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State Superintendent of Schools

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February 6, 2006

Mr. Michael Slade  
Education Program Specialist  
United States Department of Education  
Office of Special Education Programs  
Potomac Center South  
550 12<sup>th</sup> Street, SW, Room 4175  
Washington, DC 20202

Re: Special Conditions Report II

Dear Mr. Slade:

The Maryland State Department of Education (MSDE), Division of Special Education/Early Intervention Services (DSE/EIS), is submitting the second of three required "special conditions" reports to the Office of Special Education Programs, United States Department of Education, to address ensuring individualized placement decisions and the provision of all related services as part of a free appropriate public education (FAPE) for the 2004-2005 School Year (SY). The MSDE, DSE/EIS, Office of Quality Assurance and Monitoring (QAM) has gone back and reviewed information to make determinations as to improved public agency performance for the SY 2004 – 2005. MSDE is in the process of reviewing the requirements for corrective actions based on monitoring reports issued during the 2004 – 2005 SY. Five local school systems (LSS) will be revisited prior to July 1, 2006. An update on this activity, including findings, will be available in Report III due to be submitted on May 15, 2006.

In this report, the DSE/EIS, Office of QAM is reporting on current diligent efforts to monitor public agencies. Evidence of the Office of QAM efforts is presented in Attachments 1-10 of the enclosed report.

If you need additional information or further clarification, please feel free to contact Dr. Linda F. Bluth, Director, Office of Quality Assurance and Monitoring at [lbluth@msde.state.md.us](mailto:lbluth@msde.state.md.us) or by phone at (410) 767-0264.

Sincerely,

Carol Ann Baglin, Ed.D.  
Assistant State Superintendent  
Division of Special Education/  
Early Intervention Services

CAB/LB  
Enclosures

c: Lois Taylor  
Linda F. Bluth  
Branch Chiefs

Maryland State Department of Education  
Division of Special Education/Early Intervention Services  
Special Conditions: Second Reporting Period  
February 15, 2006

The Maryland State Department of Education (MSDE), Division of Special Education/Early Intervention Services (DSE/EIS) is responding to the Office of Special Education Programs (OSEP) requirement to submit three reports to comply with Special Conditions. This report is the second of three reports covering monitoring visits conducted during the 2004-2005 SY which is required to be submitted to OSEP by February 15, 2006.

Reports are required to include the following information:

- 1. Ensuring individualized placement decisions**
  - a) Approved (or rejected) local school system (LSS) corrective action plans
  - b) Verified implementation of those LSS corrective action plans; and
  - c) Followed up with specified activities to ensure ongoing compliance with those LSSs.
  
- 2. Ensuring the provision of all related services as part of a free appropriate public education (FAPE)**
  - a) Approved (or rejected) LSS corrective action plans
  - b) Verified implementation of those LSS corrective action plans; and
  - c) Followed up with specified activities to ensure ongoing compliance with those LSSs.

The MSDE identified in its first report submitted to OSEP on November 15, 2005 certain gaps in its general supervisory system related to monitoring during the OSEP verification visit in March 2005. In this second report submitted to OSEP, MSDE will explain efforts initiated during the 2004-2005 SY "ensuring individualized placement decisions" and "ensuring the provision of all related services as part of FAPE" to meet the OSEP requirements.

The DSE/EIS, Office of Quality Assurance and Monitoring (QAM) was established on March 21, 2005 and reports directly to the Assistant State Superintendent of the DSE/EIS. All professional staff were in place as of January 9, 2006. (**Attachment 1**) Currently there are five full time professional staff and nine part-time staff. The LSS/PA "Assignment Chart" (**Attachment 2**) identifies QAM staff and assignment responsibilities for Monitoring for Continuous Improvement and Results (MCIR) for each LSS/PA. Full-time QAM staff are team leaders.

The DSE/EIS, QAM office, has developed and implemented a comprehensive schedule of meeting dates to ensure the coordination of MCIR activities (**Attachment 3**). Timely monitoring and verification of the completion of corrective action plans (CAPs) is a priority.

In addition, all LSS/PA MCIR reports and information are organized and located in notebooks and individual LSS and PA files are available for use by all DSE/EIS staff. This information is organized to assist with data verification or preparation for on-site visits.

On December 7, 2005 the Office of QAM conducted a full day off-site retreat to coordinate MCIR activities (**Attachment 4**) including standardizing the maintenance of MCIR information, dissemination of information, review of the status of self-assessment visits (**Attachment 5**), and follow-up self-assessment desk-audit and on-site visits (**Attachment 6**), including LSS/PA verification of information.

Between September 14, 2005 and December 15, 2005 the Office of QAM professional staff visited 24 LSSs and two (2) PAs to review the "Self-Assessment IDEA 2004, Part B" information submitted to MSDE. As stated in the first report, MSDE met its commitment to visit all LSSs and initiate PA visits. A minimum of two professional staff members attended each visit. The Director of the Office of QAM visited 23 of the 24 LSSs, but excluded herself from the Baltimore City Public School System visit because of prior employment. A copy of the Agenda, Monitoring Overview and Self-Assessment Agenda (Professional Talking Points), Self Assessment, Sample letter to a LSS, and Sign-In Sheet are located in **Attachment 7**. At the time of these visits, the Desk Audit On-Site Visit Schedule times were confirmed. A Sample Self-Assessment IDEA 2004 Part B: Desk Audit and On-site Verification Letter and Sign-In Sheet are located in **Attachment 8**.

As of February 15, 2006 all of the On-Site Desk Audit verification visits have been scheduled. The status of the information will be reported in the May 15<sup>th</sup> report. This information is in the process of being summarized by team leaders on the LSS/PA Self-Assessment Desk Audit and On-Site Verification Materials Form (**Attachment 9**). It will be summarized on the Special Education Self-Assessment IDEA 2004, Part B Validation Summary Report Form and entered into a database. This information will be returned to each LSS/PA, for the purpose of meeting the requirements in the Self-Assessment IDEA 2004, Part B.

### **Ensuring individualized placement decisions and the provision of all related services as part of a FAPE**

During the SY July 1, 2004 – June 30, 2005, MSDE, DSE/EIS, Office of QAM began carrying out monitoring activities to both ensure individualized placement decisions and the provision of all related services as a part of FAPE. During this period, eight (8) of the 24 LSSs were monitored for compliance with requirements for the placement of students with disabilities in the least restrictive environment and the provision of related services in accordance with individual student individualized education programs (IEPs). Of these, five LSSs had findings of noncompliance. **Chart 1** summarizes the total number of LSSs monitored for a FAPE in the least restrictive environment (LRE) and the provision of related services requiring corrective action plans for the period from July 1, 2004 - June 30, 2005.

## Chart 1

### *Local School Systems Monitored for a FAPE*

Time Period	Total # Number of LSS in MD	Total # LSS Monitored for FAPE in the LRE	# LSS Monitored Compliant	# LSS Monitored Noncompliant	# LSS Monitored with CAP for LRE and/or related services	# with completed CAPs
July 1, 2004 – June 30, 2005	24	8	3	5	6 <sup>^</sup>	1 <sup>^</sup>

*\*One CAP in the State's monitoring was added as the result of a LSS self-assessment.*

*^One CAP in the State's monitoring was added as a result of the EMCIR process. One CAP was completed for this system. Desired progress was not achieved and an additional CAP and other sanctions are being implemented.*

**Chart 2** is the Corrective Action Plan (CAP) Completion Date Summary information. Included in this chart is the required CAP completion date. One LSS was required to submit a CAP on or before 1/18/06. This information was submitted as required within specified timelines. The office of QAM has a scheduled on-site record review verification visits for January 25<sup>th</sup> and January 27<sup>th</sup> (**Attachment 10**). The findings will be summarized after the submission of the February 15, 2006 report and will be included in the May 15, 2006 report submitted to OSEP.

## Chart 2

### *Corrective Action Plan Completion Date Summary*

Date of Monitoring Report	Identified Non-compliant with LRE and or Related Services	CAP Completion Date
06-01-05	√	06-01-06
01-18-05	√	01-18-06
03-01-05	√	03-01-06
03-11-05	√	03-11-06
04-14-05	√	04-14-06

## Summary

In January 2005, MSDE completed the Enhanced Monitoring for Continuous Improvement and Results II (EMCIR II) process for the Baltimore City Public School System (BCPSS) for the 2003-2004 school year. The MSDE and BCPSS jointly approved the CAP and identified the period of October 9, 2004 to October 9, 2005 as the timeframe for the implementation and completion of the CAP. With additional areas on non-compliance in the area of provision of related services identified in the next monitoring report, EMCIR III, issued in June 2005, MSDE with the approval of the OSEP redirected federal funds to improve service delivery. The redirection of these funds occurred in conjunction with the assignment of the Intensive Management and Capacity Improvement (IMCI) team and other MSDE staff for on-site technical assistance. The portion of grant funding released is allocated to implement the corrective actions identified by MSDE through the EMCIR (Volumes One through Three) and to remedy the identified areas of persistent noncompliance.

The MSDE will continue to monitor to verify that a FAPE in the LRE and the provision of related services is provided. MSDE staff is in the process of revising the CAP to ensure improved compliance.