**[State] Part B Document Request**

**Issued [Date], for [Month of Engagement] Engagement**

**The Office of Special Education Programs (OSEP) has developed this document request to assist your State in identifying documentation that will demonstrate how the State carries out its general supervision responsibilities under the Individuals with Disabilities Education Act (IDEA). This document request outlines the type of information that will assist OSEP in gaining a better understanding of your State’s general supervision system, including specific examples of documentation that OSEP has found helpful when evaluating States’ systems across the various monitoring components.**

**OSEP does not expect the State to have documents that are responsive for each example. We hope that providing examples of the multiple types of documents OSEP has found helpful in understanding a State’s general supervision system will be helpful as your State prepares for OSEP’s differentiated monitoring and support (DMS) review. Please note that the document request does not represent an exhaustive list of documentation a State may wish to provide; States may have alternative names for documents or alternate documents that will satisfy the requested item. If the State has other documents that would be relevant in demonstrating the State’s general supervision practices, OSEP encourages the State to include those in their file sharing.**

**OSEP expects the State to submit documents by the END of the month the document request is issued. Please do not hesitate to reach out to your State Lead if you have questions or need additional clarification regarding this request.**

**Link to State Website:**

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# Monitoring and Improvement

| **Monitoring and Improvement Documents** | **Name of document uploaded (with link to SharePoint file/folder), link to location on State website, or indicate “Not Applicable”** |
| --- | --- |
| Monitoring procedures and manuals  |  |
| **Actual Comprehensive Monitoring Cycle** Include names of all local educational agencies (LEAs) in the State that have been monitored, including any targeted reviews that occurred in the previous three years and the dates monitored.Also, include when and how additional entities were monitored such as: State-operated programs (e.g., detention centers, hospital education, juvenile and adult corrections, Schools for the Deaf and Blind, Work Force Centers, private hospitals, or nursing homes). |  |
| **Samples of documents completed from three LEAs from the past three years of the State’s monitoring cycle** **(Federal Fiscal Year (FFY) 2021, FFY 2022, FFY 2023)** |
| * Letter of notification to LEA regarding the State’s monitoring activity
 |  |
| * Data file or information that the State used to evaluate the LEA’s compliance with IDEA (child-specific and systemic).
 | **Examples of data or information used could include:** * On-site visit agendas
* Self-Assessment completed by the LEA
* Notes from school or site visits, copies of notes from interviews with students or parents
* Notes from interviews with local staff
* Notes from any observations completed (classroom or provider)
* Notes from classroom or site walkthroughs
* Review of student transcripts
* Discipline data
 |
| * Finalized letter/report to the LEA after monitoring activity is completed
 |  |
| * Actual evidence and examples (documents and data) reviewed that the LEA must produce to demonstrate that correction of noncompliance has occurred:
	+ Child-specific compliance
	+ Systemic compliance
 | **Examples of data or information used could include if applicable:** * Populated CAPs which include timelines and activities
* Data files demonstrating child-specific correction
* Trainings or other activities completed by the LEA related to the area of finding
* Memorandums or other documents the State uses as a part of their correction process
 |
| * Tracking tool or other mechanism used to track the status of correction for identified findings
 |  |
| * Noncompliance close-out letter to the LEA
 |  |
| **Examples of how each of the following are monitored (populated record review forms, protocols, or other documents) from LEAs that were monitored in the last three years** |
| * Parent and student receipt of special education procedural safeguards
 |  |
| * Initial eligibility and reevaluations
 |  |
| * Discipline processes
 |  |
| * Student transfers
 |  |
| * Termination from related services and special education services
 |  |
| * Preschool services
 |  |
| * Postsecondary transition
 |  |
| * C to B transition
 |  |
| **Annual Determination Letters issued from the State to its LEAs for the previous three years****(FFY 2021, FFY 2022, FFY 2023)** |
| * Annual determination letter
 |  |
| * Evidence and examples (documents and data) reviewed that the State used when making its annual determinations to include:
1. performance on compliance indicators;
2. valid and reliable data;
3. correction of identified noncompliance; and
4. other data available to the State about the LEA’s compliance with IDEA, including any relevant audit findings.
 |  |
| **Evidence of State systematic auditing and validating school divisions’ self-determinations of compliance** **for 618 Data** |
| * Indicator 4A: Specific policies and procedures the State has in place to examine LEA 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.
 |  |
| * Indicator 4B: Evidence of how the State reviews and, if appropriate, revises (or requires the affected State agency or LEA to revise), where such discrepancies have occurred, their 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.
 |  |
| * Indicator 9 (Disproportionate Representation by Race/Ethnicity): Specific policies and procedures the State has in place to analyze and determine, based on State’s Child Count data collected under IDEA Section 618, if the disproportionate representation of racial and ethnic groups in special education and related services was the result of inappropriate identification.
 |  |
| * Indicator 10 (Disproportionate Representation by Race/Ethnicity in Specific Disability Categories): Specific policies and procedures the State has in place to analyze and determine, based on State’s Child Count data collected under IDEA Section 618, if the disproportionate representation of racial and ethnic groups in specific disability categories was the result of inappropriate identification.
 |  |
| **Example of targeted monitoring (i.e., a monitoring activity that occurs outside of the State’s normal monitoring cycle to address emerging or new issues, and typically is limited in scope) (if applicable).** |
| * Policies and procedures related to targeted monitoring (if included in larger monitoring manual, indicate page or section)
 |  |
| * Letter of notification to LEA of the targeted monitoring activity
 |  |
| * Evidence and examples (documents and data) reviewed which led to the targeted monitoring activity
 | **Examples of data or information used could include:** * 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.
 |
| * Finalized letter/report to the LEA after the targeted monitoring activity completed
 |  |

# Data

| **Data Documents** | **Name of Document uploaded (with link to SharePoint file/folder), link to location on State website, or indicate “Not Applicable”** |
| --- | --- |
| **OSEP Required Documents to Review** |  |
| Data user guide/manual State educational agency (SEA) and/or local program) |  |
| Business rules documentation |  |
| Standardized training materials (SEA and/or local program) |  |
| Data monitoring protocols (SEA and/or local program) |  |
| Data collection/reporting calendar |  |
| **Copy of data file or information that the State uses to evaluate the LEA compliance with IDEA specific to the SPP/APR compliance indicators (child specific and systemic)** |
| * Part B Indicator 4B
 |  |
| * Part B Indicator 9
 |  |
| * Part B Indicator 10
 |  |
| * Part B Indicator 11
 |  |
| * Part B Indicator 12
 |  |
| * Part B Indicator 13
 |  |
| **Data file or information that the State uses to evaluate the representativeness of LEA data for results indicators** |
| * Part B Indicator B-8 (Parent Involvement
 |  |
| Public Input process, including activities carried out to obtain input and build capacity of a diverse group of parents to support the implementation of activities designed to improve outcomes  | **Examples of data or information used to obtain input could include:** * Target setting
* Analyzing data
* Developing improvement strategies
* Evaluating progress
 |
| Evidence of how the State uses data to identify any trends or patterns within its system related to equity, including ensuring equitable access to high-quality special education and related services and how this information is used to determine steps to improve outcomes. |  |
| **Reference Documents/No State Response Required** |
| Section 618 Data Collection Requirements |  |
| Section 618 Data Quality Reports  |  |
| Section 616 State Performance Plan/Annual Performance Report (SPP/APR) Measurement Table/Reporting Requirements |  |
| RDA Matrix |  |
| State Data Displays |  |
| Section 616 SPP/APR |  |

# Fiscal Part B

| **Fiscal Documents: Part B** | **Name of Document uploaded (with link to SharePoint file/folder), link to location on State website, or indicate “Not Applicable”** |
| --- | --- |
| Organizational chart, including which offices are responsible for fiscal monitoring of IDEA Part B programs |  |
| Current fiscal monitoring policies and procedures (e.g., fiscal monitoring manuals, fiscal monitoring protocols, self-assessments)  |  |
| If applicable, proposed fiscal monitoring policies and procedures (e.g., fiscal monitoring manuals, fiscal monitoring protocols, self-assessments) |  |
| Fiscal Monitoring cycle (chart and/or description) |  |
| Evidence of State fiscal training conducted with LEAs |  |
| Risk rubric/assessment/factors for selecting LEAs for monitoring |  |
| Monitoring reports or letters that include IDEA-related and/or cross-cutting fiscal monitoring for LEAs programs for prior three years (FFY 2021, FFY 2022, FFY 2023) |  |
| Corrective Action Plans or other evidence of correction of fiscal monitoring findings |  |
| Letters closing out IDEA-related and/or cross-cutting fiscal monitoring findings for LEAs for the prior three years (FFY 2021, FFY 2022, FFY 2023) |  |
| Policies and procedures for resolving IDEA-related Single Audit findings for LEAs  |  |
| Summary of IDEA-related Single Audit findings for LEAs for prior two years, LEA management decision letters (samples) |  |
| Copies of subaward notifications (GANs) sent to LEAs for both IDEA 611 and IDEA 619 for FFY 2021, 2022, 2023  |  |
| Evidence of State oversight of the LEA’s use of Federal Funds (e.g., State reimbursement procedures, LEA budget to expenditure reports and/or reviews) |  |
| Prior approval policies and procedures  |  |
| Fiscal data system procedures/screenshots, demonstrating the system’s capacity for monitoring of IDEA 611 and 619 funds  |  |

# Dispute Resolution: Mediation

| **Mediation** | **Name of Document uploaded (with link to SharePoint file/folder), link to location on State website, or indicate “Not Applicable”** |
| --- | --- |
| Prior written notice and Procedural safeguards notice: 34 C.F.R. §§ 300.503 and 300.504 for Part B |  |
| Policies and procedures related to mediation |  |
| State-imposed rules, regulations, or requirements for mediation |  |
| Any supplemental guides or Q & A documents the State has developed to provide guidance to the public related to dispute resolution activities |  |
| Any forms or instructions the State provides to parents and LEAs to request mediation |  |
| Description of how the mediation system is established in the State |  |
| Evidence of training provided to mediators |  |
| **Reference Documents/No State Response Required** |
| SPP/APR submission for Indicator B-16  |  |

# Dispute Resolution: State Complaints

| **State Complaints** | **Name of Document uploaded (with link to SharePoint file/folder), link to location on State website, or indicate “Not Applicable”** |
| --- | --- |
| Description of how the State complaint system is established in the State |  |
| Procedural safeguards notice |  |
| State-imposed rules, regulations, or requirements for State complaints |  |
| Evidence of State complaint decisions that address allegations of systemic noncompliance |  |
| Evidence of the State’s process for enforcing or implementing State complaint decisions that address systemic noncompliance |  |
| Model form for filing State complaints |  |
| Policies and procedures related to the resolution of State complaints |  |
| Any supplemental materials or guides the State has developed to explain the State complaint process to parents and other interested parties, including making clear that the State does not require the use of its model form to file a State complaint under IDEA |  |
| Log of correspondence filed as IDEA State complaints for the (FFY 2021, FFY 2022, FFY 2023)reporting periods. Include the following information in the State’s log: * Date the State received the correspondence
* Complainant type (e.g., parent, advocate, family member, the student, attorney, etc.)
* Status of the complaint (e.g., resolved, withdrawn by the complainant, dismissed by the State, pending)
* If resolved, the date of the State’s final decision on the allegations in the complaint
* If the 60-day timeline for resolution was extended, reason for the extension
* If resolved, the status of any required corrective action (e.g., open, closed, not applicable)
* If dismissed by the State, the date and reason for the dismissal
 |  |
| Description of the State’s mechanism for tracking State complaint timelines |  |
| Sample of prior written notice  |  |
| Sample of State complaints submitted on the State’s model form |  |
| Evidence of the State’s processing and resolution of State complaints (from start to finish)  |  |
| Examples of correspondence that was submitted as State complaints that the SEA dismissed with the State’s response to the complainant |  |
| If available on the State website, SEA State complaint decisions |  |
| Any supplemental guides or Q & A Documents the State has developed to provide guidance to the public related to the differences in the State complaint and due process procedures |  |
| **Reference Documents/No State Response Required** |
| The State’s IDEA Section 618 dispute resolution data (at least 3 years’ worth of data) |  |

# Dispute Resolution: Due Process

| **Due Process Complaints** | **Name of Document uploaded (with link to SharePoint file/folder), link to location on State website, or indicate “Not Applicable”** |
| --- | --- |
| Procedural safeguards notice |  |
| Description of how the due process system is established in the State |  |
| State-imposed rules, regulations, or requirements for the State’s due process system |  |
| Model forms for due process complaints |  |
| Policies and procedures related to due process complaints and hearings |  |
| Outline of the State’s process for resolving IDEA due process complaints, including assigned roles and responsibilities, including financial responsibility for costs associated with the due process hearing |  |
| Memoranda of Understanding, contracts, or other documents executed between the State and any entity responsible for implementing the IDEA’s due process hearing requirements |  |
| Evidence of the State’s processing, and resolution of, due process complaints (from start to finish)  |  |
| If available on the State website, SEA due process hearing decisions |  |
| Any supplemental guides or Q & A Documents the State has developed to provide guidance to the public related to dispute resolution activities |  |
| Training provided to hearing officers |  |
| MOU or other agreement between the State and hearing officers |  |
| Description of how the State’s due process system is established in the State under a one-tier system, if applicable: * Hearing is conducted by the SEA
 |  |
| Description of how the State’s due process system is established in the State under a two-tier system, if applicable: * Responsibility for conducting the hearing rests with the LEA. The aggrieved party has the right to appeal the LEA's decision to the SEA/LA where there is a right of appeal to the State.
 |  |
| Any Memoranda of Agreement or contracts with the entity responsible for conducting the hearings |  |
| **Reference Documents/No State Response Required** |
| The State’s IDEA section 618 dispute resolution data (for a minimum of 3 years’ data) |  |

# Significant Disproportionality (ALL Part B Programs)

| **Significant Disproportionality**  | **Name of Document uploaded (with link to SharePoint file/folder), link to location on State website, or indicate “Not Applicable”** |
| --- | --- |
| **Methodology and Data Quality** |
| Please confirm that [Section IV.B: Significant Disproportionality Form](https://www2.ed.gov/policy/speced/guid/idea/monitor/sig-dispro-reports-part-b.html) is current and accurate |  |
| Information, to the extent available, addressing how the State selected its definition of significant disproportionality, including documentation regarding: * The State’s risk ratio threshold, including whether the State decided to use a different risk ratio threshold for different categories of analysis;
* How the State selected its minimum N and cell sizes; multi-year flexibility;
* Whether the State decided to use reasonable progress; and
* How stakeholders were engaged in establishing and reviewing the State’s methodology.
 |  |
| Information related to the State’s internal controls or process/procedures used to ensure the accuracy, reliability, and validity of LEA data reported to the State, and the process used by the State to reduce the risk of using inaccurate or unreliable data. |  |
| Provide, if available, the last three years of data upon which significant disproportionality determinations were made at the LEA level. |  |
| **Identifying Significant Disproportionality** |
| Policies, procedures, and practices the State uses to identify an LEA with significant disproportionality. |  |
| The State’s process for requiring the review and, if appropriate, revision of policies, procedures, and practices for LEAs determined to have significant disproportionality. |  |
| Examples of information the State provides to LEAs that have been identified as having significant disproportionality, such as: * Notification to LEAs that have been identified as having significant disproportionality
* Root cause analysis, self-assessment, and/or data review
* LEA plan for Comprehensive Coordinated Early Intervening Services (CCEIS)/budget requirements and State review/approval process, if applicable
 |  |
| Evidence of how the State ensures that LEAs identified as having significant disproportionality publicly report on the revision of policies, practices and procedures. |  |
| **Use of Funds** |
| Procedures regarding the State’s process to ensure that any LEA determined to have significant disproportionality reserves the required 15% of total Part B funds and does not reduce its maintenance of effort obligation. |  |
| Evidence of how the State oversees the use of CCEIS funds by LEAs that have significant disproportionality, to ensure such funds are addressing factors contributing to the significant disproportionality, are aligned to allowable uses, and for appropriate student populations.  |  |
| **Review of Policies, Practices, and Procedures** |
| Information related to the State’s process for providing for the annual review, and if appropriate, revision of policies, practices and procedures when an LEA is identified with significant disproportionality.  |  |
| Information related to the State’s process for ensuring that the review of policies, practices, and procedures for an LEA identified with significant disproportionality is aligned to, and ensures compliance with, applicable IDEA requirements.  |  |
| **Identification and Correction of Noncompliance** |
| Information related to the process the State uses to determine whether an LEA that has been identified as having significant disproportionality. |  |
| Information related to the process the State uses to verify that any noncompliance identified was corrected.  |  |
| Evidence of any findings made by the State when LEAs do not comply with the significant disproportionality requirements (e.g., use of CCEIS funds, revision of policies and procedures)  |  |