

Sample Final Report Worksheet

Suspension and Expulsion by Race/Ethnicity (B-4B) • On-site
February 2016

District Name Special Education Focused Monitoring Report Worksheet On-site Review

District Code:	00000
ISD Code:	00
Date of Report:	5/15/2016
On-site Review Date:	
Focused Monitoring Team:	
Name:	Title:

Section 1: Focused Monitoring Priority:

Suspensions and Expulsions by Race/Ethnicity

State Performance Plan:

The State Performance Plan (SPP), as authorized by the *Individuals with Disabilities Education Act* (IDEA) 2004, sets the context for focused monitoring. States are required under federal law to evaluate and report on efforts to implement the requirements and purposes of the IDEA. The plan includes evaluating and reporting on specific indicators. As required by the U.S. Department of Education, Office of Special Education Programs, all districts in the state must meet the federally established rigorous target of zero percent for SPP Indicator 4B.

SPP Indicator 4B – Suspensions and Expulsions by Race or Ethnicity

SPP Indicator 4B is the percent of districts that have:

- (a) A significant discrepancy, by race or ethnicity, in the rate of suspensions and expulsions of greater than 10 days in a school year of children with an individualized education program (IEP).
- (b) Policies, procedures, or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development and implementation of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards.

(§ 300.600(d) and 20 U.S.C. 1412(a)(22))

Section 2: Selection Criteria:

Michigan identifies districts with 2014-2015 data greater than or equal to the State threshold of 3.6 percent in at least one racial/ethnic group of students with an IEP suspended/expelled out of school for greater than ten days as having a significant discrepancy.

The district must ensure that its policies, procedures, and practices are compliant for students with an IEP who are {Race/Ethnicity}.

Results of On-site Review:

The following monitoring activities were conducted by the OSE team:

- A review of ____ student records
- Interviews with ____ staff members
- A review of the local’s policies, procedures, and practices related to students with IEPs

Team Leader Recommendation

- The on-site review yielded findings of noncompliance.
See the following table for specific information on the finding(s).
- The on-site review yielded no findings of noncompliance.

Finding(s) of Noncompliance	Evidence	Applicable State & Federal Rules	Required Corrective Action
Finding _____			

If findings, click here

Correction of Noncompliance:

The State requires the local to revise all noncompliant policies, procedures, and practices and correct all student level noncompliance. The State will verify that the noncompliant policies, procedures, and practices have been revised and all noncompliance corrected through follow-up review of data, interviews, and other documentation. The noncompliance must be corrected as soon as possible.

By July 1, 2016, the local must submit a focused monitoring corrective action plan, and then request verification and closeout by January 15, 2016. Technical assistance will be provided by the OSE staff.

As required by § 300.600 through § 300.609, the local needs to correct all areas of noncompliance as soon as possible, but no later than one year from the date of

notification, including verification. If this deadline is not met it will impact the local's determination and the State will take action to promptly bring the local into compliance; this may include increased state supervision and/or financial sanctions.

If findings with Expedited Correction, click here

Correction of Noncompliance:

Items of noncompliance were identified during focused monitoring. An expedited correction has been completed. As required by § 300.600 through § 300.609, the State required the local to revise all noncompliant policies, procedures, and practices and correct all student level noncompliance. The State verified that the noncompliant policies, procedures, and practices have been revised and that all noncompliance has been corrected through follow-up review of data, interviews, and other documentation. All items of student level noncompliance have been corrected. No further corrective action is required.

The local's 2017 Determinations Report may reflect that the local was non-compliant.

If no findings, click here

The on-site review yielded no findings of noncompliance. No corrective action is required.