

Attachment 8

Public Agency: _____

Date: _____

***Self-Assessment
IDEA 2004 Part B***



***Desk Audit
and
On-Site Verification Materials***

*Monitoring for Continuous Improvement and Results
2004-2005*

Maryland State Department of Education
 Division of Special Education/Early Intervention Services
 Self-Assessment Verification Desk Audit Worksheets
 IDEA Part B

LSS/PA Name	
Dates of MSDE Desk Audit	

I. State Priority Areas

A. Over-representation

1. All disabled students: Proportionate representation of African American students in special education compared to the general population.

Change in 2005: Disproportionate representation of racial and ethnic groups in special education that is a result of inappropriate identification.

Data Source: Maryland Special Education – Focused Monitoring Over-Representation, Rank Ordered by Percentages (December 1, 2002, October 31, 2003 and October 29, 2004)

	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No

Data/Documentation Review

	Percent of African American Students in General Population		Percent of SWD Who Are African American (see overall)		Percent of SWD Above the Upper End of the Expected Range	
	MD	LSS	MD	LSS	MD	LSS
2002						
2003						
2004						

Further review of data demonstrates that:

Check all that apply.

<input type="checkbox"/>	Indicator does not apply to public agencies.
<input type="checkbox"/>	LSS/PA has a Corrective Action Plan (CAP) related to this area.
<input type="checkbox"/>	The group is < 20 and the difference between the expected count and the actual count is < 10.
<input type="checkbox"/>	Data indicates a trend (minimum 3 years):
<input type="checkbox"/>	MSDE awarded a competitive grant to the LSS/PA for FY 06 to address the issue of Disproportionality. Amount of grant award: \$
<input type="checkbox"/>	District is under requirement to reserve 15% of Part B funds under section 613(f) to provide comprehensive coordinated early intervening services, particularly to serve children who are significantly over identified under 618(d)(1). (Based on prior year: (October 31, 2003).

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Date of MSDE Desk Audit	

I. State Priority Areas

A. Over-representation

2. By disabilities: Proportionate representation within disability categories.
 Data Source: Maryland Special Education – Focused Monitoring Over-Representation,
 Rank Ordered by Percentages (December 1, 2002, October 31, 2003 and October 29, 2004)

	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation	Improvement Plan Required		
	Yes		No

Data/Documentation Review

	Mental Retardation				Emotionally Disturbed				Specific Learning Disability			
	Percent Identified as MR Who Are African American		Percent Above the Upper End of Expected Range		Percent Identified as ED Who Are African American		Percent Above the Upper End of Expected Range		Percent Identified as SLD Who Are African American		Percent Above the Upper End of Expected Range	
	MD	LSS	MD	LSS	MD	LSS	MD	LSS	MD	LSS	MD	LSS
2002												
2003												
2004												

Further review of data demonstrates that:

Check all that apply.

	Indicator does not apply to public agencies.
MR ___ ED ___ SLD ___	The group is < 20 and the difference between the expected count and the actual count is < 10.
MR ___ ED ___ SLD ___	Data indicates a trend (minimum 3 years):
	LSS/PA has a Corrective Action Plan (CAP) related to this area.

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LSS/PA Name	
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I. State Priority Areas

A. Over-representation in LRE C

3. Proportionate representation within LRE C.

Data Source: Maryland Special Education – Focused Monitoring Over-Representation,
 Rank Ordered by Percentages (December 1, 2002, October 31, 2003 and October 29, 2004)

	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No

Data/Documentation Review

	Percent African American Students Whose Placement Is LRE C		Percent African American Students Above the Upper End of the Expected Range	
	MD	LSS	MD	LSS
2002				
2003				
2004				

Further review of data demonstrates that:

Check all that apply.

<input type="checkbox"/>	Indicator does not apply to public agencies.
<input type="checkbox"/>	The group size is < 20.
<input type="checkbox"/>	Data indicates a trend (minimum 3 years).
<input type="checkbox"/>	LSS/PA has a Corrective Action Plan (CAP) related to this area.

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I. State Priority Areas

B. Exit

**1. Dropout: Dropout rate for students with disabilities will not exceed 3%.
 Change in 2005:** Percent of youth with IEPs dropping out of high school compared to the percent of all youth in the State dropping out of high school should be the same.

Data Source: mdreportcard.org

	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes

Data/Documentation Review

	Number Dropout: General Education Students	a. Percent Dropout: General Education students	Number Dropout: Special Education Students	b. Percent Dropout: Special Education Students
01-02				
02-03				
03-04				

Further review of data demonstrates that:

03-04 Gap: $a - b =$ _____
 (plus indicates percent of SWD dropping out is less than that for general education students; negative indicates percent of SWD dropping out is greater than that for general education students)

2005 data available:
 04-05 Gap: $a - b =$ _____

Check all that apply.

	SSIS exit data. Percent exit by dropout: _____
	Data indicates a trend (minimum 3 years).
	SSIS transfer data. Number of students not known to be continuing _____, add this to drop out number _____
	AYP _____ met _____ not met for graduation rate.

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I. State Priority Areas

B. Exit

2. Graduation with a Diploma: The percent of students with disabilities exiting with a diploma will equal that of general education students.

Change in 2005: Percent of youth with IEPs graduating from high school with a diploma compared to the percent of all youth in the State graduating with a regular diploma.

Data Source: mdreportcard.org

	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No

Data/Documentation Review

	a. Percent Special Education Graduating With A Diploma		b. Percent General Education Graduating With A Diploma		Percent Difference = a - b	
	MD	LSS/PA	MD	LSS/PA	MD	LSS/PA
	01-02					
02-03						
03-04						

Further review of data demonstrates that:

03-04 Gap: a - b = _____

(plus indicates percent of SWD dropping out is less than that for general education students; negative indicates percent of SWD dropping out is greater than that for general education students)

2005 data available:

04-05 Gap: a - b = _____

Check all that apply.

	Indicator does not apply to public agencies.
	SSIS exit data: Percent exiting with diploma: _____
	Data indicates a trend (minimum 3 years).
	AYP <input type="checkbox"/> met <input type="checkbox"/> not met for graduation rate.

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I. State Priority Areas

C. Suspension/Expulsion Rate

1. Summing to >10 days: The percentage of students with disabilities receiving suspensions summing to greater than 10 days will be proportionate to non-disabled students.

Data Source: Maryland Suspension Report-MSDE/DAA

	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes

Data/Documentation Review

	Number of SWD Suspended	Percent of SWD Suspended	Number Nondisabled Students Suspended	Percent Nondisabled Students Suspended	Ratio	>2:1 Ratio (yes/no)	Significant Discrepancy	
							Yes	No
01-02								
02-03								
Current								

Further review of data demonstrates that:

Check all that apply.

	Indicator does not apply to public agencies.
	The group size is < 20.
	Data indicates a trend (minimum 3 years).
	LSS/PA has a Corrective Action Plan (CAP) related to this area.
	There were _____ complaints related to suspension.

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LSS/PA Name	
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I. State Priority Areas								
D. Least Restrictive Environment								
<p>1. Ages 3-5: The percentage of children with disabilities, ages 3-5, receiving special education services in environments for non-disabled students (LRE M) will increase annually.</p> <p>Change in 2005: Percent of children with disabilities, ages 3-5, receiving special education services in settings with typically developing peers.</p> <p>Data Source: Maryland Special Education/ Early Intervention Services Census Data and Related Tables, (December 1, 2002, October 31, 2003 and October 29, 2004)</p>								
		Met	Not Met	Indicator Does Not Apply				
LSS/PA Rating								
MSDE Desk Audit Rating								
MSDE On-Site Rating Confirmation		Improvement Plan Required						
		Yes		No				
Data/Documentation Review								
	Number of SWD in LRE M		% of SWD in LRE M		Quartile Ranking			
	MD	LSS/PA	MD	LSS/PA	LSS/PA			
2002								
2003								
2004								
Further review of data demonstrates that:								
Check all that apply.								
Indicator does not apply to public agencies.								
Data indicates a trend (minimum 3 years).								
LSS awarded a competitive grant for FY 06 to address LRE. Amount								
LSS/PA had _____ complaints related to placement in the LRE, ages3-5.								
LSS/PA has a Corrective Action Plan (CAP) related to this area.								
	% SWD in Early Childhood Settings		% SWD in "home" Settings		% SWD in "combined" Settings		Total	
	MD	LSS/PA	MD	LSS/PA	MD	LSS/PA	MD	LSS/PA
2002								
2003								
2004								

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I. State Priority Areas						
D. Least Restrictive Environment						
<p>2. Ages 6-21: The percentage of children with disabilities, ages 6-21, and receiving special education services in general education settings (LRE A) will increase annually.</p> <p>Change in 2005: Percentage of children with disabilities, ages 6-21, and receiving special education services in LRE A, C, and public or private separate schools, or homebound or hospital.</p> <p>Data Source: Maryland Special Education/ Early Intervention Services Census Data and Related Tables, (December 1, 2002, October 31, 2003 and October 29, 2004)</p>						
	Met	Not Met	Indicator Does Not Apply			
LSS/PA Rating						
MSDE Desk Audit Rating						
MSDE On-Site Rating Confirmation			Improvement Plan Required			
			Yes		No	
Data/Documentation Review						
	MD Avg. LRE A	LSS/PA Avg. LRE A	MD Avg. LRE C	LSS/PA Avg. LRE C	MD Avg. F&G	LSS/PA Avg. F&G
2002						
2003						
2004						
Further review of data demonstrates that:						
Check all that apply.						
Indicator does not apply to public agencies.						
	% of SWD in LRE A		% of SWD in LRE C		Total % of SWD in LRE separate schools, home, hospital	
	MD	LSS	MD	LSS/PA	MD	LSS/PA
2002						
2003						
2004						
LSS/PA has a Corrective Action Plan (CAP) related to this area.						
LSS awarded a competitive grant for FY 06 to address LRE. Amount of grant award:						
LSS/PA had _____ complaints related to placement in the LRE.						

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I. State Priority Areas

E. Transition From Part C To Part B

Individualized Education Programs (IEPs) for children transitioning from Part C (Infant and Toddlers) to Part B are in effect by the child's third birthday. Change in 2005: Percent of children referred by Part C prior to age 3 and who are found eligible for Part B, and who have an IEP developed and implemented by their third birthday.

Data Source: LSS submitted policies and procedures to MSDE, LSS collected data.

	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No

Data/Documentation Review

Part C to Part B Transition policies and procedures are approved. ____ Yes ____ No

Lead Agency _____

LSS Data:

Further review of data demonstrates that:

Check all that apply.

<input type="checkbox"/>	Indicator does not apply to public agencies.
<input type="checkbox"/>	LSS/PA has a Corrective Action Plan (CAP) related to this area.
<input type="checkbox"/>	LSS maintains a database of children who are transitioning from Part C (Infant and Toddlers) to Part B.

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I. State Priority Areas

F. Participation in Statewide Assessment Programs

1. Maryland Model for School Readiness (MMSR) – (Kindergarten Assessment.) All students with disabilities participate in the appropriate testing program.

Data Source: Maryland Model for School Readiness Report;
www.mdk12.org/instruction/ensure/MMSR

	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes

Data/Documentation Review

	2002	2003	2004
	Percent Participation	Percent Participation	Percent Participation
MMSR			

Further review of data demonstrates that:

Check all that apply.

	Indicator does not apply to public agencies.
	Data indicates a trend (minimum 3 years).
	LSS/PA has a Corrective Action Plan (CAP) related to this area.

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I. State Priority Areas

F. Participation in Statewide Assessment Programs

2. Maryland School Assessment (MSA)
 3. Alternate Maryland School Assessment (ALT-MSA) All students with disabilities participate in the appropriate testing program.
 Data Source: Mdreportcard.org; mdk12.org

	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation	Improvement Plan Required		
			Yes
			No

Data/Documentation Review

Adequate Yearly Progress (AYP) Participation Rate												
MSA (includes Alt- MSA)	2003				2004				2005			
	Reading		Math		Reading		Math		Reading		Math	
	Met	Not Met	Met	Not Met	Met	Not Met	Met	Not Met	Met	Not Met	Met	Not Met

Further review of data demonstrates that:

Check all that apply.

	Indicator does not apply to public agencies.
	Data indicates a trend (minimum 3 years).
	LSS/PA has a Corrective Action Plan (CAP) related to this area.

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I. State Priority Areas				
F. Participation in Statewide Assessment Programs				
4. High School Assessment (HSA) All students with disabilities participate in the appropriate testing program.				
Data Source: Mdreportcard.org, mdk12.org				
	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No
Data/Documentation Review				
Number of SWD Who Participated in HSA				
	English	Algebra	Biology	Government
2003				
2004				
2005				
Further review of data demonstrates that:				
Check all that apply.				
	Indicator does not apply to public agencies.			
	Data indicates a trend (minimum 3 years).			
	Has a tracking system in place to monitor H SA participation.			

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I. State Priority Areas

G. MSA Results

1. Reading: Special education students, as a sub-group will improve in meeting Adequate Yearly Progress (AYP) in reading.

Data Source: Mdreportcard.org; mdk12.org

	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No

Data/Documentation Review

Adequate Yearly Progress (AYP: Met, Not Met)

	2003		2004	
	Met	Not Met	Met	Not Met
All Students: Reading				
Special Education: Reading				

Further review of data demonstrates that:

Check all that apply.

<input type="checkbox"/>	Met AYP due to safe harbor.
<input type="checkbox"/>	Data indicates a trend (minimum 3 years).
<input type="checkbox"/>	MSDE awarded a competitive grant to the LSS/PA for FY 06 to address the issue of meeting AYP. Amount of grant award: _____
<input type="checkbox"/>	LSS/PA met AYP for participation in statewide testing.

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I. State Priority Areas				
G. MSA Results				
2. Math: Special education students, as a sub-group will improve in meeting Adequate Yearly Progress (AYP) in math.				
Data Source: Mreportcard.org; mdk12.org				
	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No
Data/Documentation Review				
Adequate Yearly Progress (AYP: Met, Not Met)				
	2003		2004	
	Met	Not Met	Met	Not Met
All Students: Math				
Special Education: Math				
Further review of data demonstrates that:				
Check all that apply				
	Met AYP due to safe harbor.			
	Data indicates a trend (minimum 3 years).			
	MSDE awarded a competitive grant to the LSS/PA for FY 06 to address the issue of meeting AYP. Amount of grant award: \$ _____			
	LSS/PA met AYP for participation in statewide testing.			

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I. State Priority Areas

H. HSA Results

HSA: Test results for students with disabilities participating in the HSAs are monitored and compared to results for non-disabled students.
 Data Source: Mdreportcard.org; mdk12.org

	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No

Data/Document Review

High School Assessment: Percent Passing

	English I				Biology				Government				Algebra			
	Regular Education		Special Education		Regular Education		Special Education		Regular Education		Special Education		Regular Education		Special Education	
	MD Avg.	LSS Avg.	MD Avg.	LSS Avg.	MD Avg.	LSS Avg.	MD Avg.	LSS Avg.	MD Avg.	LSS Avg.	MD Avg.	LSS Avg.	MD Avg.	LSS Avg.	MD Avg.	Local Avg.
2003																
2004																
2005																

Further review of data demonstrates that:

Check all that apply.

	Indicator does not apply to public agencies.
<input type="checkbox"/> English <input type="checkbox"/> Biology <input type="checkbox"/> Government <input type="checkbox"/> Algebra	Data indicates a trend (minimum 3 years).
	LSS/PA met AYP for participation in statewide testing.
	Lss/PA has a process for monitoring and comparing results.

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II. General Supervision			
A. Student Record Review			
1. LSS/PA has an annual process for record review and focused professional development designed to ensure compliance with federal and state regulations. Data Source: LSS/PA data; MSDE monitoring report within last school year			
	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes
Data/Documentation Review			
<p>___ LSS/PA has a written process that describes an annual review of records; professional development plan supports findings.</p> <p>___ LSS/PA has evidence to support an annual review of records but does not have a written description of the process.</p> <p>___ LSS/PA has a written process but cannot demonstrate evidence to support inclusion of noncompliant areas into professional development activities.</p> <p>___ LSS/PA has no evidence to support that the indicator is met.</p>			
Further review of data demonstrates that:			
Check all that apply.			
	LSS/PA has data from previous record reviews summarized.		
	LSS/PA has data from previous record reviews analyzed.		
	LSS/PA has a long-range plan to manage record reviews.		
	LSS/PA has a Corrective Action Plan (CAP) related to this area.		

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II. General Supervision			
A. Student Record Review			
2. Special education student records will demonstrate compliance with federal and State regulations.			
Data Source: LSS/PA data, MSDE monitoring report within last school year			
	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes
Data/Documentation Review			
Problem areas:			
Further review of data demonstrates that:			
Check all that apply.			
<input type="checkbox"/>	MSDE Comprehensive Record Review completed.		
<input type="checkbox"/>	MSDE Focused Record Review completed. Area _____		
<input type="checkbox"/>	LSS/PA has a Corrective Action Plan related to findings of noncompliance in special education record keeping.		
<input type="checkbox"/>	LSS/PA has data from previous record reviews summarized.		
<input type="checkbox"/>	LSS/PA has data from previous record reviews analyzed.		
<input type="checkbox"/>	LSS/PA has a long-range plan to manage record reviews.		
<input type="checkbox"/>	LSS/PA has a Corrective Action Plan (CAP) related to this area.		

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II. General Supervision				
B. Written Procedures: Public Agency Submission Standards (PASS)				
<p>Each public agency shall have on file with MSDE revised policies and procedures, including applicable forms, documents, handbooks, manuals, etc. that demonstrates the public agency meets the requirements of IDEA 2004.</p> <p>Data Source: Assurance Statements, Public Agency Written Policies, Special Education Handbook</p>				
	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No
Data/Documentation Review				
<p>_____ Date PASS submitted.</p> <p>_____ Meets Requirements of IDEA 2004.</p> <p>_____ Needs revisions to meet requirements of IDEA 2004.</p>				
Further review of data demonstrates that:				
Check all that apply.				
	LSS/PA has letter of finding (LOF) directing corrections to the PASS.			
	MSDE monitoring report directed changes to the PASS.			
	LSS/PA has a Corrective Action Plan (CAP) related to this issue.			

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II. General Supervision			
C. Staffing			
1. Board Approved staffing plan is on file with MSDE.			
Data Source: Local application contains Board Approved Staffing Plan			
	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes No
Data/Documentation Review			
___/___/___ Date Staffing Plan approved by MSDE.			
Further review of data demonstrates that:			
Check all that apply.			
<input type="checkbox"/>	Staffing Plan contains procedures related to the provision of FAPE due to position vacancies.		
<input type="checkbox"/>	LSS/PA has a Corrective Action Plan (CAP) related to the provision of related services.		
<input type="checkbox"/>	LSS/PA has written guidelines distributed to staff regarding the provision or services and missed services.		

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II. General Supervision					
C. Staffing					
2. Data on classes taught by highly qualified teachers is on file with MSDE. 3. Data on highly qualified and certified teachers is on file with MSDE.					
Data Source: Class Level Membership Report					
		Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating	2.				
	3.				
MSDE Desk Audit Rating	2.				
	3.				
MSDE On-Site Rating Confirmation				Improvement Plan Required	
				Yes	No
	2.				
	3.				
Data/Documentation Review					
Further review of data demonstrates that:					
Check all that apply.					
	Special Education Office has data on classes taught by "highly qualified."				
	There is evidence that the LSS/PA is working toward ensuring that each special education teacher is rated as "highly qualified," as appropriate.				
	There is evidence that the LSS/PA is working toward ensuring that teacher assistants are meeting the mandates of NCLB.				

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III. Complaint Management			
A. Complaints			
A corrective action plan has been developed and implemented to correct areas of identified noncompliance within the timelines specified by MSDE (in no case longer than one year).			
Data Source: Part B Dispute Resolution-End of Year Report			
	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes
			No
Data/Documentation Review			
Number of Complaints Investigated	Number of Corrective Actions Identified	Number of Corrective Actions Resolved Within 1 Year	Number of Corrective Actions Pending
Corrective Action Plan (CAP) related to the following issues:			
Further review of data demonstrates that:			
Check all that apply.			
<input type="checkbox"/> LSS directed to determine if violations are systemic in nature.			

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III. Complaint Management			
B. Due Process hearings			
Office of Administrative Hearings decisions are implemented as specified in the order.			
Data Source: Part B Dispute Resolution-End of Year Report			
	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes
Data/Documentation Review			
Number of Hearings Held	Number of Corrective Actions Required	Number of Corrective Actions Resolved Within Specified Timeline	Number of Corrective Actions Pending
Corrective Action Plan (CAP) related to the following issues:			
Further review of data demonstrates that:			
Check all that apply.			
<input type="checkbox"/> Hearing issue(s) appear to be systemic to the LSS.			

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LSS/PA Name	
Date of MSDE Desk Audit	

III. Complaint Management

C. Mediations

Each LSS/PA maintains practices that promote the use of mediation to resolve disputes.

Data Source: Part B Dispute Resolution-End of Year Report; Local data

	Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating				
MSDE Desk Audit Rating				
MSDE On-Site Rating Confirmation			Improvement Plan Required	
			Yes	No

Data/Documentation Review

Number of Mediations Requested	Number of Mediations Withdrawn	Number of Mediations Settled	Number Not Settled	Number Declined

Mediations related to the following issues:

Further review of data demonstrates that:

Check all that apply.

	LSS/PA has written procedures for dispute resolution (IDEA 2004).
	LSS/PA has developed written information explaining dispute resolution to parents (other than the Procedural Safeguards notice).

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Date of MSDE Desk Audit	

IV. Stakeholder Input			
A. Special Education Citizen Advisory Committee			
1. An active Special Education Citizen's Advisory Committee (SECAC) is maintained.			
Data Source: LSS/PA Local Data, Local Application			
	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes No
Data/Documentation Review			
LSS/PA has:			
_____ SECAC membership list			
_____ Agendas of meetings			
_____ SECAC bylaws			
Further review of data demonstrates that:			
Check all that apply.			
	Staffing Plan documents SECAC input and active involvement.		
	LSS/PA has a Corrective Action Plan (CAP) related to this issue.		

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Date of MSDE Desk Audit	

IV. Stakeholder Input			
A. Special Education Citizen Advisory Committee			
2. A copy of the Special Education Citizen Advisory Committee budget is submitted and filed with MSDE.			
Data Source: LSS/PA Local Data, Local Application			
	Met	Not Met	Indicator Does Not Apply
LSS/PA Rating			
MSDE Desk Audit Rating			
MSDE On-Site Rating Confirmation			Improvement Plan Required
			Yes
			No
Data/Documentation Review			
___ / ___ / ___ SECAC budget is on file with local application. (date)			
Further review of data demonstrates that:			
Check all that apply.			
<input type="checkbox"/> Staffing Plan documents SECAC input and active involvement.			

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Date of MSDE Desk Audit	

IV. Stakeholder Input
B. Parent Input
C. Public/Community
D. Staff Input

Parent, public/community and staff input are systematically gathered and used to improve the provision of special education and related services.

Data Source: LSS/PA local data

		Met	Not Met	Indicator Does Not Apply	
LSS/PA Rating	Parent Input				
	Public/ Community				
	Staff Input				
MSDE Desk Audit Rating	Parent Input				
	Public/ Community				
	Staff Input				
				Improvement Plan Required	
MSDE On-Site Rating Confirmation				Yes	No
	Parent Input				
	Public/ Community				
	Staff Input				

Data/Documentation Review

___ LSS/PA has written documentation (2003-2005) that input has been systematically gathered through system-wide survey(s) for:
 Parents___ Public/Community___ Staff___.

___ LSS/PA has written documentation that they consider and/or use the information gathered in program planning for the provision of special education and related services from:
 Parents___ Public/Community___ Staff___.

___ LSS/PA has documentation to support the use of input.

Further review of data demonstrates that:

Check all that apply.	
	LSS/PA has documentation to support the use of input but lacks written procedures.

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Probes

1. How will the initiative(s) result in substantial progress toward the LSS/PA meeting the standard/goal?

2. What professional development plans are in place to achieve the standard/goal?

Training level addressed:

- Awareness (basic knowledge)
- Skill development (improving performance)
- Transfer (sustained change in practice)

Audience(s) addressed:

- Administrators
- Regular Education Staff
- Community Members
- Other
- Special Education Staff
- Parents
- Stakeholder Group(s)

3. How does the LSS/PA monitor progress toward meeting the standard/goal? (include

**SY 2005- 2006 Monitoring Status for LRE
Based on 2004 Child Count Data**

	LRE A State Target: 57.25%	GAP	LRE C State Target: 17.72%	GAP	Separate Facilities (SF) State Target: 7.92%	GAP	Preschool (PS) LRE State Target: 40.54%	GAP	PAs With CAPs for LRE	Date Verify CAP	Date of LRE FM 1/1/06- 6/30/06
Allegany	84.35	+27.10	06.36	-14.36	2.86	-05.06	50.34	+09.80			
Anne Arundel	59.04	+01.79	15.53	-02.19	8.42	+00.05	17.05	-23.49	Active CAP	1/25-27/06	
Balt City	40.76	-16.49	27.22	+09.50	10.82	+02.90	35.57	-04.97	Active CAP	2/06	
Balt Co	58.14	+00.40	24.94	+07.22	8.06	+00.14	63.80	+23.26			2/23-28/06
Calvert	44.97	-12.28	07.85	-09.87	5.49	-02.43	25.48	-15.06	Active CAP	(10/04/06)	
Caroline	61.27	+04.02	12.54	-05.18	2.22	-05.70	37.33	-03.21			
Carroll	71.96	+14.71	08.63	-09.09	4.60	-03.32	29.34	-11.20			5-06
Cecil	75.13	+17.88	09.62	-08.10	2.69	-05.23	57.34	+16.80			
Charles	62.99	+05.74	12.68	-05.04	5.09	-02.83	43.29	+02.75			
Dorchester	80.70	+23.45	04.72	-13.00	0.83	-07.09	72.22	+31.68			
Frederick	79.15	+21.90	05.74	-11.98	3.79	-04.13	28.13	-12.41			
Garrett	69.17	+11.92	11.66	-06.06	0.80	-07.12	89.06	+48.52			
Harford	70.13	+12.88	04.00	-13.72	5.66	-02.26	47.11	+06.57			
Howard	73.45	+16.20	05.24	-12.48	4.52	-03.40	48.14	+07.60			
Kent	73.35	+16.10	10.66	-07.06	0.31	-07.61	100.0	+59.46			
Montgomery	53.30	-03.95	21.57	+03.85	7.32	-00.60	06.49	-34.05	Active CAP	(09/28/06)	5/2-5/-06 RS
PG	38.33	-18.92	27.69	+09.97	12.0	+04.03	61.71	+21.17	Active CAP	(03/01/06)	3/28-31/06
Queen Anne	89.67	+31.42	01.44	-16.28	2.88	-05.04	64.41	+23.87			
St Mary	70.53	+13.23	10.57	-07.15	1.85	-06.07	51.81	+11.27			
Somerset	81.74	+24.49	03.59	-14.13	1.20	-06.72	88.24	+47.70			
Talbot	77.11	+19.86	04.73	-12.99	0.25	-07.67	100.0	+59.46			
Washington	80.80	+22.75	03.61	-14.11	0.99	-06.93	70.35	+29.81	Active CAP	(03/11/06)	4/24-26/06
Wicomico	74.57	+17.32	10.96	-06.76	0.99	-06.93	41.25	+00.71			
Worcester	80.49	+23.24	07.37	-10.35	0.92	-07.00	40.58	-00.04			

COLOR CODING KEY		LRE A	LRE C	State Facilities	Preschool
	Meets or exceeds State target.	≥ 57.25%	≤ 17.72%	≤ 7.92%	≥ 40.54%
	Performing below the State target.	57.24% - 52.25%	17.73% - 22.72%	7.91% - 8.90%	40.53% - 35.54%
	Performing significantly below State target.	≤ 52.24	≥ 22.73%	≥ 8.91%	≤ 35.53%
	Monitored in LRE: Identified noncompliant and is implementing CAP.				
	Monitored in LRE: No findings in school age.				



Nancy S. Grasmick
State Superintendent of Schools

200 West Baltimore Street • Baltimore, MD 21201 • 410-767-0100 • 410-333-6442 TTY/TDD

November 1, 2005

Mrs. Diane Black
Director of Special Education
Anne Arundel County Public Schools
2644 Riva Road
Annapolis, MD 21401

Re: Self-Assessment IDEA 2004
Part B: Desk Audit and
On-site Verification

Dear Mrs. Black:

On September 29, 2005, the Office of Quality Assurance and Monitoring (QAM), Division of Special Education/Early Intervention Services (DSE/EIS) met with you to provide an overview of the revised Monitoring for Continuous Improvement and Results (MCIR) process and the Self-Assessment submitted by the Anne Arundel County Public School System.

Thank you for submitting revisions based on the discussion. The QAM staff has reviewed these revisions in preparation for the upcoming on-site visit. The goal of this visit will be to verify and finalize the Self-Assessment prior to posting on the website. Data from the Self-Assessment will be used by the Maryland State Department of Education (MSDE) to determine future monitoring activities.

This letter is to confirm the date for the desk audit and on-site verification visit. The on-site visit has been scheduled for Thursday, November 10, 2005 at 9:30 a.m. at your office.

It is requested that you have available the following:

- Hard copies of the revised Self-Assessment for each LSS staff participating in the meeting;
- Two sets of blank copies of IEP FORMS including notices/letters currently in use;

Mrs. Diane Black
November 1, 2005
Page Two

- Evidence to document compliance and or performance for standards/goals, ie. data, standards for Highly Qualified Teachers (Department of Human Resources report), Stakeholder Input, approval of your staffing plan (this could simply be an agenda from the BOE meeting at which it was approved) and an annual record review process;
- Other local documentation related to the improvement of special education and/or the correction of noncompliance.

In preparation for this meeting you may want to consider the participation of other staff members in your system that are integral to the analysis of data and the implementation of initiatives in special education and the delivery of special education services.

Questions about the submission or requirements of the Self-Assessment IDEA 2004, Part B on-site visit should be addressed to Mr. David Patterson, Monitoring Specialist, Office of Quality Assurance and Monitoring, at 410-767-0706, or by email, dpatterson@msde.state.md.us.

Sincerely,



Linda F. Bluth, Director
Office of Quality Assurance and Monitoring
Division of Special Education/
Early Intervention Services

c: Carol Ann Baglin
Branch Chiefs
Quality Assurance and Monitoring Team Members

Maryland State Department of Education
 Division of Special Education/Early Intervention Services
 Office of Quality Assurance and Monitoring

On-Site Visit Attendance Log

Date
11 / 10 / 05

LSS/PA Name and Location/Address

Anne Arundel Co Schools

Activity

Self-Assessment Desk Audit

MSDE Team Members

Name	Position	Role
Devin Black	Director of Spec Ed	410-222-5410
Paul Bilig	MSDE	
David Patterson	MSDE	410-767-0700