

Targeted Monitoring Protocol

Vermont Agency of Education Special Education Program Monitoring Activities

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Purpose

This document shares details for targeted monitoring status, the highest degree of escalated monitoring activity within the Vermont Agency of Education (AOE) [General Supervision and Monitoring System](#). Targeted monitoring includes an escalated degree of mandatory technical assistance, and may include, but is not limited to: site visit(s), desk audit(s), redirection of funds, surveys of district staff, surveys of parents/guardians within the district, and interviews.

The information shared in this document primarily speaks to targeted monitoring as it occurs when findings of non-compliance are identified during cyclic monitoring and not successfully corrected during the subsequent selective monitoring status.

In the event a LEA is placed in targeted monitoring status for reason(s) other than non-compliance not corrected during selective monitoring, such as the following, the timeline and sequence of events will be detailed for the district based on its specific monitoring and corrective needs.

- Dispute resolution requests
- Parent and family call logs
- Administrative complaint by an individual and/or a group
- Email correspondence or oral statements (e.g., during a meeting) disclosing non-compliance
- Critical and/or special investigative audits and findings related to special education

Program Monitoring - Cyclic, Selective, and Targeted Monitoring

The table below describes the three monitoring statuses to which any LEA may be assigned, with a brief description illustrating their relationship to each other and their escalating nature.

Following this overview, the remaining sections of this document will describe targeted monitoring in greater detail. For additional information regarding cyclic and selective monitoring, please see the [Special Education Program Monitoring System guide](#).

Monitoring Status	Description
Cyclic Monitoring	Cyclic monitoring includes reviewing LEA data for state and federal compliance requirements once during a three-year cycle. All Vermont LEAs encounter cyclic monitoring once every three years, regardless of performance, as part of the routine cycle through each of the three cohorts. Based on the reviewed submissions, cyclic monitoring may conclude with a closure of the process, if the district is fully compliant, or with the issuance of findings of non-compliance.
Selective Monitoring	Selective is the first escalated monitoring status that occurs when submissions made during Cyclic Monitoring result in findings of non-compliance. For example, a district who, through the Cyclic Monitoring report, is notified of non-compliance for Indicator 11 will be in selective monitoring for the same indicator.

Monitoring Status	Description
Targeted Monitoring	<p>Targeted is the escalated monitoring status that occurs when submissions made during Selective Monitoring do not correct findings of non-compliance or other sources reveal non-compliance. Examples include, but are not limited to: dispute resolution request(s), administrative complaint(s), communication disclosing non-compliance, and/or critical and/or special investigative audits and findings related to special education.</p> <p>LEAs may also be placed in targeted monitoring to address issues pertaining to data integrity, accuracy, and the ethical requirements associated with data submission to a State Educational Agency.</p>

Targeted Monitoring Overview

When findings of non-compliance are identified during cyclic monitoring and are not verified as corrected by the end of selective monitoring, a LEA is then assigned to the escalated status of targeted monitoring.

The following date ranges are shared for LEA reference, as well as to illustrate the progression of monitoring statuses.

Monitoring Status	Cyclic monitoring	Selective monitoring	Targeted monitoring
Date Span	SY2021-2022	September 1, 2022 through November 30, 2022	January 1, 2023 until all findings of non-compliance are verified as corrected
Date Span	SY2022-2023	September 1, 2023 through November 30, 2023	January 1, 2024 until all findings of non-compliance are verified as corrected
Date Span	SY2023-2024	September 1, 2024 through November 30, 2024	January 1, 2025 until all findings of non-compliance are verified as corrected

Targeted monitoring continues until all individual and systemic findings of non-compliance are corrected (please see [OSEP Memo 09-02](#) for details regarding Prong 1 and Prong 2).

Improvement, Correction, Incentives, and Sanctions

[OSEP Memo 09-02](#) establishes that LEAs are required to correct findings of non-compliance as soon as possible, in no case later than one year from the initial finding(s). As needed, the AOE may impose additional corrective actions, sanctions, or enforcement actions on an LEA that did not correct non-compliance within one year from identification, or which demonstrate non-compliance that the AOE determines to be egregious. Enforcement actions include, but are not limited to:

- Mandating technical assistance
- Increased LEA reporting requirements
- Requiring specific applications for IDEA funding
- Delaying payments or withholding partial payments
- Making payments on a reimbursement basis only
- Disallowing costs and/or offsetting or requesting repayment if funds had been advanced
- Conducting or arranging for an independent audit
- Cancellation of the award
- Classifying the grantee as “high-risk” and withholding future awards

Targeted Monitoring: On-Site Visits

As a result of LEA Special Education Determination (LSED) status, monitoring activities, or data obtained through any of the components of Vermont’s [general supervision system](#), the special education monitoring team may determine that an on-site visit is necessary. Such visits are conducted to obtain additional data not acquired through other monitoring activities and involve, at a minimum:

- Prep work to analyze data from file reviews and other data sources
- The on-site visit to obtain additional data through surveys, classroom observations, and family/staff/administration interviews or focus groups
- Analysis of data from the visit
- Development of the final report
- Post-visit meeting with LEA administration to present data and findings

Data collected through observations, interviews, surveys, and file reviews adhere to the AOE’s data privacy policies for protecting personally identifiable information (PII), and are considered confidential whenever possible. Respondents to surveys and interviews during the site visit will not be individually identified in any public reporting. The AOE provides the criteria for interviews and classroom observations, and the LEA coordinates scheduling with involved staff. The parent and staff surveys also offer respondents the opportunity to volunteer for participation in an interview or classroom observation. These interviews and observations are not intended to be evaluative of the employee. Rather, their purpose is to gather data regarding implementation of education activities necessary for students with disabilities to receive FAPE.

On-site visits may be facilitated by monitoring teams comprised of employees from multiple divisions within the Agency of Education, as well as special education administrators from other LEAs. Interview teams, composed of two members (one to record responses and one to ask questions), conduct 30-45-minute interviews with administrators, general education teachers, special educators, paraprofessionals, guidance counselors, and discipline staff. Each

interview consists of predetermined questions, some role-specific, others common to all. Responses are recorded and the interviewee is asked to verify the accuracy of the recorded response prior to exiting the interview.

Classroom observations last approximately 30 minutes and are completed for general education classrooms at all grade levels in each school building, to evaluate inclusive practices for students with disabilities. The LEA will be asked to schedule observations in randomly selected classes in each grade level in each school building. These observations are meant to assess general and special education practices, educational climate and setting, and the quality of individualized instruction for students with an IEP.

Input regarding educational opportunities and supports for students with disabilities is obtained from families, staff, and administrators through an email link to an anonymous online survey. Staff, parents, and community members are offered an option to request an interview with the monitoring team. When appropriate, focus groups or personal interviews may also occur.

All data are analyzed by the special education program monitoring team to produce a final report which is sent to the special education administrator and the superintendent. This final report identifies common themes and trends, findings of non-compliance, and all required improvement activities or sanctions. Findings of non-compliance are to be corrected as soon as possible, no later than one year from the date of written notification listed on the front cover of the report. On-site monitoring reports are included in the LEA's local special education determination and may be publicly posted on the Agency's website.

Continuum of Targeted Monitoring Status

Level of Status	Qualifying Elements	Required Action Item(s)
Level One	<p>First Qualifying Criterion: Findings of non-compliance were not resolved through timely and accurate submissions during selective monitoring</p> <p style="text-align: center;">and</p> <p>LEA does not have long-standing non-compliance as described in OSEP Memo 09-02, i.e., all findings of non-compliance were reported <1 year ago;</p> <p style="text-align: center;">and/or</p> <p>All indicators and/or elements with findings of non-compliance were found to be at a greater than 54.0% of the target for that indicator or element as of the most recent data submission. For example, an indicator with a target of 95% would be $95\% \times .540 = 51.3\%$.</p> <p>or</p> <p>Second Qualifying Criterion: Monitoring activities, administrative complaints, or any other data or information obtained through any of the components of Vermont's general supervision system.</p>	<p>Compliant practices must be demonstrated and reflected in submitted data and reach the target specified in the most recent monitoring report.</p> <p>Data submitted must provide a sufficiently wide date-range so as to demonstrate the correction of individual and systemic instances of non-compliance. This date range will be specified by Monitoring.</p> <p>The LEA will collect data, draft a submission, verify that the submission is timely and accurate, and finalize the submission, within 1 year from the notification of findings.</p>

Level of Status	Qualifying Elements	Required Action Item(s)
Level Two	<p>First Qualifying Criterion: Findings of non-compliance were not resolved through timely and accurate submissions during selective monitoring</p> <p style="text-align: center;">and</p> <p>LEA has long-standing non-compliance as described in OSEP Memo 09-02, i.e., all findings of non-compliance were reported more than 1 year ago (but less than 2 years ago) and remain uncorrected</p> <p style="text-align: center;">or</p> <p>The lowest scoring indicator or element with findings of non-compliance were found to be at or below 54.0% as of the most recent data submission. For example, an indicator with a target of 95% would be $95\% \times .54 = 51.3\%$.</p> <p>or: Second Qualifying Criterion: Monitoring activities, administrative complaint, or any other data or information obtained through any of the components of Vermont's general supervision system.</p>	<p>All items specified in Level 1;</p> <p>and:</p> <p>(1) The LEA must identify the root-cause(s) of non-compliance by conducting a Root-Cause Analysis (RCA) and submit a report detailing the process and findings of these activities to Monitoring.</p> <p>(2) Policies, procedures, and/or practices that contributed to or resulted in non-compliance must be modified to address the root-cause(s) identified in the RCA. A report providing details of these changes must be submitted to Monitoring via the secure file transfer method established for monitoring submissions.</p> <p>(3) The LEA must develop a plan to provide any TA/PD necessary for staff to implement compliant practices. This plan will be reported to Monitoring, however, approval of the plan is not required, as long as the plan provides training and development designed to address all findings of non-compliance in the most recent monitoring report.</p> <p>(4) The LEA is strongly encouraged to utilize TA/PD resources made available by the AOE to support the LEA's efforts in correcting findings of non-compliance.</p> <p>(5) The LEA will produce a formal protocol detailing how non-compliance will be (a) identified, (b) corrected internally within the LEA, and (c) addressed proactively, prior to encountering monitoring activities.</p>

Level of Status	Qualifying Elements	Required Action Item(s)
Level Two (continued)		<p>(6) The LEA must complete and submit to Monitoring a LEA Landscape Protocol from the LEA Data Processes Toolkit.</p> <p>(7) The LEA must complete and submit to Monitoring a LEA IDEA Data Collection Protocol (found within the LEA Data Processes Toolkit) for each indicator and/or element associated with findings of non-compliance, as identified and detailed by Monitoring.</p> <p>The AOE will determine sanctions for egregious and/or ongoing long-standing non-compliance which may include, but are not limited to, any of the sanctions described within the section above titled Improvement, Correction, Incentives and Sanctions.</p>
Level Three	<p>First Qualifying Criteria: Findings of non-compliance were not resolved through timely and accurate submissions during selective monitoring</p> <p style="text-align: center;">and</p> <p style="text-align: center;">LEA has long-standing non-compliance as described in OSEP Memo 09-02, i.e., findings of non-compliance were reported more than 2 years prior and remain uncorrected;</p> <p>or: Second Qualifying Criterion: Is assigned this status as a result of any of the following: monitoring activities, administrative complaint, or any data or information obtained through any of the components of Vermont’s general supervision system.</p>	<p>All items specified in Level 1 and Level 2, excluding (4);</p> <p>and:</p> <p>(8) The LEA will participate in mandatory AOE TA/PD addressing specific indicators and elements with findings of non-compliance. Details regarding these mandatory activities will be provided.</p>

Timeline of Targeted Monitoring Status

The following timeline applies to LEAs who have entered targeted monitoring after findings of non-compliance are identified during cyclic monitoring and are not verified as corrected by the end of selective monitoring. This timeline does not apply to LEAs who have entered targeted monitoring due to the secondary qualifying criteria described above in Level 2 and Level 3; these LEAs are subject to unique timelines based on (a) when they have been notified of targeted monitoring status, (b) the findings of non-compliance unique to their current situation, and (c) longstanding non-compliance, nature of findings, and all other pertinent details.

Level One

Targeted monitoring begins	Timely and accurate data submission is due no later than
January 1	June 1

Level Two

Targeted monitoring begins	Elements (1), (2), and (3) from Level Two column marked Required Actions are due no later than	Elements (5), (6), and (7) from Level Two column marked Required Actions are due no later than	Timely and accurate data submission is due
January 1	February 1	March 1	June 1

Level Three

Targeted monitoring and mandatory participation in prescribed TA/PD activities begins (12)	Elements (1), (2), and (3) from Level Two column marked Required Actions are due no later than	Elements (5), (6), and (7) from Level Two column marked Required Actions are due no later than	Timely and accurate data submission is due
January 1	February 1	March 1	June 1

Data Submission Details

General Submission Guidelines

- All monitoring submissions and reviews are conducted within a secure electronic file sharing system provided by the State of Vermont and AOE.
 - Submissions are not accepted through any other method (e.g., email).
 - Links to documents and information submitted in any other format will be considered non-compliant until corrected and are subject to the deadlines specified.

- We encourage LEAs to ensure they have access to the secure electronic file sharing system no later than two weeks prior to a submission deadline, to ensure sufficient time remains to address any technological obstacles, request a password reset if needed, and/or create or modify any LEA accounts.
- Exceptions to submission deadlines are not available under any circumstances.
 - Submissions made after the deadline will be considered past-due.
 - Past-due submissions may result in a finding of non-compliance for the associated indicator(s) or element(s).
 - Past-due submissions will be considered in calculating the timely and accurate score in the corresponding LEA special education determination (LSED).
- LEAs must download, complete, and resubmit data in the collection sheets provided by the AOE for each item, or upload unique ones.
 - The secure electronic file sharing system provided by the State of Vermont and AOE allows for secure submission of confidential Personally Identifiable Information (PII).
 - All data must not contain any redacted information, including but not limited to student names and PERM numbers.
 - Submissions containing redacted information will be considered incomplete, and may lead to a finding of non-compliance.
 - Incomplete submissions will be considered in calculating the timely and accurate score in the corresponding LSED.
 - We advise LEAs to upload collection sheet(s) only once the files have been determined to be complete, accurate, and ready for submission.
 - The sharing system does not automatically save changes to the files. We recommend downloading the collection sheet/s to a drive of your choice, completing the sheet, and uploading it in the sharing system only once done.
 - Filenames as originally shared by the AOE must be preserved. Additional text may be added to each existing filename. For example, a file named "Indicator 11 Data Collection Sheet.xlsx" may be renamed "**Indicator 11 Data Collection Sheet** 11.22.22.xlsx." The portion in bold must remain as provided by the AOE.
 - LEA users are not able to delete files; any uploads made in error will remain in their respective folder(s), which may cause confusion and additional complication during the review process. If any files were uploaded in error, please add to their title "DELETE".
 - LEAs are not able to revise, edit, or otherwise modify a submission that has been finalized and/or after the submission deadline.
- LEAs submitting documentation will perform the following prior to the submission deadline:
 - Ensure the requirements described in the most recent instructions regarding targeted monitoring are met in full by the documents to be uploaded.
 - Review submissions for data accuracy and completeness prior to submission / upload.

- Ensure that the files are available in the correct folder in the secure file transfer system.
 - The AOE cannot verify on behalf of an LEA if all required files are submitted or if the content of submitted files fulfil the requirements described by the monitoring report, as this would constitute a review of the LEA submission and be subject to an issuance of results of review, with consequent targeted monitoring escalation, if non-compliance were identified.

Indicators and Elements Submitted During Targeted Monitoring

The following subsections describe the most common submissions that may be required during targeted monitoring. Additional information may be required, which will be specified in communication(s) from the AOE.

Indicator 11

Indicator 11 documentation includes:

- All initial evaluations completed between March 1 and May 17.
 - All Forms 4 completed during the period of interest.
 - The target is 100% compliance.
- Indicator 11 Certification, after completion of the training for LEA staff stated on the form.

Annual Date Reviews

Annual Date Reviews documentation includes:

- All annual reviews (not a sample) of IEPs completed between March 1 and May 17.
 - IEPs reviewed annually, defined as 365 days, with no exception for leap years.
 - The target is 95% compliance.
- Annual Reviews Certification, after completion of the training for LEA staff stated on the form.

Triennial Evaluations

Triennial Reviews documentation includes:

- All triennial reviews, not a sample, of IEPs completed between March 1 and May 17.
 - Triennial Evaluations completed every 3 years, defined as 1095 days, with no exception for leap years.
 - The target is 95% compliance.
- Triennial Reviews Certification, after completion of the training for LEA staff stated on the form.

Indicator 13

Indicator 13 documentation includes:

- Each previously submitted plan identified as non-compliant must be corrected and resubmitted.
 - If the student has exited the district’s special education system, then another student’s plan, not previously reviewed by the AOE, must be chosen as a replacement.
- 10 additional post-secondary transition plans of currently enrolled students.
- The target is 100% compliance.
- Indicator 13 Certification, after completion of the training for LEA staff stated on the form.

Policies

Policies documentation includes:

- For LEAs who have adopted the [Vermont Special Education Procedures and Practices Manual](#) published by the AOE as policy, two documents must be submitted:
 - A signed attestation form (Appendix A in the manual)
 - [VTSBA’s Policy D7](#) (or a document with the same content)

For LEAs who have not adopted the Vermont Special Education Procedures and Practices Manual published by the AOE as policy, the following submissions may be required: Discipline Policies, Special Education Policies, and Special Education Evaluation Policies. Submitted policies must, at a minimum, contain content equivalent to the Vermont Special Education Procedures and Practices Manual.

Summaries of Performance (SOPs):

- If non-compliant SOPs are identified, specifics regarding correction of non-compliance are found within the correspondent review spreadsheet, provided alongside the monitoring report.
- The AOE requires the LEA to contact the student/family in order to correct the SOP even if the student has already graduated, as the document can have a lasting effect on a student’s life, career, and education.
- The target is 100% compliance.
- Summaries of Performance Certification, after completion of the training for LEA staff stated on the form.

Final Step: Monitoring Submission Attestation Form

- The attestation form is not to be completed until all required submissions are finalized, and the terms of the attestation have been fulfilled in their entirety.

Exiting Targeted Monitoring

Targeted monitoring status will persist until all findings of non-compliance are verified as corrected. The Monitoring Team will review all submissions for timeliness, accuracy, and compliance with federal and state rules. Following the review, the Monitoring Team will notify the LEA that the findings have been closed-out or that non-compliance persists. In the latter

case, the LEA will be informed of continued targeted monitoring status and relative procedures and actions.

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