See OSEP QA 23-01 B-17. |  |  |  | Click or tap here to enter text. |
| **COULD:** The state considers its LEA’s adherence to IDEA’s timely correction requirements before making a subgrant award under Part B.  See OSEP QA 23-01 B-17. |  |  |  | Click or tap here to enter text. |

### Record Keeping

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| **MUST:** The state has determined how it will count and track written notifications of noncompliance to demonstrate its effectiveness in monitoring its LEAs and ensuring the timely correction of noncompliance.  A state may choose to group individual instances in an LEA involving the same legal requirement or standard together as one finding, or it may choose to count and track each of the individual instances of noncompliance as separate findings.  See OSEP QA 23-01 B-18. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** States have a mechanism in place for tracking the results of their monitoring activities to ensure that   * identified noncompliance is corrected fully and in a timely manner, and * valid and reliable data are reported in the state’s SPP/APR regarding the identification and correction of noncompliance.   See OSEP QA 23-01 B-18. |  |  |  | Click or tap here to enter text. |

### Key Takeaways

|  |  |
| --- | --- |
| **Priority Area** | **Next Steps** |
| 1. Click or tap here to enter text. | Click or tap here to enter text. |
| 2. Click or tap here to enter text. | Click or tap here to enter text. |
| 3. Click or tap here to enter text. | Click or tap here to enter text. |
| 4. Click or tap here to enter text. | Click or tap here to enter text. |
| 5. Click or tap here to enter text. | Click or tap here to enter text. |

## State Performance Plan/Annual Performance Report

To complete this section, rate each criterion based on your state’s current level of implementation and documentation.

### SPP/APR

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The SPP/APR introduction includes a description of its general supervision system that includes the general supervision system components in place to ensure that the respective IDEA Part B requirements are met (e.g., integrated monitoring activities, the state data system, review of processes and results, fiscal management, dispute resolution).  For any indicator where the state has selected “state monitoring” as its data source, the state must “describe the method used to select the LEAs for monitoring.”  See OSEP QA 23-01 C-1. |  |  |  | Click or tap here to enter text. |
| MUST: The state collects valid and reliable data for the purpose of meeting IDEA reporting requirements, including those under IDEA Section 618 and under Section 616, such as the SPP/APR, regardless of the data source (state monitoring or state database).  See OSEP QA 23-01 C-2. |  |  |  | Click or tap here to enter text. |
| **MUST:** The state reports the SPP/APR indicator data for each LEA at least once during the six-year period of the SPP/APR package, including the status of correction for any identified noncompliance.  See OSEP QA 23-01 C-2. |  |  |  | Click or tap here to enter text. |
| MUST: The state identifies the data source and is clear about what the data reflect, including the number of local programs, the number of children, and the compliance requirement.  Data sources include   * “state monitoring” data—data gathered during the state’s integrated monitoring activities to examine an LEA’s compliance with IDEA requirements, and * “database” or “data system”—electronic systems used by the state for collecting, maintaining, and storing LEA data.   See OSEP QA 23-01 C-2. |  |  |  | Click or tap here to enter text. |

### Reporting on Correction in the SPP/APR

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state reports on the number of “findings of noncompliance identified,” “findings of noncompliance verified as corrected within one year,” “findings of noncompliance subsequently corrected,” and “findings not yet verified as corrected” during the previous federal fiscal year SPP/APR reporting period.  See OSEP QA 23-01 C-3. |  |  |  | Click or tap here to enter text. |
| MUST: The state reports on the correction of any remaining findings of noncompliance identified prior to the federal fiscal year SPP/APR reporting period that were not yet verified as corrected in the prior year’s SPP/APR.  See OSEP QA 23-01 C-3 and C-4. |  |  |  | Click or tap here to enter text. |
| MUST: If the state reported less than 100 percent compliance for an indicator in a given year, the state **reported** on the status of correction of noncompliance under that indicator in the next year’s federal fiscal year SPP/APR.  See OSEP QA 23-01 C-3 and C-4. |  |  |  | Click or tap here to enter text. |
| MUST: When reporting on the correction of noncompliance, the state ensures noncompliance is corrected, including any subsequent correction, by verifying that the LEA   * is correctly implementing the specific regulatory requirements (i.e., achieved 100 percent compliance with the relevant IDEA requirements) based on a review of updated data, such as data subsequently collected through on-site monitoring or the state’s data system (systemic compliance); and * has ensured that *each* individual case of child-specific noncompliance[[4]](#footnote-5) has been corrected unless the child is no longer within the jurisdiction of the LEA and no outstanding corrective action exists under a state complaint or due process hearing decision for the child (child-specific compliance).   See OSEP QA 23-01 C-3, C-4, and C-5. |  |  |  | Click or tap here to enter text. |
| MUST: The state describes in sufficient detail its process for ensuring child-specific and systemic noncompliance has been corrected.  See OSEP QA 23-01 C-3 and C-4. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** For verification of child-specific noncompliance, the description includes what the state reviewed to determine if the noncompliance had been corrected, such as individual child files or records, or how the state used its data system to verify child-specific correction.  See OSEP QA 23-01 C-3 and C-4. |  |  |  | Click or tap here to enter text. |
| **ENCOURAGED**: In explaining how the state verified correction of noncompliance with the specific regulatory requirement(s) (systemic compliance), the state describes the time period covered by the subsequent data reviewed, how many records were reviewed, any trainings provided, and how the state determined these specific actions demonstrated correction.  See OSEP QA 23-01 C-3 and C-4. |  |  |  | Click or tap here to enter text. |
| SHOULD: The descriptions of the actions taken to verify the correction of noncompliance is specific to the indicator and its requirement and does not use standardized or boilerplate language when describing the state’s actions to ensure correction of noncompliance.  See OSEP QA 23-01 C-3 and C-4. |  |  |  | Click or tap here to enter text. |
| MUST: If an LEA did not correct identified noncompliance in a timely manner (within one year from the written notification of noncompliance), the state **continues** to report in the SPP/APR on whether the noncompliance was subsequently corrected.  See OSEP QA 23-01 C-5. |  |  |  | Click or tap here to enter text. |
| MUST: If an LEA is not yet correctly implementing the specific regulatory requirement(s), the state **provides** information regarding the nature of any continuing noncompliance, actions taken to support the LEA in achieving compliance (e.g., review of policies, procedures, and practices; technical assistance; training), and any enforcement actions taken against any LEA that is continuing to demonstrate noncompliance.  See OSEP QA 23-01 C-5. |  |  |  | Click or tap here to enter text. |
| MUST: The state maintains written documentation of the verification of subsequent correction of the noncompliance.  See OSEP QA 23-01 C-5. |  |  |  | Click or tap here to enter text. |

### SPP/APR Review of LEA Data Related to Race and Ethnicity

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| SHOULD: As part of its general supervision responsibilities in implementing these IDEA requirements, the state monitors for and addresses any implementation challenges that may result from confusion about the interplay between federal and state laws, including those challenges that may arise from the examination of data disaggregated by race and ethnicity.  See OSEP QA 23-01 C-6. |  |  |  | Click or tap here to enter text. |
| MUST: The state provides an assurance in its annual IDEA Part B grant application that the state has in place policies and procedures that   * ensure that the SEA examines data, including data disaggregated by race and ethnicity, to determine if significant discrepancies are occurring in the rate of long-term suspensions and expulsions of children with disabilities among LEAs in the state or compared to such rates for nondisabled children within such agencies; and * are designed to prevent the inappropriate overidentification or disproportionate representation by race and ethnicity of children as children with disabilities, including children with disabilities with a particular impairment.   Where significant discrepancies are occurring, the state reviews and, if appropriate, revises (or requires the affected state agency or LEA to revise) its policies, procedures, and practices relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards to ensure that such policies, procedures, and practices comply with IDEA. 34 C.F.R. § 300.170(b).  See OSEP QA 23-01 C-6. |  |  |  | Click or tap here to enter text. |
| MUST: ForIndicator 4B, the state **reports** the percentage of LEAs that were determined to have a significant discrepancy, as defined by the state, by race and ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year for children with an IEP.  For those LEAs determined by the state to have a significant discrepancy, the state **reports** on its review of the LEA’s policies, procedures, or practices to address what has contributed to the significant discrepancy, as defined by the state, and what does not comply with IDEA requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.  See OSEP QA 23-01 C-6. |  |  |  | Click or tap here to enter text. |
| MUST: ForIndicator 9, the state reports on the percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.  See OSEP QA 23-01 C-6. |  |  |  | Click or tap here to enter text. |
| MUST: ForIndicator 10, the state reports on the percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.  See OSEP QA 23-01 A-9 and C-6. |  |  |  | Click or tap here to enter text. |
| MUST: ForIndicators 4B, 9, and 10 (compliance indicators), the state **ensures**, as soon as possible, and in no case later than one year after the state’s written notification of noncompliance, that the LEA is now correctly implementing the specific regulatory requirements (i.e., has achieved 100 percent compliance with the relevant IDEA requirements) through a review of updated data.  See OSEP QA 23-01 B-10 and C-7. |  |  |  | Click or tap here to enter text. |
| MUST: For Indicators 4B, 9, and 10 (compliance indicators), if child-specific noncompliance was identified, the state verifies that the LEA has corrected *each* individual instance of child-specific noncompliance unless the child is no longer within the jurisdiction of the LEA and no outstanding corrective action exists under a state complaint or due process hearing decision for the child.  **Note:** Noncompliance resulting from policies, procedures, and practices that are inconsistent with IDEA requirements may not always include child-specific noncompliance.  See OSEP QA 23-01 B-10 and C-7. |  |  |  | Click or tap here to enter text. |
| MUST: For Indicator 8, the state reports on and analyzes the extent to which the demographics of the children for whom parents responded are representative of the demographics of children receiving special education services.  The analysis includes race/ethnicity AND at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.  See OSEP QA 23-01 C-6. |  |  |  | Click or tap here to enter text. |
| MUST: For Indicator 14, the state reports on and analyzes the extent to which the response data are representative of the demographics of youth who are no longer in secondary school and had IEPs in effect at the time they left school.  The analysis includes race/ethnicity AND at least one of the following demographics: age of the student, disability category, gender, geographic location, and/or another demographic category approved through the stakeholder input process.  See OSEP QA 23-01 C-6. |  |  |  | Click or tap here to enter text. |
| MUST: The state includes in their annual SPP/APR submissions a report on their stakeholder engagement efforts, including activities carried out to obtain input from a diverse group of parents to support the implementation activities designed to improve outcomes, including target setting, analyzing data, developing improvement strategies, and evaluating progress.  See OSEP QA 23-01 C-6. |  |  |  | Click or tap here to enter text. |
| SHOULD: In engaging its stakeholders, the state uses this information to identify any trends or patterns within its system related to equity, including ensuring special education and related services and determining steps to improve outcomes.  See OSEP QA 23-01 C-6. |  |  |  | Click or tap here to enter text. |

### Annual Reporting to the Public on the Performance of Each LEA

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state publicly reports on the performance of each LEA in the state on the targets in the state’s SPP/APR annually as soon as practicable, but no later than 120 days following the submission of the SPP/APR to OSEP.  See OSEP QA 23-01 C-8. |  |  |  | Click or tap here to enter text. |
| MUST: If a state collects performance data through monitoring or sampling, the state includes the most recently available performance data on each LEA as required under 34 C.F.R. §300.602(b)(1)(ii), the date these data were obtained, and the time period covered by the data.  See OSEP QA 23-01 C-8. |  |  |  | Click or tap here to enter text. |
| MUST: For those indicators that allow states to collect data through monitoring or sampling, data is collected for each LEA at least once during the period of the SPP/APR.  See OSEP QA 23-01 C-8. |  |  |  | Click or tap here to enter text. |
| MUST: If the state has small *n* sizes for particular indicators, the state applies appropriate privacy protections to the LEA’s actual data but still indicates whether the LEA met the state-established target.  See OSEP QA 23-01 C-8 and C-9. |  |  |  | Click or tap here to enter text. |
| MUST: The state’s report for the LEA compares their performance against the state’s SPP/APR targets using actual data that show whether the LEA has met the state’s targets for each indicator that applies to the LEA unless the specific measurement for an indicator dictates otherwise.  For example, when reporting an LEA’s performance data for conducting initial evaluations within the required timeline (Indicator 11 [Timely Initial Evaluations]), the state **must** indicate the percent of evaluations that were completed within the 60-day timeline (or state-established timeline). The state’s report **must** include the LEA’s actual performance data (i.e., a specific percentage) and not simply report that the LEA “met” or “did not meet” the state’s target of 100 percent.  See OSEP QA 23-01 C-8. |  |  |  | Click or tap here to enter text. |
| MUST: The state annually reports current data collected pursuant to Section 618 of IDEA, under 34 C.F.R. §§ 300.640–300.646. These data include state-level data on the number and percentage of children with disabilities by race, gender, and ethnicity on a number of measures, including child count, educational and service setting environments, exiting, and discipline.  See OSEP QA 23-01 C-8. |  |  |  | Click or tap here to enter text. |
| MUST: The state ensures that they report information for LEAs in a manner that protects personally identifiable information about individual children.  See OSEP QA 23-01 C-9. |  |  |  | Click or tap here to enter text. |
| **MAY:** The state reports data for intermediate units (or regions) in situations where the “n” size for the individual LEA is too small to report.  See OSEP QA 23-01 C-9. |  |  |  | Click or tap here to enter text. |
| MUST: The report to the public on the performance of its LEAs is accessible and complies with Section 508 of the Rehabilitation Act.  See OSEP QA 23-01 C-8. |  |  |  | Click or tap here to enter text. |
| MUST: The state, at a minimum, posts the SPP/APR on the state’s website and distributes the SPP/APR to the media and through public agencies.  See OSEP QA 23-01 C-10. |  |  |  | Click or tap here to enter text. |
| MUST: The state **retains** copies of, and makes available to the public, its annual SPP/APR.  See OSEP QA 23-01 C-11. |  |  |  | Click or tap here to enter text. |
| **MAY:** The state retains **hard** copies of its annual SPP/APR to make available to the public.  See OSEP QA 23-01 C-10. |  |  |  | Click or tap here to enter text. |
| MUST: The state does notrely on the U.S. Department of Education’s posting of state SPP/APRs on the U.S. Department of Education’s website to meet the requirements in 34 C.F.R § 300.602(b)(1)(i)(B).  See OSEP QA 23-01 C-10. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state maintains, for the duration of the six-year SPP/APR cycle, each year’s SPP/APR on the state’s website.  See OSEP QA 23-01 C-11. |  |  |  | Click or tap here to enter text. |

### Key Takeaways

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| --- | --- |
| Priority Area | Next Steps |
| 1. Click or tap here to enter text. | Click or tap here to enter text. |
| 2. Click or tap here to enter text. | Click or tap here to enter text. |
| 3. Click or tap here to enter text. | Click or tap here to enter text. |
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## State Annual Determinations

To complete this section, rate each criterion based on your state’s current level of implementation and documentation.

### Determination Categories

| **Criterion** | **Needs Improvement** | **Somewhat in Place** | **In Place** | **Documentation** |
| --- | --- | --- | --- | --- |
| MUST: The state uses the same four categories for LEA determinations that OSEP is required to use: meets requirements, needs assistance, needs intervention, and needs substantial intervention.  See OSEP QA 23-01 D-1. |  |  |  | Click or tap here to enter text. |
| SHOULD: Considers stakeholder input, including input from parents, children with disabilities, LEAs, local-level staff, teachers, specialized instructional support personnel, Section 619 (preschool) coordinators, related service providers, the SAP established under Part B, PTI leadership and staff, local and statewide advocacy groups and advisory committees, and others, when developing its determination process.  See OSEP QA 23-01 D-2. |  |  |  | Click or tap here to enter text. |

### Factors When Making Determinations on LEA Performance

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: When making determinations on LEA performance, the state considers performance on compliance indicators.  See OSEP QA 23-01 D-2. |  |  |  | Click or tap here to enter text. |
| MUST: When making determinations on LEA performance, the state considers valid and reliable data.  See OSEP QA 23-01 D-2. |  |  |  | Click or tap here to enter text. |
| MUST: When making determinations on LEA performance, the state considers correction of identified noncompliance.  See OSEP QA 23-01 D-2. |  |  |  | Click or tap here to enter text. |
| MUST: When making determinations on LEA performance, the state considers other data available to the state about the LEAs related to IDEA, including any relevant audit findings.  See OSEP QA 23-01 D-2. |  |  |  | Click or tap here to enter text. |
| ENCOURAGED: When making determinations on LEA performance, the state uses results and functional outcomes data (e.g., information collected and reported under results indicators in the state’s SPP/APR or other performance measures).  See OSEP QA 23-01 D-3. |  |  |  | Click or tap here to enter text. |
| **MAY:** The state considers any monitoring findings it has made that are not already included in data submitted under the SPP/APR indicators (e.g., noncompliance identified with an IDEA requirement unrelated to an SPP/APR indicator).  See OSEP QA 23-01 D-3. |  |  |  | Click or tap here to enter text. |
| **MAY:** The state establishes criteria that preclude a “meets requirements” determination for an LEA under certain circumstances. Such circumstances could include an LEA whose grant award or contract is under Specific Conditions imposed by the state.  The state’s criteria are transparent so that stakeholders, including LEAs, are aware of the standards that the state is using to make these critical decisions, which could lead to enforcement actions.  See OSEP QA 23-01 D-3. |  |  |  | Click or tap here to enter text. |

### Determinations

| **Criterion** | **Needs Improvement** | **Somewhat in Place** | **In Place** | **Documentation** |
| --- | --- | --- | --- | --- |
| MUST: The state makes annual determinations regarding the performance of its LEAs.  See OSEP QA 23-01 D-6. |  |  |  | Click or tap here to enter text. |
| **ENCOURAGED:** The state notifies their LEAs of their specific determinations in a timely manner so that they may begin to plan for and take any actions necessary for improvement as soon as possible.  See OSEP QA 23-01 D-6. |  |  |  | Click or tap here to enter text. |
| SHOULD: To the extent that the state’s determinations and resulting enforcement actions impact funds for LEAs, the state shares its determinations before LEA subgrants are issued under Part B. 34 C.F.R. §§ 300.604(b)(2)(v) and 300.604(c)(2).  See OSEP QA 23-01 D-6. |  |  |  | Click or tap here to enter text. |
| **MAY:** The state allows LEAs to appeal its annual determination. The state may establish a process like that in IDEA Section 616(d)(2)(B) for its LEAs.  See OSEP QA 23-01 D-4. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state continues to make annual determinations during a disaster.  See OSEP QA 23-01 D-5. |  |  |  | Click or tap here to enter text. |
| **MAY:** The state considers a variety of factors when determining any enforcement actions, including the impact of the disaster on the provision of services, and the specific nature and extent of the noncompliance in framing an appropriate corrective action on an LEA’s annual determination.  See OSEP QA 23-01 D-5. |  |  |  | Click or tap here to enter text. |
| **MAY:** When the state determines that a requirement was not met solely due to a disaster (e.g., a service could not be provided because of public health restrictions imposed as a result of the disaster), the state determines that no changes to policies, procedures, and practices are required, while ensuring that the appropriate services are provided, including, as appropriate, the consideration and determination of compensatory services.  See OSEP QA 23-01 D-5. |  |  |  | Click or tap here to enter text. |
| **ENCOURAGED**: The state makes annual determinations publicly available to promote accountability and transparency.  See OSEP QA 23-01 D-7. |  |  |  | Click or tap here to enter text. |

### Key Takeaways

|  |  |
| --- | --- |
| Priority Area | Next Steps |
| 1. Click or tap here to enter text. | Click or tap here to enter text. |
| 2. Click or tap here to enter text. | Click or tap here to enter text. |
| 3. Click or tap here to enter text. | Click or tap here to enter text. |
| 4. Click or tap here to enter text. | Click or tap here to enter text. |
| 5. Click or tap here to enter text. | Click or tap here to enter text. |

## State Enforcement Through Determinations and Other Methods

To complete this section, rate each criterion based on your state’s current level of implementation and documentation.

### Enforcement Actions Through State Determinations

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| MUST: The state takes certain enforcement action(s) if an LEA needs assistance for two consecutive years, needs intervention for three or more consecutive years, or at any time the state determines that an LEA needs substantial intervention or that there is a substantial failure to comply with any Part B eligibility condition.  See OSEP QA 23-01 E-1. |  |  |  | Click or tap here to enter text. |
| MUST: If the state determines that an LEA needs assistance for two consecutive years, the state takes one or both of the following actions:   1. The state advises the LEA of available sources of technical assistance that may help the LEA address the areas in which the LEA needs assistance and require the LEA to work with the appropriate sources of technical assistance. 2. The state identifies the LEA a high-risk grantee and imposes Specific Conditions on the LEA’s IDEA Part B grant award.   See OSEP QA 23-01 E-1. |  |  |  | Click or tap here to enter text. |
| MUST: For LEAs in Needs Assistance for two consecutive years, if a state determines that an LEA is not meeting the requirements of Part B—including the targets for compliance indicators in the SPP/APR—the state prohibits the LEA from reducing its maintenance of effort under 34 C.F.R. § 300.203 for any fiscal year.  See OSEP QA 23-01 E-1. |  |  |  | Click or tap here to enter text. |
| **MAY**: If the state determines that an LEA needs intervention for three or more consecutive years, the state takes any of the actions described above for “Needs Assistance.”  See OSEP QA 23-01 E-1. |  |  |  | Click or tap here to enter text. |
| MUST: For an LEA in Needs Intervention for three or more consecutive years, the state takes one or both of the following enforcement actions:   1. The state requires the LEA to prepare a corrective action plan or improvement plan to correct the identified area(s). 2. The state withholds, in whole or in part, further payments under Part B to the LEA.   See OSEP QA 23-01 E-1. |  |  |  | Click or tap here to enter text. |
| MUST: When an LEA’s determination is “Needs Substantial Intervention” at any time, the state withholds (after reasonable notice and opportunity for a hearing, consistent with 34 C.F.R. §§ 300.155, 300.221, and 76.401(d)), in whole or in part, any further payments under Part B to the LEA.  See OSEP QA 23-01 E-1. |  |  |  | Click or tap here to enter text. |
| **MAY**: The state may take additional enforcement actions that it identifies as appropriate under its determination’s policy.  See OSEP QA 23-01 E-1. |  |  |  | Click or tap here to enter text. |
| SHOULD: The state has policies and procedures that describe how any IDEA funds withheld from an LEA would be managed.  See OSEP QA 23-01 E-2. |  |  |  | Click or tap here to enter text. |

### Enforcement Action Unrelated to the Annual Determination

| Criterion | Needs Improvement | Somewhat in Place | In Place | Documentation |
| --- | --- | --- | --- | --- |
| **MAY:** The state utilizes all its available authority to monitor and enforce IDEA requirements.  See OSEP QA 23-01 E-3. |  |  |  | Click or tap here to enter text. |
| **MUST:** When the state determines that withholding, in whole or in part, an LEA’s IDEA Part B grant is an appropriate enforcement action, this is considered a determination on LEA eligibility, and the state notifies the LEA of that determination and provides the LEA with reasonable notice and an opportunity for a hearing under 34 C.F.R. §§ 76.401(a) and (d). See 34 C.F.R. §§ 300.155 and 300.221.  See OSEP QA 23-01 E-4. |  |  |  | Click or tap here to enter text. |
| **SHOULD:** The state has written policies, procedures, and practices that explain the state’s system of progressive sanctions and enforcement provisions.  See OSEP QA 23-01 E-6. |  |  |  | Click or tap here to enter text. |
| **COULD:** The state’s system of progressive sanctions and enforcement provisions includes placing a state-designated management team at the local level to develop and implement the policies, procedures, and practices necessary to bring the agency into compliance.  See OSEP QA 23-01 E-6. |  |  |  | Click or tap here to enter text. |
| **MAY:** The state’s enforcement policies and procedures include the ability to take over the direct provision of special education and related services from an LEA in certain circumstances.  See OSEP QA 23-01 E-6. |  |  |  | Click or tap here to enter text. |
| **MUST:** If the state determines that the LEA is unable to establish and maintain programs of FAPE that meet Part B requirements, the state must use the payments that would otherwise have been available to the LEA to provide special education and related services directly to children with disabilities residing in the area served by that LEA. 34 C.F.R. § 300.227(a)(1)(ii).  See OSEP QA 23-01 E-6. |  |  |  | Click or tap here to enter text. |

### Key Takeaways

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| Priority Area | Next Steps |
| 1. Click or tap here to enter text. | Click or tap here to enter text. |
| 2. Click or tap here to enter text. | Click or tap here to enter text. |
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Project Officer: Perry Williams (June 2024)

WestEd is the lead organization for NCSI. For more information about the work of WestEd, NCSI, and their partners, please visit [www.ncsi.wested.org](http://www.ncsi.wested.org) and [www.wested.org](http://www.wested.org).

1. The OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (commonly called “OMB Uniform Guidance”) is codified in 2 C.F.R. Part 200 and applies to all federal grant recipients, including states receiving IDEA funds. [↑](#footnote-ref-2)
2. See the [Non-Regulatory Guidance on Flexibility and Waivers for Grantees and](https://www2.ed.gov/policy/gen/guid/disasters/disaster-guidance.pdf) [Program Participants Impacted by Federally Declared Disasters](https://www2.ed.gov/policy/gen/guid/disasters/disaster-guidance.pdf) (Jan. 2022). [↑](#footnote-ref-3)
3. See in [IDEA Part B Regulations Significant Disproportionality](https://sites.ed.gov/idea/files/significant-disproportionality-qa-03-08-17-2.pdf) [(Equity in IDEA) Essential Questions and Answers](https://sites.ed.gov/idea/files/significant-disproportionality-qa-03-08-17-2.pdf) (Dec. 19, 2016). [↑](#footnote-ref-4)
4. States will no longer be allowed to report on the correction of individual child-specific noncompliance by reviewing a subset or sample of previously noncompliance files as a method to verify the correction, beginning with the federal fiscal year 2024 SPP/APR, submitted February 1, 2026. [↑](#footnote-ref-5)