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Maine

FFY2010

IDEA PART B
ANNUAL PERFORMANCE REPORT

July 1, 2010 – June 30, 2011

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Part B State Annual Performance Report (APR) for FFY2010

The APR that follows presents the indicator performance in a consistent design that will enable the reader to follow the discussion and quickly determine specific details of the report. The indicators are presented on the OSEP defined template design for the APR for all indicators. In order to highlight key aspects of the report, font selections were used for specific data and passages. The chart below provides a legend for the formats used throughout the document.

Legend

Measurable and Rigorous Target data are presented in each indicator in this style (Arial, 10 pt italic)
Actual performance/compliance data for FFY2009 are presented in each indicator in this font style (Arial, 10 pt)

Statement from the Response Table	State's Response
OSEP's Response Letter and Table, received June 2011, requested a specific response in Maine's February 1, 2012 APR for certain indicators. Responses are presented in side-by-side tabular form for each indicator requiring a response. (Times New Roman, 11 pt)	Maine's response will appear in the typical font used in the body of the report narrative (Arial, 12 pt).

Several indicators update SPP Improvement Activities. Those changes are described in the "**Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010"** section of the indicator narrative and have been edited into the SPP. The APR and the updated SPP will also be posted on the Maine Department of Education website located at URL http://www.maine.gov/education/speced/spp/index.html by February 10, 2012.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development

This Annual Performance Report (APR) is the sixth report of the progress toward the Measureable and Rigorous targets established in the State Performance Plan (SPP) on December 2, 2005. This APR reports improvement in a number of key indicators of the plan resulting from efforts in multiple program and support areas in the State of Maine.

Stakeholder group activities

Maine Advisory Council on the Education of Children with Disabilities (MACECD) is the stakeholder group providing guidance and support to the Maine Department of Education in implementing the State Performance Plan (SPP). Progress on the APR is shared with the full body of this group monthly. As a group of dedicated volunteers with the best interests of children with disabilities age birth through 20 in mind, MACECD started its year with a planning meeting. MACECD began its work on the Annual Performance Report (APR) and the SPP by reviewing the timetable for draft availability. They were asked by the Maine Department of Education to look at the documents with a critical eye and assess what needed to be addressed in order to ensure accurate and adequate service delivery to the students receiving Special Education Services in the State of Maine.

An early task in MACECD's planning meeting was the reseating of four committees to concentrate on specific sub-sets of the indicators for the year: Due Process, Monitoring, and Quality Assurance (B15 through B20, C9 through C14); Early Childhood (C2 through C8, B6 and B12); Student Performance (B1 through B7, B14); and Evaluation, Services and Treatment (C1, C7, B8 through B10). MACECD's monthly agenda includes items for the MACECD membership as well as committee breakout sessions. The committees assess data and make recommendations to the Commissioner of Education on unmet needs from the committees' respective subject areas. The recommendations are addressed and may be integrated into the operation of the Department (program review, dispute resolution, funding, technical assistance, professional development, and discretionary programs) to improve support to special education students statewide.

MACECD provided stakeholder review of and input to the development of targets and to the revision of improvement activities. The updates are defined and justified in this Annual Performance Plan and included in the State Performance Plan update for February 1, 2012 submitted to OSEP and posted on the webpage http://www.maine.gov/education/speced/spp/index.html.

Technical Assistance

Maine participated in the Targeting Indicator Improvement (TII) process facilitated by the Northeast Regional Resource Center (NERRC) during the summer of FFY2010 (2010 – 2011). This intensive two-day structured process helped the State team members identify underlying performance drivers and barriers to improvement for this

indicator. As a result of the TII process, specific, prioritized action steps informed by indicator data and contributing factors were created to address the barriers to improved performance. Maine will continue to report on progress checkpoints created through the TII process against action steps in future Annual Performance Reports.

During FFY2005, The Maine Department of Education (MDOE) developed an informative presentation that was delivered in regional meetings throughout the State to inform the LEA of the requirements of the law and reporting. The LEAs received detailed information on the SPP, the indicators and their intent, and an early glimpse of the expected consequences of poor performance or non-compliance. In FFY2006 the Department conducted a continuing series of informational and technical assistance meetings where the data for the first year of public reporting were shared using an indicator-by-indicator description of the performance measurements and the compliance requirements. These meetings provided an opportunity for LEAs to review their LEA specific data in a forum where data experts could respond to questions and encourage improvement planning. The data presented and discussed included the initial LEA determinations, a description of levels of determination, and the time-phased interventions and sanctions provided in IDEA law and regulation. During FFY2007, the technical assistance became more intense and directed at specific LEAs demonstrating determination levels of Needs Assistance and Needs Intervention (no LEA was determined Needs Substantial Intervention). LEAs with the lowest determination levels were asked to contact the Maine Department of Education and RMC Research for additional support and technical assistance. Each LEA was provided with a self-assessment protocol and guidance to prepare an improvement plan addressing the determinations in their first year profile. Several LEAs completed the initial self-assessment. In FFY2008, the intensity increased further with the evolution of Continuous Improvement Monitoring Process (CIMP). In FFY2009, CIMP elements were integrated into our application for local entitlement funds so that LEAs would consider appropriate use of funds as they responded to data and program changes in their improvement plans. In FFY2010, the CIMP process evolved to integrate improvement and response to LEA determinations with the program review responses to increase focus on compliance and correction of non-compliance.

Improvement and Corrective Action

The Maine Department of Education Office of Special Services implements a birth to twenty (B-20) General Supervision System Team (GSST) to oversee all aspects of performance improvement, compliance monitoring, and correction of non-compliance. Evaluations and interventions focus on improving infant, toddler and school-age student outcomes. The process is designed to enhance partnerships among the MDOE Office of Special Services, Child Development Services (CDS) sites, LEAs, other educational and community agencies, service providers, and parents in implementing Part C and Part B of the Individuals with Disabilities Education Act (IDEA). These partnerships focus on early intervention and special education services and systems that directly impact results for children, and on the development and implementation of improvement strategies to address identified needs.

GSST coordinates improvement using an LEA-driven process founded on evidence-based decision-making and aligns with IDEA State Performance Plan (SPP) compliance and performance indicators. This alignment supports a close relationship between special education improvement planning and other LEA or community improvement planning efforts.

Training and Plan Development

Maine Department of Education developed and presented webinar training for LEA teams on the improvement planning process. LEA teams completed assignments for each section of the self-assessment thereby demonstrating their ability to translate the data findings in their LEA Profile to action steps in their Improvement/Corrective Action Plan. All parts of the training, the forms used, and the supporting materials were made available on the website http://www.state.me.us/education/speced/spp/spp_ta.html#all_indicators for LEA teams to use. The data analyses were then used to produce detailed improvement plans and corrective actions where performance or compliance data indicated. Department personnel and contactors reviewed all proposals to ensure alignment with data, adoption of evidenced-based strategies to accomplish needed improvements, and verification procedures for timely corrective actions.

The process of improvement in the state is evolving. At the time of the origination of the SPP, LEAs understood very little of the requirements of the IDEA reauthorization of 2004. All data profiles, each revision of the SPP and APR, and all technical assistance documentation are posted on web pages on the Maine Department of Education website (Beginning at: http://www.state.me.us/education/speced/spp/index.html).

Determination Levels of LEAs

All LEAs receive and review on a yearly basis a letter with their determination status, the rubric "Local Determination Levels Assistance and Enforcement", and the LEA profile. Data profile designs based on the school year 2009-2010 performance and compliance data were developed for each Local Educational Agency (LEA), including CDS sites and School Administrative Units, in the state. The profiles provide indicator-specific performance and compliance data to the LEA and to the public for use in program improvement. The LEA profiles are used as the basis for determinations of LEA program performance. Each indicator is evaluated for level of determination to provide the LEA with measurement-specific feedback on their implementation of IDEA with regard to the SPP indicators. The individual determinations are then used to develop an overall determination with respect to the requirements of the State Performance Plan (SPP) in one of the four required categories: Meets Requirements; Needs Assistance; Needs Intervention; or Needs Substantial Intervention. These determinations set the level of support and intervention provided and defined areas of require action and follow-up. Data profiles for Part B 619 were made public and posted on the CDS website: (http://www.maine.gov/education/speced/cds/monitoring/documents/FFY2008Determinations.pdf). Data profiles for school-aged students are posted on the SPP website:(http://www.maine.gov/education/speced/spp/profiles.html)

Alignment with National Technical Assistance Resources
Maine contracts with technical assistance, professional development and dissemination resources throughout the state to provide scientifically based materials and instruction to educators, parents and interested parties. Contracts developed beginning with the 2008-2009 school year include an objective requiring the contractor to serve as a liaison between the Department and national technical assistance centers that provide scientifically researched based resources that can be useful for Local Education Agencies (LEAs).

Additionally, CDS has requested assistance in the areas of least restrictive environment (LRE) for children three to five, natural environment for birth to two, eligibility timelines, unmet needs, Expanding Inclusive Opportunities, child outcomes (COSF), C to B and preschool to kindergarten transition, General Supervision System, APR assistance, and data analysis from the Northeast Regional Resource Center (NERRC), NECTAC, OSEP, Early Childhood Outcomes (ECO) Center, ITCA, and WESTAT. CDS State IEU personnel participate in OSEP, NECTAC, and NERRC teleconferences as frequently as possible. CDS applied for and was chosen by ECO to be part of the framework partnership work that was completed during FFY2010. In addition to the framework, Maine is taking part in the ENHANCE research project to study the quality of information being produced through the COSF process. Three regional sites are working with SRI International to complete this work.

Data System
Maine contracted with Infinite Campus to provide a statewide student data management system enhancement to the Maine Education Data Management System (MEDMS). Features and capabilities have significantly improved data reporting ease while providing increased performance, data backups, and integral data validations. This reporting year, data were provided from the enhanced MEDMS for the 2009-2010 school year. The data are valid and reliable and a number of external and internal validations and confirmations ensure complete and correct data entry. The Infinite Campus implementation of MEDMS provides a modern database system and industry standard forms designed to greatly simplify adapting the system to collect needed data. Reports of child count, discipline, assessment performance, personnel, exits, and student demographic information are all compiled from a single data source in the MEDMS Infinite Campus implementation. Additionally, the Infinite Campus implementation is integrated with Maine's Longitudinal Data Grant (CFDA 84.372A) to ensure compatibility of the data system with the state's future requirements and historical data stores.

Consolidation
Maine has substantially completed its LEA consolidation efforts across the state. During the 2006-2007 school year, LEAs across the state began conversations about developing partnerships with nearby school administrative units and regionalizing to achieve savings without adversely affecting students in the classroom, as required in legislation. These alignments and conversations have been guided in part by the data

developed through the SPP process and the communities involved in consolidation activities have addressed educational and financial opportunities to improve services to all children. An expectation of the consolidation process was that LEAs would become larger as communities combine resources and identify with one another. This has helped compensate for Maine's declining enrollment by building larger service areas for the students educated in the newly defined regions, but it also changed the data associated with those students in a way that will compromise comparison of LEA percentages during the transition period.

School Administrative Unit (SAU), Local Educational Agency (LEA), and District
Maine Statute, 20-A MRSA Section 1(25) and (26) define school administrative district and school administrative unit. Throughout this APR, the terms SAU, LEA and district will be used interchangeably.

25. School administrative district. "School administrative district" means a state-approved unit of school administration, composed of one or more municipalities which must provide public education to all public school students in the district.
[1981, c. 693, §§5, 8 (NEW) .]

26. School administrative unit. "School administrative unit" means the state-approved unit of school administration and includes a municipal school unit, school administrative district, community school district, regional school unit or any other municipal or quasi-municipal corporation responsible for operating or constructing public schools, except that it does not include a career and technical education region. Beginning July 1, 2009, "school administrative unit" means the state-approved unit of school administration and includes only the following:

A. A municipal school unit; [2007, c. 668, §1 (NEW).]
B. A regional school unit formed pursuant to chapter 103-A; [2007, c. 668, §1 (NEW).]
C. An alternative organizational structure as approved by the commissioner and approved by the voters; [2009, c. 580, §1 (AMD).]
D. A school administrative district that does not provide public education for the entire span of kindergarten to grade 12 that has not reorganized as a regional school unit pursuant to chapter 103-A; [2007, c. 668, §1 (NEW).]
E. A community school district that has not reorganized as a regional school unit pursuant to chapter 103-A; [2007, c. 668, §1 (NEW).]
F. A municipal or quasi-municipal district responsible for operating public schools that has not reorganized as a regional school unit pursuant to chapter 103-A; [2011, c. 414, §2 (AMD).]
G. A municipal school unit, school administrative district, community school district, regional school unit or any other quasi-municipal district responsible for operating public schools that forms a part of an alternative organizational structure approved by the commissioner; and [2011, c. 414, §3 (AMD).]
H. A public charter school authorized under chapter 112 by an entity other than a local school board. [2011, c. 414, §4 (NEW).]
[2011, c. 414, §§2-4 (AMD) .]

Summary

The next page displays a brief summary of indicator performance to Maine's State Performance Plan. The chart compares data presented in the FFY2009 Annual Performance Report, the targets for FFY2010, and indicator performance for FFY2010.

Federal Fiscal Year 2010 Part B Annual Performance Report

Summary of Progress toward Maine's State Performance Plan

SPP Indicator	FFY2009 Performance	FFY2010 Target	FFY2010 Performance
1. Graduation Rate	65%	*86%*	**65.1%**
2. Dropout Rate	5.5%	*2.0%*	**5.5%**
3. Assessment	AYP Reading / AYP Math: 95% Participation Reading: 97% Participation Math: 97% Proficiency Reading: 3rd – 8th 31%; HS 15% Proficiency Math: 3rd – 8th 29%; HS 13%	AYP Reading / AYP Math: *98%* Participation Reading: *98%* Participation Math: *98%* Proficiency Reading: 3rd – 8th *75%*; HS *70%* Proficiency Math: 3rd – 8th *78%*; HS *66%*	AYP Reading / AYP Math: **56%** Participation Reading: **97%** Participation Math: **97%** Proficiency Reading: 3rd – 8th **31%**; HS **17%** Proficiency Math: 3rd – 8th **28%**; HS **15%**
4. Discipline	0.07%	*1.55%*	**0.63%**
5. LRE (6-21)	Regular Class 56% Self-Contained 10.6% Separate 3.2%	Regular Class *65%* Self-Contained *9%* Separate *3.1%*	Regular Class **55%** Self-Contained **10.8%** Separate **3.3%**
6. LRE (3-5)	Not Reported		Not Reported
7. Developmental Outcomes (children age 3-5)	A / B / C 1: 60.9% / 59.9% / 63.5% 2: 37% / 31.3% / 53%	A / B / C 1: *64%* / *67%* / *59%* 2: *38%* / *36%* / *52%*	A / B / C 1: **54%** / **61%** / **54%** 2: **36%** / **33%** / **48%**
8. Parent Involvement	91%	*91%*	**90%**
9. Disproportionality in Special Education	0%	*0%*	**0%**
10. Disproportionality in Disability	0%	*0%*	**0%**
11. Timeliness	84.9%	*100%*	**88.2%**
12. Transition, age 3	91.7%	*100%*	**92.9%**
13. Transition, age 16	88%	*100%*	**47%**
14. Post-school outcomes	35%* / 92%* / 92%*	*25.0%* / *76.6%* / *82.3%*	**25.0%** / **76.6%** / **82.3%**
15. Compliance Monitoring	42.4%	*100%*	**71.2%**
16. Complaints	100%	*100%*	**100%**
17. Hearings	n/a	*100%*	**100%**
18. Resolution Sessions	25%	*58%*	**20%**
19. Mediations	77%	*85%*	**73%**
20. Reporting	98.8%	*100%*	**90%**

* Data reported in FFY2009 for indicator 14 did not provide the required measurement; a new baseline and targets were established for FFY2010.

Section 616(b)(2)(C)(ii)(I) of IDEA requires each State to report annually to the public on the performance of each local educational agency (LEA) located in the State on the targets in the State's performance plan. The following table is posted online with the APR and serves as public reporting and includes the target and performance of each LEA program for Indicators B7, B8, B11 and B12 in FFY 2010 for children aged 3-5:

CDS Regional Sites	**B7a Target SS1 & SS2:**		**B7b Target SS1 & SS2:**		**B7c Target SS1 & SS2:**		**B8 Target**	**B11 Target**	**B12 Target**
	64%	**38%**	**67%**	**36%**	**59%**	**52%**	**91%**	**100%**	**100%**
Aroostook County	26%	26%	45%	24%	40%	28%	NA	63%	100%
CDS Reach	59%	37%	70%	37%	69%	59%	NA	73%	94%
CDS First Step	52%	44%	59%	30%	60%	61%	96%	61%	84%
Two Rivers	67%	54%	72%	53%	54%	61%	NA	76%	100%
Mid-coast Regional CDS	60%	29%	53%	22%	45%	34%	89%	79%	102%
Opportunities	39%	26%	58%	27%	52%	40%	NA	47%	103%
Project PEDS	44%	27%	62%	12%	48%	31%	89%	78%	90%
Child Development Services Downeast	51%	37%	63%	45%	51%	51%	97%	77%	93%
York County	67%	11%	61%	6%	43%	22%	89%	60%	84%
State Totals	**54%**	**36%**	**61%**	**33%**	**54%**	**48%**	**90%**	**68%**	**93%**

NA = data not available. As part of the General Supervision System (GSST) processes for the five regional sites monitored in FFY 2010, all families of children receiving services through those regional sites (Part C and 619) received a parent survey.

Public Reporting for FFY 2010:

Data for indicators B-7, B-8, B-11, and B-12 for CDS regional sites are located on the website in the document:
http://www.maine.gov/education/speced/spp/performance_profiles/cds/public10.pdf

Data for indicators B-1, B-2, B-4, and B-5 for the year 2008-2009 and later are located in the Education Data Warehouse at the link:
http://dw.education.maine.gov/DirectoryManager/Web/Maine_report/MaineLanding.aspx

Indicator B-3 data are located on the Maine Assessment websites at:
Grades 3 through 8 - http://www.maine.gov/education/mea/school_reports.htm
High School - http://www.maine.gov/education/mhsa/school_reports.htm

Data the program review related indicators (B-8, B-14) are provided to the districts during their program review interval. The data will be posted by May 1, 2012 on the website: http://www.maine.gov/education/speced/spp/surveys.html

Data on compliance indicators (B-19, B-10, B-11, B-13, B-15, and B-20) is provided to each district using a data profiles that also is the basis of their annual determination. Those profiles will be posted by May 1, 2012 on the website:
http://www.maine.gov/education/speced/spp/profiles.html

Part B State Annual Performance Report (APR) for FFY2010

Monitoring Priority: FAPE in the LRE

Indicator 1: Percent of youth with IEPs graduating from high school with a regular diploma.

Measurement:

Data and calculations of graduation rate calculation for students with disabilities is the same data and calculation as used for reporting to the Department under Title I of the Elementary and Secondary Education Act (ESEA).

The definition of high school graduation rate is to compare the number of students that entered ninth grade with the number that receive a regular high school diploma in accordance with Maine Regulation 05-071 Code of Maine Rules Chapter 127 by the end of the fourth year after entering ninth grade for the first time. For students with an IEP, or LEP students with a Personal Learning Plan that extends the time to earn a high school diploma, up to six years can be allowed and will be also counted separately. Extending the timeframe for completion allows this federal accountability criterion to align with Maine's established accountability system.

Maine determines the graduation rate as follows:

$$\left(\frac{\text{On-time graduates by year } x}{[(\text{first time 9}^{th}\text{ graders in year } x\text{-4}) + (\text{Transfers-In}) - (\text{Transfers-Out})]} \right) x\ 100$$

This rate includes "Other Completers" as well as regular graduates in the denominator

Graduation Rate for 2010:

Total On-time Graduates 2009/10	Total First Time 9th graders in 2006/07	Total Transfers-in	Total Transfers-out	Graduation Rate
1600	**2561**	**1055**	**1157**	**65.1%**

Percent = [1600/(2561+1055-1157)]*100 = 65.1

Actual Target Data for FFY2010:

FFY2009 Performance	FFY2010 Target	FFY2010 Performance
65%	*86%*	**65.1%**

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

Graduation rate for FFY2010 remained essentially the same as was reported in FFY2009. The FFY2010 rate did not meet target.

Calculations and data for the 2010 graduates are the same as those used for reporting under Title I of the Elementary and Secondary Education Act (ESEA). Starting in 2008-09, Maine moved to the new federally-required method for calculating the graduation rate known as the Adjusted Cohort Graduation Rate, or ACGR, which shows the percentage of students who entered 9th grade and graduated within four years. The purpose of the federal requirement is to use the same method across states and to provide more consistency in reporting and comparisons across states. While this method is valuable for comparing schools and is an important piece of data, it does not tell a complete story. In particular, it does not reflect the students who graduate from high school in five or six years. It also does not include students who earn a GED.

For the graduation rate for the class of 2010, Maine compared the number of students who entered ninth grade for the first time four years earlier in the fall of 2006 and received a “regular” diploma in 2010. For this calculation the denominator contains the cohort of all first time ninth graders from four years earlier plus all transfers into this cohort minus all transfers out (e.g., death, moving to another Maine school). The numerator contains only “regular” diploma recipients from the four year cohort.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Changes were made to the SPP to update the measurement language to reflect the current requirements in the measurement table released with OSEP memo 12-4.

Part B State Annual Performance Report (APR) for FFY2010

Monitoring Priority: FAPE in the LRE

Indicator 2: Percent of youth with IEPs dropping out of high school.

Measurement:

Data and calculations of the graduation rate calculation for students with disabilities are the same data and calculation as used for reporting to the Department under Title I of the Elementary and Secondary Education Act (ESEA).

The number students with IEPs dropping out of high school divided by the number of students with IEPs enrolled in high school.

Percent = [(# students with IEPs recorded as dropouts) ÷ (# students with IEPs secondary enrollment)] times 100

Percent = [(601/10881)]*100 = 5.5

The same data are used for reporting to the Department under Title I of the Elementary and Secondary Education Act (ESEA).

Actual Target Data for FFY2010:

FFY2009 Performance	FFY2010 Target	FFY2010 Performance
5.5%	*2.0%*	**5.5%**

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

Dropout rate for FFY2010 remained the same as was reported in FFY2009. The FFY2010 rate did not meet target.

The data presented for FFY2010 are complete and accurate; the data include dropouts and enrollment from all 133 public high schools in the state. Dropouts numbered 601among 10,881 secondary students, for a dropout rate of 5.52% using the calculation methods presented in the measurement description above and in the SPP. Actual performance for dropout rate data does not meet the target established for FFY2010.

Alignment with the ESEA reporting method required a minor change in the calculation of dropout rate. The original SPP measurement was calculated using secondary enrollment determined by age because the data system was incapable of disaggregating special education students by attending grade. The Maine Education Data Management System (MEDMS) now has the disaggregation capability for the special education subgroup, so the population is determined by grade.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Changes were made to the SPP to update the indicator and measurement language to reflect the current requirements in the measurement table released with OSEP memo 12-4.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: FAPE in the LRE

Indicator 3: Participation and performance of children with IEPs on statewide assessments:

A. Percent of the districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP targets for the disability subgroup.
B. Participation rate for children with IEPs.
C. Proficiency rate for children with IEPs against grade level, modified and alternate academic achievement standards.

Measurement:

A. AYP percent = [(# of districts with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP targets for the disability subgroup) divided by the (total # of districts that have a disability subgroup that meets the State's minimum "n" size)] times 100.

AYP percent **= [(95) / (170)] * 100 = 56**

B. Participation rate percent = [(# of children with IEPs participating in the assessment) divided by the (total # of children with IEPs enrolled during the testing window, calculated separately for reading and math)]. The participation rate is based on all children with IEPs, including both children with IEPs enrolled for a full academic year and those not enrolled for a full academic year.

Math **= [15721/16282] * 100 = 97**

Reading **= [15757/16284] * 100 = 97**

Note: Included in the number of children with IEPs, but not in the participating students, are those students absent on the dates of administration.

C. Proficiency rate percent = ([(# of children with IEPs enrolled for a full academic year scoring at or above proficient) divided by the (total # of children with IEPs enrolled for a full academic year, calculated separately for reading and math)].

Subject	Grades 3 through 8	High School	All IEP students
Math	**(3871/13900)*100 = 28**	**(271/1821)100 = 15**	**(4142/15721)*100 = 26**
Reading	**(4367)/(13936)*100 = 31**	**(315/1821)*100 = 17**	**(4682/15757)*100 =30**

Actual Target Data for FFY2010:

FFY2009 Performance		FFY2010 Target		FFY2010 Performance	
AYP Reading / AYP Math	95%	AYP Reading / AYP Math	*98%*	AYP Reading / AYP Math	**56%**
Participation Reading		Participation Reading		Participation Reading	
97%		*98%*		**97%**	
Participation Math		Participation Math		Participation Math	
97%		*98%*		**97%**	
Proficiency Reading		Proficiency Reading		Proficiency Reading	
3rd – 8th 31%	HS 15%	3rd – 8th *75%*	HS *70%*	3rd – 8th **31%**	HS **17%**
Proficiency Math		Proficiency Math		Proficiency Math	
3rd – 8th 29%	HS 13%	3rd – 8th *78%*	HS *66%*	3rd – 8th **28%**	HS **15%**

Public reports of assessment results are located at the following websites:

Grades 3 through 8 - **http://www.maine.gov/education/mea/school_reports.htm**
High School - **http://www.maine.gov/education/mhsa/school_reports.htm**

Documentation, descriptions, and data on all aspects of Maine's Comprehensive Assessment System are available at http://www.maine.gov/education/lsalt/index.htm

Actual Target Data for FFY2010 (discussion and disaggregated data):

A. Percent of the LEAs with a disability subgroup that meets the State's minimum "n" size that meet the State's AYP targets for the disability subgroup.

Adequate Yearly Progress (AYP) is calculated annually for all schools (not districts) with student populations larger than 41. Determination of AYP of districts with a disability subgroup that meets the state's minimum "n" size that meet the state's AYP targets for the disability subgroup is accomplished by verifying that ALL eligible schools in the district meet AYP for BOTH reading and math performance for students with disabilities. In order to meet the AYP target for the subgroup, the district must have met ESEA benchmarks in BOTH reading and math in elementary, middle and high schools in the district. Targets and target data are therefore to be reported overall (reading and math), not separately for reading and math. The SPP targets have been adjusted to meet these requirements. Performance did not meet the target in FFY2010.

Year	Total Number of districts	Number of districts Meeting the "n" size	Number of districts that meet the minimum "n" size and met AYP for FFY2009	Percent of districts
FFY2010 (2010-2011)	**185**	**170**	**95**	**56%**

Note: Consolidation of school districts has produced fewer districts overall while increasing the number of those districts meeting the minimum "n" of 41 students.

B. Participation rate for children with IEPs.

The participation rate for children with IEPs in the math assessment did not meet the target. The participation rate for children with IEPs in the reading assessment did not meet the target.

C. Proficiency rate for children with IEPs against grade level, modified and alternate academic achievement standards.

The math proficiency rate for children with IEPs is below the target. In FFY2009 overall math proficiency was 27% compared with 26% this year, so the math proficiency rate slipped overall. Rates for grades 3-8 slipped while those for high school improved from last year. The reading proficiency rate for children with IEPs is below the target. In FFY2009 overall reading proficiency was 29% compared with 30% this year, so the reading proficiency rate improved overall. Rates for grades 3-8 remained the same while those for high school improved from last year.

Discussion of Data:

Data presented for participation and performance in this indicator are the same as formerly reported in the 618 data table 6, submitted this year via EDFacts (file specifications N003, N004, N081, N093, and N146). These data are validated during the initial reporting stages of the AYP process: counts of students are checked against the reported attending population on the tested date and confirmed by the Superintendent of the district; and scores are confirmed by Measured Progress using data validation rules contracted with the Maine Department of Education.

Maine has joined New Hampshire, Rhode Island and Vermont in the yearly development and administration of the New England Common Assessment Program (NECAP). This assessment is used by participating states to meet No Child Left Behind Act requirements for testing reading and math once each year from grade 3 through grade 8. The states also include a writing assessment administered at grades 5 and 8. The first NECAP administration in Maine began in October 2009. NECAP assesses the learning of NECAP Grade Level Expectations (GLEs), which are located at the NECAP Standards webpage (http://www.maine.gov/education/necap/index.html). NECAP is designed to assess learning from the prior year (teaching year) at the beginning of the next school year (testing year). Therefore, grades 2-7 reading and math are assessed at the beginning of grades 3-8. Maine's personalized alternate assessment program (PAAP) is now provided for students in grades 2-7 to align with this testing schedule.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY2010:

Title IA works directly with school staff to review the participation and performance rates of all students, which includes students with IEPs. For schools experiencing challenges with participation rates, Title IA reviews current practices, provides technical assistance related to best practices, and works with the CIPS schools to create a plan for success. In order to help schools improve math and reading performance, Title IA starts by teaching staff how to conduct a review of annual assessment data, looking at gap analysis and trends. Title IA then assists the school in conducting a needs assessment and exploring root causes for poor performance.

Improvement activities implemented this year were aligned with public dissemination of data and determination of the status of districts based on the FFY2008 performance and compliance results. The FFY2008 statewide assessment data were disaggregated to the district level and presented as a part of the district performance profiles made public so that districts, parents and other interested parties could review district performance and take appropriate actions. Assessment data were not included in the determination structure because to do so created a redundancy with Adequate Yearly Progress assignments made by NCLB. However, the data were included in the profiles and are included in the improvement plan templates provided with technical assistance support.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Changes were made to the SPP to update the indicator and measurement language to reflect the current requirements in the measurement table released with OSEP memo 12-4. Additionally, the term “LEA” was changed to “district” to reflect the change in the measurement language and the AYP description was rewritten to describe the current practices and grades tested.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: FAPE in the LRE

Indicator 4: Rates of suspension and expulsion:

A. Percent of districts that have a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days in a school year for children with IEPs

B. 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 for children with IEPs; and (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.

Measurement:

A. Percent = [(# of districts that have a significant discrepancy in the rates of suspensions and expulsions for greater than 10 days in a school year of children with IEPs) divided by the (# of districts in the State)] times 100 **= [(0)/(150)]*100 = 0**

Maine also measures the rate of suspension an expulsion using a simple rate formula (data from Table 5, section 3A):

Percent = [(number of students with disabilities suspended or expelled for more than 10 days) divided by the (number of students with disabilities)] times 100 **= [(19)/(30162)]*100 = 0.063**

State's definition of significant discrepancy for indicator 4A:

The following decision rules were used to determine if there was a significant discrepancy in the rates of suspensions/expulsions of children with disabilities:

- The district has to have a minimum of 10 students;
- The number of students suspended or expelled has to be greater than 1 student;
- For districts meeting the conditions above, a district has a significant discrepancy when its suspension/expulsion rate for students with disabilities is more than 3 standard deviations above the state's suspension/expulsion rate for all students with disabilities.

B. Percent = [(# of districts that have: (a) a significant discrepancy, by race or ethnicity, in the rates of suspensions and expulsions of greater than 10 days in a school year of children with IEPs; and (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) divided by the (# of districts in the State)] times 100. **= [(0)/(150)]*100 = 0**

State's definition of significant discrepancy for Indicator 4B:

The following decision rules were used to determine if there was a significant discrepancy in the rates of suspensions/expulsions of children with disabilities by race of ethnicity:

- The district has to have a minimum of 10 students of any race/ethnicity;
- The number of students suspended or expelled has to be greater than 1 student with an IEP of any race/ethnicity;

- For districts meeting the conditions above, a district has a significant discrepancy when its suspension/expulsion rate for students with disabilities of any race or ethnicity is more than 3 standard deviations above the state's suspension/expulsion rate for **all students** with disabilities.

Actual Target Data for FFY2010:

Indicator 4 subpart	FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
A	The number of districts with significant discrepancies = **0** Rate of suspensions and expulsions for greater than 10 days = 0.07%	*The number of districts with significant discrepancies = **0*** *Rate of suspensions and expulsions for greater than 10 days = 1.55%*	**The number of districts with significant discrepancies = 0** **Rate of suspensions and expulsions for greater than 10 days = 0.063%**
B	The number of districts with significant discrepancies = **0**	*The number of districts with significant discrepancies by = **0***	**The number of districts with significant discrepancies = 0**

Additional Information required by the June 20, 2011 OSEP APR Response Table for this indicator:

Statement from the Response Table	State's Response
The State did not provide valid and reliable data because OSEP cannot determine the method the State used to determine if significant discrepancies, by race or ethnicity, are occurring in the rate of suspensions and expulsions of greater than ten days in a school year for children with IEPs. The State must clarify its definition of "significant discrepancy" and provide the required data for FFY2010 (using 2009-2010 data) in the FFY2010 APR, due February 1, 2012. OSEP will be carefully reviewing each State's methodology for identifying "significant discrepancy" and will contact the State if there are questions or concerns.	**The definition for significant discrepancies was revised to clarify how discrepancies by race or ethnicity are determined. The revisions were made in the language of the measurement description above and in the measurement description and narrative of the State Performance Plan.**

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

Evaluation of data for Indicator 4A: Data from 2009-2010 report of children with disabilities subject to disciplinary removal were examined to determine if significant discrepancies were occurring in the rates of long-term (>10 days) suspensions and

expulsions. At that point in time, the districts in the state were configured as 155 entities. Each district was evaluated against the three criteria for significant discrepancies. No district was excluded from the analysis, but only 11 districts had more than one student suspended or expelled for more than 10 days. None of the districts exhibited a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days.

Evaluation of data for Indicator 4B: Data were further disaggregated by race and ethnicity. Each district was evaluated against the three criteria for significant discrepancies. No district was excluded from the analysis, but only 11 districts had more than one student suspended or expelled for more than 10 days. None of the districts exhibited a significant discrepancy in the rate of suspensions and expulsions of greater than 10 days by race or ethnicity.

Performance met the targets for this indicator. No district exceeded the limit for significant discrepancy for rates of suspension/expulsion overall, or by ethnicity. The rate of suspension/expulsion of students with disability continues to be below the target.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

The definition for significant discrepancies was revised to clarify how discrepancies by race or ethnicity are determined. Changes were made to the SPP to update the indicator and measurement language to reflect the current requirements in the measurement table released with OSEP memo 12-4. Additionally, the term “LEA” was changed to “district” to reflect the change in the measurement language.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: FAPE in the LRE

Indicator 5: Percent of children with IEPs aged 6 through 21 served:

A. Inside the regular class 80% or more of the day;
B. Inside the regular class less than 40% of the day; and
C. In separate schools, residential facilities, or homebound/hospital placements.

Measurement:

A. Percent = [(# of children with IEPs served inside the regular class 80% or more of the day) divided by the (total # of students aged 6 through 21 with IEPs)] times 100 **= [(15780)/(28437)]*100 = 55.5**

B. Percent = [(# of children with IEPs served inside the regular class less than 40% of the day) divided by the (total # of students aged 6 through 21 with IEPs)] times 100 **= [(3074)/(28437)]*100 = 10.8**

C. Percent = [(# of children with IEPs served in separate schools, residential facilities, or homebound/hospital placements) divided by the (total # of students aged 6 through 21 with IEPs)] times 100 **= [(745+138+50)/(28437)]*100 = 3.3**

Data used in the calculations above were submitted in the February 2011 child count data in 618 data Table 3 (EDFacts Files N002, 089) for children ages 6 through 20 Maine does not serve children beyond the age of 20.

Actual Target Data for FFY2010:

	FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
A	56%	*65%*	**55%**
B	10.6%	*9%*	**10.8%**
C	3.2%	*3.1%*	**3.3%**

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY2010:

The percentage of children served in the regular classroom, the percentage of students served in self-contained placements, and the percentage of children served in public or private separate schools, residential placements, or homebound or hospital placements did not meet targets.

Local Entitlement Applications for 2010 included data for each LEA to consider regarding classroom placement. Those LEAs significantly below target values for multiple years evaluated their programs and requested funds based in part on the data. Maine contracts with technical assistance, professional development and dissemination resources throughout the state to provide scientifically based materials and instruction to educators, parents and interested parties. Training and technical assistance provide clear and appropriate guidance about inclusion and supports for children with disabilities aligned with the intent to provide the least restrictive environment to meet students' educational needs.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Changes were made to the SPP to update the indicator and measurement language to reflect the current requirements in the measurement table released with OSEP memo 12-4.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Reporting of indicator 6 is not required for FFY2009.

Monitoring Priority: FAPE in the LRE

Indicator 6: Percent of children aged 3 through 5 with IEPs attending a:

A. Regular early childhood program and receiving the majority of special education and related services in the regular early childhood program; and
B. Separate special education class, separate school or residential facility

Measurement:

A. Percent = [(# of children aged 3 through 5 with IEPs attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program) divided by the (total # of children aged 3 through 5 with IEPs)] times 100.

B. Percent = [(# of children aged 3 through 5 with IEPs attending a separate special education class, separate school or residential facility) divided by the (total # of children aged 3 through 5 with IEPs)] times 100.

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
Not Reported	*No Target*	**Not Reported**

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

The state is not required to report on this indicator in the FFY2010 APR due February 1, 2012.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Changes were made to the SPP to update the indicator and measurement language to reflect the current requirements in the measurement table released with OSEP memo 12-4. The narrative and targets were revised to show that this indicator has not been reported to date and is not reported this reporting year.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: FAPE in the LRE

Indicator 7: Percent of preschool children aged 3 through 5 with IEPs who demonstrate improved:
A. Positive social-emotional skills (including social relationships);
B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and
C. Use of appropriate behaviors to meet their needs.

Measurement:

Outcomes:

A. Positive social-emotional skills (including social relationships);

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy); and

C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

a. Percent of preschool children who did not improve functioning = [(# of preschool children who did not improve functioning) divided by (# of preschool children with IEPs assessed)] times 100.

b. Percent of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of preschool children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

c. Percent of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of preschool children who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of preschool children with IEPs assessed)] times 100.

d. Percent of preschool children who improved functioning to reach a level comparable to same-aged peers = [(# of preschool children who improved functioning to reach a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

e. Percent of preschool children who maintained functioning at a level comparable to same-aged peers = [(# of preschool children who maintained functioning at a level comparable to same-aged peers) divided by (# of preschool children with IEPs assessed)] times 100.

Summary Statements for Each of the Three Outcomes (use for FFY2009-2009 reporting):

Summary Statement 1: Of those preschool children who entered the preschool program below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 1: Percent = # of preschool children reported in progress category (c) plus # of preschool children reported in category (d) divided by [# of preschool children reported in progress category (a) plus # of preschool children reported in progress category (b) plus # of preschool children reported in progress category (c) plus # of preschool children reported in progress category (d)] times 100

Outcome A **= [(269+205)/(39+362+269+205)]*100 = 54.2**

Outcome B **= [(345+219)/(32+324+345+219)]*100 = 61.3**

Outcome C **= [(201+195)/(40+299+201+195)]*100 = 53.9**

Summary Statement 2: The percent of preschool children who were functioning within age expectations in each Outcome by the time they turned 6 years of age or exited the program.

Measurement for Summary Statement 2: Percent = # of preschool children reported in progress category (d) plus [# of preschool children reported in progress category (e) divided by the total # of preschool children reported in progress categories (a) + (b) + (c) + (d) + (e)] times 100

Outcome A **= [(205+166)/(39+362+269+205+166)]*100 = 35.6**

Outcome B **= [(219+123)/(32+324+345+219+123)]*100 = 32.8**

Outcome C **= [(195+305)/(40+299+201+195+305)]*100 = 48.1**

Target Data and Actual Target Data for FFY2010:

Summary Statements	Actual FFY2009 (% and # children)	Actual FFY2010 (% and # children)	*Target FFY2010 (% of children)*
Outcome A: Positive social-emotional skills (including social relationships)			
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program. Formula: c+d/ a+b+c+d	60.9% (n= 403)	**54% (n= 474)**	*64%*
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program. Formula: d+e/ a+b+c+d+e	37% (n= 288)	**36% (n= 371)**	*38%*
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)			
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program. Formula: c+d/ a+b+c+d	59.9% (n= 418)	**61% (n= 564)**	*67%*
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program. Formula: d+e/ a+b+c+d+e	31.3% (n= 244)	**33% (n= 342)**	*36%*

Outcome C: Use of appropriate behaviors to meet their needs			
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program. Formula: c+d/ a+b+c+d	63.5% (n= 339)	**54%** **(n= 396)**	*59%*
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program. Formula: d+e/ a+b+c+d+e	53% (n= 411)	**48%** **(n= 500)**	*52%*

Progress Data for Preschool Children FFY2010

A. Positive social-emotional skills (including social relationships):	**Number of children**	**% of children**
a. Percent of children who did not improve functioning	**39**	**4**
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	**362**	**35**
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	**269**	**26**
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	**205**	**20**
e. Percent of children who maintained functioning at a level comparable to same-aged peers	**166**	**16**
Total	**N=1041**	**100%**
B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):	**Number of children**	**% of children**
a. Percent of children who did not improve functioning	**32**	**3**
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	**324**	**31**
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	**345**	**33**
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	**219**	**21**
e. Percent of children who maintained functioning at a level comparable to same-aged peers	**123**	**12**

Total	**N=1043**	**100%**
C. Use of appropriate behaviors to meet their needs:	**Number of children**	**% of children**
a. Percent of children who did not improve functioning	**40**	**4**
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	**299**	**29**
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	**201**	**19**
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	**195**	**19**
e. Percent of children who maintained functioning at a level comparable to same-aged peers	**305**	**29**
Total	**N=1040**	**100%**

Discussion of Summary Statements and a-e Progress Data for FFY2010:

Data were collected from the state COSF database for the reporting period of July 1, 2010 through June 30, 2011.

Public reporting of APR Data:

Site	**Summary Statement A1**	**Summary Statement A2**	**Summary Statement B1**	**Summary Statement B2**	**Summary Statement C1**	**Summary Statement C2**
Aroostook County	26%	26%	45%	24%	40%	28%
CDS Reach	59%	37%	70%	37%	69%	59%
CDS First Step	52%	44%	59%	30%	60%	61%
Two Rivers	67%	54%	72%	53%	54%	61%
Mid-coast Regional CDS	60%	29%	53%	22%	45%	34%
Opportunities	39%	26%	58%	27%	52%	40%
Project PEDS	44%	27%	62%	12%	48%	31%
Child Development Services Downeast	51%	37%	63%	45%	51%	51%
York County	67%	11%	61%	6%	43%	22%
State Total	54%	36%	61%	33%	54%	48%

For Outcome Summary 7a; Summary Statement 1 the data demonstrate a decrease from 60.9% in FFY2009 to 54% in FFY2010.

For Outcome Summary 7a; Summary Statement 2 the data demonstrate a decrease from 37% in FFY2009 to 36% in FFY2010.

For Outcome Summary 7b; Summary Statement 1 the data demonstrate an increase from 59.9% in FFY2009 to 61% in FFY2010.

For Outcome Summary 7b; Summary Statement 2 the data demonstrate an increase from 31.3% in FFY2009 to 33% in FFY2010.

For Outcome Summary 7c; Summary Statement 1 the data demonstrate a decrease from 63.5% in FFY2009 to 54% in FFY2010.

For Outcome Summary 7c; Summary Statement 2 the data demonstrate a decrease from 53% in FFY2009 to 48% in FFY2010.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

While Maine did not reach all of the targets for Summary Statements 1 and 2, Outcome A, Outcome B, and Outcome C the state has increased the level of compliance since the FFY2009 for Summary Statements 1 and 2 for Outcome B.

A variety of activities have occurred at both the state and site level to ensure infants and toddlers demonstrate improved outcomes.

Activities initiated or required by the CDS State IEU over the last year have included:

- Continued training and technical assistance on data collection to CDS regional sites in the form of Lunch and Learn session and user specific training.
- Enhancing the data collection system by continued development of a web based version of the state's Child Outcome Summary Form. It is anticipated the web based form will go live sometime during the 2011-2012 year. Once available for testing the CDS State IEU will select a limited number of regional staff to enter information to ensure the form is accurate and is producing the requested reports.
- Identifying and addressing data quality issues by review of each Child Outcome Summary Form (COSF) submitted. If information is omitted, misplaced, missing, incomplete, or unclear the form is returned to the Case Manager for completion and resubmitted.
- Maine continued its commitment as a Partner state of the Outcomes Measurement System Framework and Self-assessment project http://www.fpg.unc.edu/~eco/pages/frame_dev.cfm.
- The CDS State IEU Policy Manager presented during a plenary session at the 2010 Outcomes Conference on Maine's Outcome History and participation in the Outcomes Measurement System Framework and Self-Assessment project.

- The CDS State IEU personnel who manage and facilitate the Outcomes Data participated in the COSF Data Community of Practice.
- Maine also participates in the Early Childhood Outcomes Center Enhance project.
- The numbers of COSFs submitted to the CDS State IEU continues to increase annually. Each regional site that received a finding of noncompliance or continued to have an open area of noncompliance was required to submit a Corrective Action Plan (CAP) to the CDS State IEU for approval. When submitting data to the CDS State IEU for verification of correction the data submitted was reviewed and verified using the data system or through a file review. For findings that were child specific the CDS State IEU reviewed the child's file through the data system as well as the file located at the regional site to ensure the correction(s) had been made.

Activities completed by the Part C Technical Advisor:

- Discussions at Log Review sessions and Lunch and Learn presentations throughout the year addressed various aspects of the coaching process that helps to increase the family's competence, confidence, and capacity to provide learning opportunities for their child with a disability. Topics of discussion included increasing helpful parent responsiveness to child behaviors and using family routines and activities as opportunities to increase child knowledge and skills.
- Presentations to site Early Intervention teams addressed evidence-based approaches to service delivery with discussions of specific issues whenever questions arose.
- Information on early intervention publications, workshops, etc. was disseminated to site teams.

Activities completed by regional sites:

- Participated in Lunch and Learns facilitated by the CDS State IEU.
- At some regional sites the site director or team leader review the COSF forms prior to submission to the CDS State IEU.
- A few regional sites have done site level training on the importance and correlation of COSFs and progress reports.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2011 (if applicable):

Changes were made to the SPP to update the indicator and measurement language to reflect the current requirements in the measurement table released with OSEP memo 12-4.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: FAPE in the LRE

Indicator 8: Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

Measurement:
Percent = [(# of respondent parents who report schools facilitated parent involvement as a means of improving services and results for children with disabilities) divided by the (total # of respondent parents of children with disabilities)] times 100. **[(253+522)/(282+582)]*100= 90**

Note: A total 282 Part B 619 survey responses were received with 253 favorable. A total 582 Part B school-aged survey responses were received with 522 favorable.

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
91%	*91%*	**90%**

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

The percentage of parents with a child receiving special education services who reported that schools facilitated parent involvement as a means of improving services and results for children with disabilities did not meet the target. Surveys were mailed first class mail to parents of students with disabilities in LEAs and CDS sites; 5,043 surveys were mailed to parents of Part B children. A total of 864 responses were received for a response rate of 17.1%. The data were electronically captured from each of the surveys. The data were provided to the LEAs and CDS sites for their consideration in improvement planning. The data will be reviewed with the LEA or CDS site during program review where a decision on required action will be made.

Maine contracted with the Maine Parent Federation (MPF) for the 2010-2011 and subsequent school years due to a lack of sufficient resources within MDOE. MPF contacts the Child Development Services State Office and LEAs specified by the Department to obtain parent contact information. MPF administered three types of surveys (Part C - birth to 2, Part B 619 for ages 3-5, and Part B school-age 5-20) along with a cover letter from CDS/MDOE. The Part B 619 and the Part B school-aged results are reported in the indicator 8 response of the APR. After the initial

administration, MPF reviewed the strengths and weaknesses of the survey administration process with the Department and made recommendations to the Department for improving the process of survey administration.

The analysis of respondent representation was performed. The data collected are representative of the populations in Maine school districts overall in the percentage of ethnic groups and gender represented in the survey responses. The percentage of students of each gender and ethnicity/race represented in the survey responses are within 2% of the corresponding percentages in the statewide population of students with disabilities.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

The term "LEA" was changed to "district" to be consistent throughout the SPP. Contract has been written with Maine Parent Federation to continue to provide technical assistance and professional development workshops using Maine's parent network system so the timeline was updated to include the next two years of their support.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Disproportionate Representation

Indicator 9: Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.

Measurement:

Percent = [(# of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification) divided by the (# of districts in the State)] times 100 **= [(0)/(150)]*100 = 0**

State's definition of disproportionate representation:

Disproportionate representation is defined as statistically significant difference between the identification rates of students with disabilities by ethnic proportion and the ethnic proportional representation overall within the district. A statistically significant difference is defined as representation three times the standard deviation estimate higher or lower than the district proportion for the specific subgroup population. See the SPP for this indicator for a detailed description of the analysis of disproportionate representation.

If a district is identified as having disproportionate representation, a review of the policies, practices and personnel (those associated with the student's IEP) must be done to determine that the district appropriately identified the student for special education services. "Inappropriate identification" would be any non-compliance in the IEP process that resulted in the student being identified incorrectly.

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
0% of districts will have disproportionate representation	*0% of districts will have disproportionate representation*	**0% of districts will have disproportionate representation**

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY2010:

Maine's examination of disproportionate representation includes all districts with greater than 10 students in ANY ethnic group. The analysis presents population sensitive confidence intervals that are then use to detect subgroup proportions that are significantly different than the proportion mean for the population. The examination of disproportionate representation includes assessment of both overrepresentation and underrepresentation of racial and ethnic groups in special education and related services.

In the case of disproportionate representation, the district proportions for ethnic representation are compared to the district special education proportions; if the special education proportion is significantly different than the district overall proportions, then the district is identified for additional review.

Reporting year	Number of districts with ethnic proportions outside the estimated confidence intervals	Number of districts found to have disproportionate representation that is the result of inappropriate identification
FFY2010	**0**	**0**

District profiles used as the basis for determination include a compliance measure for disproportionate representation in special education identification and related services. For the purposes of determination, non-compliance with this (or any compliance indicator) results in a maximum overall determination of Needs Assistance.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

The description of the analysis technique for disproportionate representation was changed to use more commonly understood statistical terminology. The measurement scheme remains unchanged.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Disproportionate Representation

Indicator 10: Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.

Measurement:

Percent = [(# of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification) divided by the (# of districts in the State)] times 100 **= [(0)/(150)]*100 = 0**

State's definition of disproportionate representation:

Disproportionate representation is defined as statistically significant difference between the identification rates of students with disabilities by ethnic proportion and the ethnic proportional representation overall within the district. A statistically significant difference is defined as three times the standard deviation estimate for the specific subgroup population. See the SPP for this indicator for a detailed description of the analysis of disproportionate representation.

If a district is identified as having disproportionate representation, a review of the policies, practices and personnel (those associated with the student's IEP) must be done to determine that the district appropriately identified the student for special education services. "Inappropriate identification" would be any non-compliance in the IEP process that resulted in the student being identified incorrectly.

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
0% of districts will have disproportionate representation	*0% of districts will have disproportionate representation*	**0% of districts will have disproportionate representation**

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY2010:

Maine's examination of disproportionate representation includes all districts with greater than 10 students in ANY ethnic group; this includes all five ethnic groups (American Indian, Asian, Black, Caucasian, and Hispanic) for each disability. The analysis presents population sensitive confidence intervals that are then used to detect subgroup proportions that are significantly different than the proportion mean for the population. The examination of disproportionate representation includes assessment of both overrepresentation and underrepresentation of racial and ethnic groups in specific disability categories. In the case of disproportionate representation in specific disability categories, the statewide proportions for ethnic representation are compared to the district special education disability category

proportions; if the special education proportion is significantly different than the state overall proportions, the district is identified for additional review.

For FFY2010, five districts in the state meet the minimum population requirements; one district in six specific disabilities (Autism, Emotional Disabilities, Multiple Disabilities, Other Health Impairment, Specific Learning Disability, and Speech and Language Impairment), the other four only in one disability (Speech and Language Impairment). Population values in all other disabilities fail to meet the minimum population requirements. No districts show possible disproportionate representation of students in specific disabilities (Multiple Disabilities, Other Health Impairment, Specific Learning Disability, and Speech and Language Impairment). No districts exhibit disproportionate representation that is statistically significant; therefore, none is a result of inappropriate identification.

district profiles used as the basis for determination include a compliance measure for disproportionate representation in specific disability categories. For the purposes of determination, non-compliance with this (or any compliance indicator) results in a maximum overall determination of Needs Assistance.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

The description of the analysis technique for disproportionate representation was changed to use more commonly understood statistical terminology. The measurement scheme remains unchanged.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part B / Child Find

Indicator 11: Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe.

Measurement:

a. # of children for whom parental consent to evaluate was received.
b. # of children whose evaluations were completed within 60 days (or State-established timeline).

Percent = [(b) divided by (a)] times 100 **= [(857+3530)/(1256+3718)]*100 = 88.2**

Note: 05-071 Chapter 101, Maine Unified Special Education Regulation (page 36) establishes timelines for initial evaluation in section V.1.A.(3)(a)(i) as follows: "To determine whether a child is a child with a disability (as defined in 20 USC 1402) *within 60 calendar days of receiving parental consent for the evaluation for children in the Child Development Services System and* within *45 school* days of receiving parental consent for the evaluation *for children 5-20 years of age under the responsibility of the public school system*".

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
84.9%	*100%*	**88.2%**

Additional Information Required by the OSEP APR Response Table for this indicator (if applicable):

Statement from the Response Table	State's Response
The State must demonstrate, in the FFY2010 APR, due February 1, 2012, that the State is in compliance with the timely initial evaluation requirement in 34 CFR §300.301(c)(1). Because the State reported less than 100% compliance for FFY2009, the State must report on the status of correction of noncompliance reflected in the data the State reported for this indicator. The State must demonstrate, in the FFY2010 APR, that the remaining four uncorrected noncompliance	While data do not demonstrate compliance, they demonstrate progress toward compliance. Maine reports on the correction of noncompliance identified in FFY2007 in the "Correction of Remaining FFY2007 Findings of Noncompliance" (if applicable) sections below.

Statement from the Response Table	State's Response
findings identified in FFY2007 were corrected.	
The State's failure to correct longstanding noncompliance raises serious questions about the effectiveness of the State's general supervision system. The State must take the steps necessary to ensure that it can report, in the FFY2010 APR, that it has corrected this noncompliance.	Maine reports on the verification of correction of noncompliance identified in FFY2007 consistent with OSEP Memorandum 09-02 in the "Correction of Remaining FFY2007 Findings of Noncompliance" (if applicable) sections below.
When reporting on the correction of noncompliance, the State must report, in its FFY2010 APR, that it has verified that each LEA with noncompliance reflected in the FFY2009 data the State reported for this indicator and each LEA with the remaining four noncompliance findings identified in FFY2007: (1) is correctly implementing 34 CFR §300.301(c)(1) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). In the FFY2010 APR, the State must describe the specific actions that were taken to verify the correction.	Maine reports on the verification of correction of noncompliance identified in FFY2007 consistent with OSEP Memorandum 09-02 in the "Correction of Remaining FFY2007 Findings of Noncompliance" (if applicable) sections below.
If the State does not report 100% compliance in the FFY2010 APR, the State must review its improvement activities and revise them, if necessary.	GSST and the stakeholder group have reviewed the improvement activities for indicator 13.

Children (age 3-20) Evaluated Within 60 Days (or State-established timeline) :

a. Number of children for whom parental consent to evaluate was received	**4974**
b. Number of children whose evaluations were completed within 60 days (or State-established timeline)	**4387**
Percent of children with parental consent to evaluate, who were evaluated within 60 days (or State established-timeline) (Percent = [(b) divided by (a)] times 100)	88%

Section I: CDS (age 3-5)

Actual Target Data for FFY2010:

68%

Data were collected from the state database for the reporting period of July 1, 2010 through June 30, 2011. The data were verified by regional sites submitting monthly compliance reports generated at the regional site level; then the CDS State IEU generated monthly reports from the data system to verify against regional site reports. Discrepancies were shared with the regional site director and follow-up was required at the regional site level to ensure correct data.

Children Evaluated Within 60 Days (or State-established timeline):

Number of children for whom parental consent to evaluate was received	**1256**
Number of children whose evaluations were completed within 60 days (or State-established timeline)	**857**
Percent of children with parental consent to evaluate, who were evaluated within 60 days (or State established-timeline) (Percent = [(b) divided by (a)] times 100)	68%

Range of days beyond timeline:

Site	LessThan30	30_To_59	60_To_89	90_OrMore	Total
All Sites	234	71	34	60	399

Reason for delay:

Reason	Children
CDS (no delay reason was given and/or delay was caused on a part of regional site/ staff)	349
Provider	50

Public reporting of APR Data:

Site	%
Aroostook County	63%
CDS Reach	73%
CDS First Step	61%
Two Rivers	76%
Mid-coast Regional CDS	79%
Opportunities	47%
Project PEDS	78%
Child Development Services Downeast	77%
York County	60%
State Total	68%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY2010:

Although not yet meeting target CDS as a system has shown significant growth in ensuring timelines are met for children. A variety of activities have occurred at both the State and site level to ensure children are determined eligible.

Activities initiated or required by the CDS State IEU over the last year have included:

- The CDS State IEU reviews compliance reports submitted by the regional sites monthly and compares it to the compliance report and data compiled at the State office. If there are discrepancies in the data a conversation occurs with the regional site director to determine the conflict. The reports are also reviewed monthly at the regional site director's council meeting.
- A timeline tracker has been available within our data system. Testing of the tracker has been completed to ensure it calculates dates correctly according to the state timeline. The timeline tracker has been used by several regional sites through the testing and informal training that occurred in FFY2010. Training will occur in the winter of FFY2011 for all regional sites. After required training the timeline tracker will be mandatory.
- Each regional site that received a finding of noncompliance or continued to have an open area of noncompliance was required to submit a Corrective Action Plan (CAP) to the CDS State IEU for approval. When submitting data to the CDS State IEU for verification of correction the data submitted was reviewed and verified using the data system or through a file review. For findings that were child specific the CDS State IEU reviewed the child's file through the data system as well as the file located at the regional site to ensure the child's eligibility was determined within the timeline.

Part B Technical Advisor provided training via Lunch and Learn and Regional Specific trainings to Part B staff on the requirements of the referral to the IEP process.

Correction of FFY2009 Findings of Noncompliance (if State reported less than 100% compliance):
Level of compliance (actual target data) state reported for FFY2009 for this indicator: 55%. .

While CDS data were 55%, all programs identified with noncompliance have longstanding findings with this indicator that have not yet been verified as corrected. CDS did not make new findings of noncompliance in FFY 2009 but used the FFY 2009 data to further inform the corrective actions required by the programs to ensure correction of the longstanding noncompliance.

1) Number of findings of noncompliance the State made during FFY2009 (the period from July 1, 2009 through June 30, 2010)	**0**
2) Number of FFY2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	**0**
3) Number of FFY2009 findings not verified as corrected within one year [(1) minus (2)]	**0**

Correction of FFY2009 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4) Number of FFY2009 findings not timely corrected (same as the number from (3) above)	**0**
5) Number of FFY2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**0**
6) Number of FFY2009 findings not verified as corrected [(4) minus (5)]	**0**

Actions Taken if Noncompliance Not Corrected:
There were no findings of noncompliance made for indicator 11 for age 3-5. See below for prior year with noncompliance.

Verification of Correction of FFY2009 noncompliance (either timely or subsequent):
There were no findings of noncompliance made for indicator 11 for age 3-5. See below for prior year with noncompliance.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY2009:
There were no findings of noncompliance made for indicator 11 for age 3-5. See below for prior year with noncompliance.

Correction of Remaining FFY2007 Findings of Noncompliance (if applicable):

1. Number of remaining FFY2007 findings noted in OSEP's June 2011 FFY2009 APR response table for this indicator	**4**
2. Number of remaining FFY2007 findings the State has verified as corrected	0
3. Number of remaining FFY2007 findings the State has NOT verified as corrected [(1) minus (2)]	4

CDS State IEU has verified that each regional site with noncompliance reflected in the remaining four noncompliance findings identified in FFY 2007 has completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child was no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Actions Taken if Noncompliance Not Corrected:
For FFY2007 findings that remain uncorrected the CDS State IEU has provide technical assistance to the regional sites on what is monitored, how to correct the outstanding finding and the steps taken to verify the correction. Regional sites with outstanding findings were required to update their Corrective Action Plan (CAP).

For FFY2007 findings that remain uncorrected as of submission of this report, the CDS State IEU will enforce sanctions on the regional sites with a strict timeline to ensure improvement and correction. CAPs will be revised with input from the CDS State IEU Management Team to ensure an increased level of detail and attention. The CDS State IEU will mandate indicator and site specific action steps when necessary. Site specific recommendations will be made by the CDS State IEU State Director on staffing patters, procedures and or budget refinements.

On May 2 and 3, 2012 Susan Hayes and Susan Marks from NERRC will provide on-site support to Maine Part C and B staff to:

- Review all outstanding uncorrected findings of non-compliance (both Part C and B)
- Review correction efforts/corrective actions taken to date with local sites and LEAs related to these findings of non-compliance
- Analyze the effectiveness of existing correction efforts and corrective actions
- Explore additional progressively stringent corrective actions/sanctions including those employed by other states
- Strategize how best to apply these new corrective actions to local sites/LEAs with outstanding non-compliance
- Develop a plan (including specific corrective actions or sanctions to be utilized, timelines, staff responsibilities for follow-up, and communication to local sites/LEAs) to implement new corrective actions with local sites/LEAs to ensure correction of all outstanding non-compliance
- Re-evaluate the Maine process for verifying correction of non-compliance to see what overall improvements can be made to ensure future timely correction of any new findings of non-compliance

As part of this two-day meeting, the Maine CDS state team, NERRC, and representatives from OSEP will also speak with CDS Regional Site Directors and program leads through the scheduled May 3rd "Lunch and Learn" teleconference about the importance of correction of non-compliance and the state's plan for ensuring this happens in a timely manner going forward.

Verification of Correction of FFY2007 noncompliance (either timely or subsequent):
CDS State IEU was unable to verify correction of noncompliance for Indicator 11 for age 3-5 for FFY 2007.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY2007:

CDS State IEU was unable to verify correction of noncompliance for Indicator 11 for age 3-5 for FFY 2007.

Section II - School Aged (6 to 20)

Actual Target Data for FFY2010:

95%

Data was collected by each LEA monitored submitting a self-assessment of 15% of files based on current SAU population to the DOE. The data was collected during the spring of 2010.

Children Evaluated Within 60 Days (or State-established timeline):

a. Number of children for whom parental consent to evaluate was received	**3718**
b. Number of children whose evaluations were completed within 60 days (or State-established timeline)	**3530**
Percent of children with parental consent to evaluate, who were evaluated within 60 days (or State established-timeline) (Percent = [(b) divided by (a)] times 100)	95%

Range of days beyond timeline:

Range of days beyond the 45 school day timeline was one to ten days.

Reason for delay:

The most common reason for delay is parental request for reschedule of the IEP meeting. District personnel attempt to accommodate parent involvement in the meeting to provide the highest possible support to the student and the team, but occasionally exceed the timeline in the process. In remote areas, difficulty in scheduling contracted

providers caused a delay in scheduling an IEP meeting. Snow storm was cited as the reason in one case.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2010:

During program review monitoring in FFY2010, 10 of 24 LEAs were found non-compliant to the 45 school day timeline requirement. However, the file level compliance within the LEAs is very high (94.9% - 3530 files compliant of 3718 reviewed). All non-compliant documents were found in 10 of the 24 LEAs reviewed. Each of the LEAs was required to create a corrective action plan within 60 calendar days of the letter of findings. MDOE has verified that each LEA with noncompliance reflected in the FFY 2009 data the State reported for this indicator (1) is correctly implementing 34 CFR §300.301(c)(1) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has completed the evaluation, although late, for any child whose initial evaluation was not timely, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02). The plans have been submitted to the Maine Department of Education, have been reviewed, and approval granted. Progress to those corrective action plans is being monitored by the program review staff to ensure correction is timely and meets the OSEP Memorandum 09-02 requirements. Immediate action was taken in every non-compliant LEA to ensure that evaluations were completed for all students with timeline violations; data have been reviewed by program review personnel to verify the evaluations were completed in every case. As a condition of approval, corrective action plans submitted were required to address the cause for evaluations not completed within timelines, and all plans did addressed. Completion of the corrective actions is required to be submitted in writing with evidence or assurance of implementation of the planned corrections. Determinations for the FFY2010 indicators will include the indicator 11 non-compliance indication, which will result in “Needs Assistance” determination at best for each of the 10 LEAs with findings. The determination response for indicator 11 non-compliance will require each LEA to review a representative sample of files for initial timeline compliance using more recent files (updated data) to ensure the corrective actions implemented in response to their findings of non-compliance this year have resulted in files compliant to the timeline requirement.

Correction of FFY 2009 Findings of Noncompliance (if State reported less than 100% compliance):

Level of compliance (actual target data) State reported for FFY 2009 for this indicator: 85%

1) Number of findings of noncompliance the State made during FFY 2009 (the period from July 1, 2009 through June 30, 2010)	**35**
2) Number of FFY 2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	**20**
3) Number of FFY 2009 findings not verified as corrected within one year [(1) minus (2)]	**15**

Correction of FFY2009 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4) Number of FFY2009 findings not timely corrected (same as the number from (3) above)	**15**
5) Number of FFY2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**13**
6) Number of FFY2009 findings not verified as corrected [(4) minus (5)]	**2**

Actions Taken if Noncompliance Not Corrected:

For FFY2009 findings that remain uncorrected MDOE has provide technical assistance to the LEAs on what is monitored, how to correct the outstanding finding and the steps taken to verify the correction. LEAs with outstanding findings were required to update their Corrective Action Plan (CAP). Since timeline non-compliance cannot be retroactively corrected, the LEAs are required to ensure the evaluations are complete for those incidents where timelines were exceeded, but then submit subsequent data on new evaluations.

Verification of Correction of Remaining FFY 2009 findings:
Prior to considering any finding from FFY 2009 corrected, MDOE verified that each LEA with noncompliance: (1) was correctly implementing 34 CFR §§300.301(c)(1), (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through desk audit; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:
Specifically, to verify that each LEA was correctly implementing the requirements, MDOE reviewed subsequent updated data and verified subsequent data submitted through LEA self-assessments. The time period for which each program was

required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

In addition to verifying correction according to the OSEP 09-02 Memorandum, MDOE also complied with the requirements to account for all instances of noncompliance identified through self-assessments and other monitoring procedures; identify the level, location, and root cause(s) of all noncompliance; and require any LEA with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Changes were made to the SPP to update the indicator and measurement language to reflect the current requirements in the measurement table released with OSEP memo 12-4. GSST and the stakeholder group have reviewed the improvement activities for indicator 11.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Indicator 12: Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

Measurement:

a. # of children who have been served in Part C and referred to Part B (LEA notified pursuant to 637(a)(9)(A)) for Part B eligibility determination.
b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to their third birthdays.
c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
d. # of children for whom parent refusal to provide consent caused delays in evaluation or initial services.
e. # of children who were referred to Part C less than 90 days before their third birthdays.

Percent = [(c) divided by (a - b - d - e)] times 100 **= [(525) divided by (709-39-81-24]*100 = 92.9**

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
91.7%	*100%*	**92.9%**

Additional Information required by the June 20, 2011 OSEP APR Response Table for this indicator:

Statement from the Response Table	State's Response
The State must demonstrate, in the FFY2010 APR, due February 1, 2012, that the State is in compliance with the early childhood transition requirements in 34 CFR §300.124(b). Because the State reported less than 100% compliance for FFY2009, the State must report on the status of correction of noncompliance reflected in the FFY2009 data the State reported for this indicator. The State must demonstrate, in the FFY2010 APR, that the remaining one uncorrected noncompliance finding identified in FFY2008 was corrected.	While CDS data do not demonstrate compliance, they demonstrate progress toward compliance. CDS reports on the correction of noncompliance identified in FFY2008 in the "Correction of Remaining FFY2008 Findings of Noncompliance" (if applicable) sections below.
When reporting on the correction of noncompliance, the State must report, in its	CDS reports on the verification of correction

Statement from the Response Table	State's Response
FFY2010 APR, that it has verified that each LEA with noncompliance reflected in the data the State reported for this indicator and the LEA with the remaining noncompliance finding identified in FFY2008: (1) is correctly implementing 34 CFR §300.124(b) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has developed and implemented the IEP, although late, for any child for whom implementation of the IEP was not timely, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY2010 APR, the State must describe the specific actions that were taken to verify the correction.	of noncompliance identified in FFY2008 consistent with OSEP Memorandum 09-02 in the "Correction of Remaining FFY2008 Findings of Noncompliance" (if applicable) sections below.
If the State does not report 100% compliance in the FFY2010 APR, the State must review its improvement activities and revise them, if necessary.	GSST and the stakeholder group have reviewed the improvement activities for indicator 12.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

Data were collected from the state database for the reporting period of July 1, 2010 through June 30, 2011. The data were verified by the CDS State IEU generating reports and submitting to regional sites for verification and correction. Discrepancies were shared with regional site directors and follow-up was required at the regional site level to ensure correct data.

Actual State Data (Numbers)

a. # of children who have been served in Part C and referred to Part B for Part B eligibility determination.	709
b. # of those referred determined to be NOT eligible and whose eligibility was determined prior to third birthday	39
c. # of those found eligible who have an IEP developed and implemented by their third birthdays	525
d. # for whom parent refusals to provide consent caused delays in evaluation or initial services or to whom exceptions under 34 CFR §300.301(d) applied.	81

e. # of children who were referred to Part C less than 90 days before their third birthdays.	24
# in a but not in b, c, d, or e.	
Percent of children referred by Part C prior to age 3 who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays Percent = [(c) / (a-b-d-e)] * 100	93%

Indicate the range of days beyond the third birthday and the reasons for the delays:

Site	Days_1_To_29	Days_30_To_59	Days_60_To_89	Days_90_Plus
All Sites	16	2	7	39

Reason for delay:

Reason	Children
CDS (no delay reason was given and/or delay was caused on a part of regional site/ staff)	64

Public reporting of APR Data:

Site	%
Aroostook County	100%
CDS Reach	94%
CDS First Step	84%
Two Rivers	100%
Mid-coast Regional CDS	102%
Opportunities	103%
Project PEDS	90%
Child Development Services Downeast	93%
York County	84%
State Total	93%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

Activities initiated or required by the CDS State IEU over the last year have included:

- The CDS State IEU has developed an electronic focus audit form specific to transition that is used within monitoring visits. The audit form has also been made available to regional sites to use in staff training, to use when doing self-assessments and to use as a training tool with staff.

- Participated in technical assistance opportunities related to Transition from OSEP.
- Communicated with Part B technical assistance regularly on what barriers the field was having in relation to transition.
- Discussed the important of the Transition requirements at the monthly Director's Council meeting. At the Director's Council meetings regional site directors were encouraged to communicate best practice ideas and the barriers they were encountering at their sites.
- Each regional site that received a finding of noncompliance or continued to have an open area of noncompliance was required to submit a Corrective Action Plan (CAP) to the CDS State IEU for approval. When submitting data to the CDS State IEU for verification of correction the data submitted was reviewed and verified using the data system or through a file review. For findings that were child specific the CDS State IEU reviewed the child's file through the data system as well as the file located at the regional site to ensure the child's IEP was developed and implemented by their third birthdays.

Correction of FFY2009 Findings of Noncompliance (if State reported less than 100% compliance in its FFY2009 APR):

Level of compliance (actual target data) state reported for FFY2009 for this indicator: 91.7%

1) Number of findings of noncompliance the State made during FFY2009 (the period from July 1, 2009 through June 30, 2009)	**3**
2) Number of FFY2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	**1**
3) Number of FFY2009 findings not verified as corrected within one year [(1) minus (2)]	**2**

Correction of FFY2009 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4) Number of FFY2009 findings not timely corrected (same as the number from (3) above)	**2**
5) Number of FFY2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**0**
6) Number of FFY2009 findings not verified as corrected [(4) minus (5)]	**2**

Actions Taken if Noncompliance Not Corrected:

For FFY2009 findings that remain uncorrected, the CDS State IEU has provided technical assistance to the regional sites on what is monitored, how to correct the outstanding finding and the steps taken to verify the correction. Regional sites with outstanding findings were required to update their Corrective Action Plans (CAPs).

For FFY2009 findings that remain uncorrected as of submission of this report, the CDS State IEU will enforce sanctions on the regional sites with a strict timeline to ensure improvement and correction. CAPs will be revised with input from the CDS State IEU Management Team to ensure an increased level of detail and attention. The CDS State IEU will mandate indicator and site specific action steps when necessary. Site specific recommendations will be made by the CDS State IEU State Director on staffing matters, procedures and or budget refinements.

On May 2 and 3, 2012 Susan Hayes and Susan Marks from NERRC will provide on-site support to Maine Part C and B staff to:

- Review all outstanding uncorrected findings of non-compliance (both Part C and B)
- Review correction efforts/corrective actions taken to date with local sites and LEAs related to these findings of non-compliance
- Analyze the effectiveness of existing correction efforts and corrective actions
- Explore additional progressively stringent corrective actions/sanctions including those employed by other states
- Strategize how best to apply these new corrective actions to local sites/LEAs with outstanding non-compliance
- Develop a plan (including specific corrective actions or sanctions to be utilized, timelines, staff responsibilities for follow-up, and communication to local sites/LEAs) to implement new corrective actions with local sites/LEAs to ensure correction of all outstanding non-compliance
- Re-evaluate the Maine process for verifying correction of non-compliance to see what overall improvements can be made to ensure future timely correction of any new findings of non-compliance

As part of this two-day meeting, the Maine CDS state team, NERRC, and representatives from OSEP will also speak with CDS Regional Site Directors and program leads through the scheduled May 3rd "Lunch and Learn" teleconference about the importance of correction of non-compliance and the state's plan for ensuring this happens in a timely manner going forward.

Verification of Correction (either timely or subsequent):

Prior to considering any finding from FFY2009 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing 34 CFR §300.124(b) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe of the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY2009:

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e,

performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted for each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit Corrective Action Plans.

Correction of Remaining FFY2008 Findings of Noncompliance (if applicable)

4. Number of remaining FFY2008 findings noted in OSEP's June 2010 FFY2009 APR response table for this indicator	1
5. Number of remaining FFY2008 findings the State has verified as corrected	0
6. Number of remaining FFY2008 findings the State has NOT verified as corrected [(1) minus (2)]	1

Actions Taken if Noncompliance Not Corrected:
For FFY2008 findings that remain uncorrected the CDS State IEU has provided technical assistance to the regional sites on what is monitored, how to correct the outstanding finding and the steps taken to verify the correction. Regional sites with outstanding findings were required to update their Corrective Action Plans (CAPs).

For FFY2008 findings that remain uncorrected as of submission of this report, the CDS State IEU will enforce sanctions on the regional sites with a strict timeline to ensure improvement and correction. CAPs will be revised with input from the CDS State IEU Management Team to ensure an increased level of detail and attention. The CDS State IEU will mandate indicator and site specific action steps when necessary. Site specific recommendations will be made by the CDS State IEU State Director on staffing matters, procedures and or budget refinements.

On May 2 and 3, 2012 Susan Hayes and Susan Marks from NERRC will provide on-site support to Maine Part C and B staff to:

- Review all outstanding uncorrected findings of non-compliance (both Part C and B)
- Review correction efforts/corrective actions taken to date with local sites and LEAs related to these findings of non-compliance
- Analyze the effectiveness of existing correction efforts and corrective actions
- Explore additional progressively stringent corrective actions/sanctions including those employed by other states

- Strategize how best to apply these new corrective actions to local sites/LEAs with outstanding non-compliance
- Develop a plan (including specific corrective actions or sanctions to be utilized, timelines, staff responsibilities for follow-up, and communication to local sites/LEAs) to implement new corrective actions with local sites/LEAs to ensure correction of all outstanding non-compliance
- Re-evaluate the Maine process for verifying correction of non-compliance to see what overall improvements can be made to ensure future timely correction of any new findings of non-compliance

As part of this two-day meeting, the Maine CDS state team, NERRC, and representatives from OSEP will also speak with CDS Regional Site Directors and program leads through the scheduled May 3rd "Lunch and Learn" teleconference about the importance of correction of non-compliance and the state's plan for ensuring this happens in a timely manner going forward.

Verification of Correction of Remaining FFY2008 findings:

CDS State IEU was unable to verify correction of noncompliance for indicator B12 for FFY2008.

Describe of the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY2008:

CDS State IEU was unable to verify correction of noncompliance for indicator B12 for FFY2008.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Changes were made to the SPP to update the indicator and measurement language to reflect the current requirements in the measurement table released with OSEP memo 12-4. GSST and the stakeholder group have reviewed the improvement activities for indicator 12.

Part B State Annual Performance Report (APR) for FFY2010

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Indicator 13: Percent of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority.

Measurement:

Percent = [(# of youth with IEPs aged 16 and above with an IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition services needs. There also must be evidence that the student was invited to the IEP Team meeting where transition services are to be discussed and evidence that, if appropriate, a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority) divided by the (# of youth with an IEP age 16 and above)] times 100 **= [(1743)/(3718)]*100 = 47**

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
88%	*100%*	**47%**

Additional Information required by the June 20, 2011 OSEP APR Response Table for this indicator:

Statement from the Response Table	State's Response
The State must demonstrate, in the FFY2010 APR, due February 1, 2012, that the State is in compliance with the secondary transition requirements in 34 CFR §§300.320(b) and 300.321(b). Because the State reported less than 100% compliance for FFY2009, the State must report on the status of correction of noncompliance reflected in the data the State reported for this indicator.	Maine reports on the verification of correction of noncompliance identified in FFY2009 consistent with OSEP Memorandum 09-02 in the "Correction of Remaining FFY2009 Findings of Noncompliance" (if applicable), sections below.

Statement from the Response Table	State's Response
When reporting on the correction of noncompliance, the State must report, in its FFY2010 APR, that it has verified that each LEA with noncompliance reflected in the FFY2009 data the State reported for this indicator: (1) is correctly implementing 34 CFR §§300.320(b) and 300.321(b) (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY2010 APR, the State must describe the specific actions that were taken to verify the correction.	See table below.
If the State does not report 100% compliance in the FFY2010 APR, the State must review its improvement activities and revise them, if necessary.	GSST and the stakeholder group have reviewed the improvement activities for indicator 13.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

Program review monitoring this year increased focus on transition elements during its review of districts. The data reflect a significant opportunity for improvement that is being address in multiple activities. The State Personnel Development Grant has a significant portion of its professional development devoted to a goal addressing the transition planning, supports and documentation required in the development of appropriate Individualized Education Programs (IEPs). Additionally, the Maine Department of Education is using distance technologies, webinars, and direct contacts to provide technical assistance to school personnel to ensure timely correction of transition non-compliance findings.

Correction of Remaining FFY2009 Findings of Noncompliance (if applicable)

Level of compliance (actual target data) state reported for FFY2009 for this indicator: 88%

1) Number of findings of noncompliance the State made during FFY2009 (the period from July 1, 2009 through June 30, 2009)	**36**
2) Number of FFY2009 findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding)	**16**

3) Number of FFY2009 findings not verified as corrected within one year [(1) minus (2)]	20

Correction of FFY2009 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance):

4) Number of FFY2009 findings not timely corrected (same as the number from (3) above)	20
5) Number of FFY2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	11
6) Number of FFY2009 findings not verified as corrected [(4) minus (5)]	9

Actions Taken if Noncompliance Not Corrected:

For FFY2009 findings that remain uncorrected MDOE has provide technical assistance to the LEAs on what is monitored, how to correct the outstanding finding and the steps taken to verify the correction. LEAs with outstanding findings were required to update their Corrective Action Plan (CAP). Since transition plan information can be corrected, the LEAs are required to convene an IEP meeting to revise the plans to meet the requirements for those incidents where transition plans were found to be incorrect. Those that remain open have failed to adequately correct the transition plans AND demonstrate subsequent correction with new evidence.

Verification of Correction of Remaining FFY 2009 findings:
Prior to considering any finding from FFY 2009 corrected, MDOE verified that each LEA with noncompliance: (1) was correctly implementing 34 CFR §§300.320(b) and 300.321(b), (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through desk audit; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2009:
Specifically, to verify that each LEA was correctly implementing the requirements, MDOE reviewed updated data and verified data submitted through LEA self-assessments. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

In addition to verifying correction according to the OSEP 09-02 Memorandum, MDOE also complied with the requirements to account for all instances of noncompliance identified through self-assessments and other monitoring procedures; identify the level, location, and root cause(s) of all noncompliance; and

require any LEA with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

GSST and the stakeholder group have reviewed the improvement activities for indicator 13.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part B / Effective Transition

Indicator 14: Percent of youth who are no longer in secondary school, had IEPs in effect at the time they left school, and were:

A. Enrolled in higher education within one year of leaving high school.
B. Enrolled in higher education or competitively employed within one year of leaving high school.
C. Enrolled in higher education or in some other postsecondary education or training program; or competitively employed or in some other employment within one year of leaving high school.

Measurement:

A. Percent enrolled in higher education = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100 **= [(227)/(909)]*100 = 25.0**

B. Percent enrolled in higher education or competitively employed within one year of leaving high school = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education or competitively employed within one year of leaving high school) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100 **= [(227+469)/(909)]*100 = 76.6**

C. Percent enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment = [(# of youth who are no longer in secondary school, had IEPs in effect at the time they left school and were enrolled in higher education, or in some other postsecondary education or training program; or competitively employed or in some other employment) divided by the (# of respondent youth who are no longer in secondary school and had IEPs in effect at the time they left school)] times 100 **= [(227+469+52)/(909)]*100 = 82.3**

The actual number of "leavers" who are:	**Numbers**
1. Enrolled in higher education within one year of leaving high school;	**227**
2. Competitively employed within one year of leaving high school (but not enrolled in higher education);	**469**
3. Enrolled in some other postsecondary education or training program within one year of leaving high school (but not enrolled in higher education or competitively employed);	**11**
4. In some other employment within one year of leaving high school (but not enrolled in higher education, some other postsecondary education or training program, or competitively employed).	**41**

Actual Target Data for FFY2010:

FFY2009 Performance			*FFY2010 Target*			FFY2010 Performance		
A.	B.	C.	*A.*	*B.*	*C.*	**A.**	**B.**	**C.**
35%*	92%*	92%*	*25.0%*	*76.6%*	*82.3%*	**25.0%**	**76.6%**	**82.3%**

* Data reported in FFY2009 for indicator 14 did not provide the required measurement; a new baseline and targets were established for FFY2010.

Additional Information required by the June 20, 2011 OSEP APR Response Table for this indicator:

Statement from the Response Table	State's Response
The State did not provide data based on the required measurement, and the State must provide, as baseline data, the required data for FFY2010 in the FFY2010 APR, due February 1, 2012.	Baseline data are provided in this indicator as required. The SPP was revised to describe the changes in the measurement and the resulting baseline data. Targets for FFY2011 and FFY2012 were established based on the new baseline data.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

Data for the exiters in 2009-2010 was provided to the National Student Clearinghouse and the Department of Labor Statistics. These organizations evaluated those data for subsequent employment and education experiences. The results provide data that are presented this year as baseline data for this indicator.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

The description of the indicator measurement, data collection, and the resulting new baseline data were revised in the SPP. Baseline data were used to establish the targets for FFY2011 and FFY2012.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 15: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects non-compliance as soon as possible but in no case later than one year from identification.

Measurement:

Percent of non-compliance corrected within one year of identification:

a. # of findings of non-compliance.
b. # of corrections completed as soon as possible but in no case later than one year from identification.

Target data for FFY2010 – the percent shown in the last row of the Indicator 15 Worksheet [column (b) sum divided by column (a)] sum times 100 **[(53/88) X 100] = 60.2**

(Indicator 15 Worksheet included within the text of this indicator below)

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
42.4%	*100%*	**71.2%**

Additional Information required by the June 20, 2011 OSEP APR Response Table for this indicator:

Statement from the Response Table	State's Response
The State must demonstrate, in the FFY2010 APR, due February 1, 2012, that the remaining 13 findings of noncompliance identified in FFY2008, and the remaining 19 findings of noncompliance identified in FFY2007, that were not reported as corrected in the FFY2009 APR were corrected.	Maine reports on the correction of noncompliance identified in FFYs 2007 & 2008 in the "Correction of Remaining FFY2007 Findings of Noncompliance" (if applicable), and "Correction of Remaining FFY2008 Findings of Noncompliance" (if applicable) sections below.
The State's failure to correct longstanding noncompliance raises serious questions about the effectiveness of the State's general supervision system. The State must take the steps necessary to ensure that it can report, in the FFY2010 APR, that	Maine reports on the correction of noncompliance identified in FFYs 2007 & 2008 in the "Correction of Remaining FFY2007 Findings of Noncompliance" (if

Statement from the Response Table	State's Response
it has corrected this noncompliance.	applicable), and "Correction of Remaining FFY2008 Findings of Noncompliance" (if applicable) sections below.
The State must review its improvement activities and revise them, if appropriate, to ensure they will enable the State to provide data in the FFY2010 APR, demonstrating that the State timely corrected noncompliance identified by the State in FFY2009 in accordance with 20 U.S.C. 1232d(b)(3)(E), 34 CFR §§300.149 and 300.600(e), and OSEP Memo 09-02.	GSST and the stakeholders group have reviewed and revised, if appropriate, its improvement activities for indicator 15.
In reporting on correction of findings of noncompliance in the FFY2010 APR, the State must report that it verified that each LEA with noncompliance identified in FFY2009: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the LEA, consistent with OSEP Memo 09-02. In the FFY2010 APR, the State must describe the specific actions that were taken to verify the correction. In reporting on Indicator 15 in the FFY2010 APR, the State must use the Indicator 15 Worksheet.	CDS reports on the verification of correction of noncompliance identified in FFYs 2007 & 2008 consistent with OSEP Memorandum 09-02 in the "Correction of Remaining FFY2007 Findings of Noncompliance" (if applicable), and "Correction of Remaining FFY2008 Findings of Noncompliance" (if applicable) sections above. Indicator 15 worksheet is given below.
In addition, in responding to Indicators 11, 12, and 13 in the FFY2010 APR, the State must report on correction of the noncompliance described in this table under those indicators.	Correction of noncompliance for indicators 11, 12, and 13 are described in the tables and narrative for those indicators.

PART B INDICATOR 15 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2009 (7/1/09 to 6/30/10)	(a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 to 6/30/10)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of youth with IEPs graduating from high school with a regular diploma. 2. Percent of youth with IEPs dropping out of high school.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
14. Percent of youth who had IEPs, are no longer in secondary school and who have been competitively employed, enrolled in some type of postsecondary school or training program, or both, within one year of leaving high school.	Dispute Resolution: Complaints, Hearings			
3. Participation and performance of children with disabilities on statewide assessments. 7. Percent of preschool children with IEPs who demonstrated improved outcomes. (Pre-school only)	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	3	3	2
	Dispute Resolution: Complaints, Hearings			

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2009 (7/1/09 to 6/30/10)	(a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 to 6/30/10)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
4A. Percent of districts identified as having a significant discrepancy in the rates of suspensions and expulsions of children with disabilities for greater than 10 days in a school year.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
4B. 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 for children with IEPs; and (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.	Dispute Resolution: Complaints, Hearings			

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2009 (7/1/09 to 6/30/10)	(a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 to 6/30/10)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
5. Percent of children with IEPs aged 6 through 21 - educational placements.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
6. Percent of preschool children aged 3 through 5 – early childhood placement.				
	Dispute Resolution: Complaints, Hearings			
8. Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
9. Percent of districts with disproportionate representation of racial and ethnic groups in special education that is the result of inappropriate identification.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
10. Percent of	Dispute			

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2009 (7/1/09 to 6/30/10)	(a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 to 6/30/10)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.	Resolution: Complaints, Hearings			
11. Percent of children who were evaluated within 60 days of receiving parental consent for initial evaluation or, if the State establishes a timeframe within which the evaluation must be conducted, within that timeframe. (School aged only)	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	35	35	20
	Dispute Resolution: Complaints, Hearings			
12. Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	3	3	1
	Dispute Resolution: Complaints, Hearings			
13. Percent of youth	Monitoring	36	36	16

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2009 (7/1/09 to 6/30/10)	(a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 to 6/30/10)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
aged 16 and above with IEP that includes appropriate measurable postsecondary goals that are annually updated and based upon an age appropriate transition assessment, transition services, including courses of study, that will reasonably enable the student to meet those postsecondary goals, and annual IEP goals related to the student's transition service needs.	Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
Other areas of noncompliance: **Findings of non-compliance related to implementation of Maine's Unified Special Education Regulation**	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	30	56	54
Due process Complaint Investigations (from FFY2009 Table 7)	Dispute Resolution: Complaints, Hearings	6	6	6
Other areas of noncompliance:	Monitoring Activities: Self-			

Indicator/Indicator Clusters	General Supervision System Components	# of LEAs Issued Findings in FFY 2009 (7/1/09 to 6/30/10)	(a) # of Findings of noncompliance identified in FFY 2009 (7/1/09 to 6/30/10)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
Other areas of noncompliance:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other			
	Dispute Resolution: Complaints, Hearings			
Sum the numbers down Column a and Column b			139	99
Percent of noncompliance corrected within one year of identification =			**(b) / (a) X 100 =**	**71.22%**
(column (b) sum divided by column (a) sum) times 100.				

Describe the process for selecting LEAs for Monitoring:

The CDS State IEU monitors all regional sites annually through the state data system. In addition to monitoring through the state data system, the CDS State IEU members of the B-20 GSST complete onsite visits to half of the regional sites per year. Pursuant to MUSER (Section XIII), *"…representatives of the Commissioner*

shall collect data and report on every SAU program at least once during the six year period of the State's Performance Plan". Site compliance visits for FFY2010 included York County, Project PEDS, Child Development Services Downeast, Mid-coast Regional CDS and CDS First Step. These sites will be scheduled for verification visits in the spring of FFY2012.

School age LEAs are reviewed on a six year cycle as well. The schedule of SAU review is posted on the Maine Department of Education Website http://www.maine.gov/education/speced/gsst/index.html at the link "Program Review Projections".

In the most recent adoption of the Maine Education Special Education Regulations (July 2, 2011) Section XIII-General Supervision System includes five subsections;

1. Department Approval,
2. General Supervision System Priorities,
3. General Supervision System Activities,
4. Approval/ Enforcement and,
5. Public Access.

The Regulation can be found at http://www.maine.gov/sos/cec/rules/05/071/071c101.doc.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY2010:

A major focus of FFY2010 was verifying correction of noncompliance as soon as possible but in no case later than one year from identification as specified by OSEP Memorandum 09-02.

Due to the consolidation of the 15 regional CDS sites to nine regional sites, our OSEP state contact provided guidance requiring the follow-up of any findings the closed regional sites may have had. It was determined that it was the responsibility of receiving sites to correct findings of noncompliance. OSEP required that if a regional site received one or more children from a regional site that had closed, the finding of noncompliance must be corrected by the receiving regional site. As a result, multiple regional sites may have received the same finding. For example: Site A closed. Those children became the responsibility of Site XYZ and Site ABC. Both Site XYZ and Site ABC must demonstrate correction before the finding from Site A can be considered closed.

Activities initiated or required by the CDS State IEU and MDOE over the later year have included:

- The CDS State IEU Policy Manager and Data Distinguished Educator (DE) continue to serve as members of the state Birth-20 General Supervision System (B-20 GSST) team. The two named persons guide and complete all monitoring activities for the CDS State IEU with assistance from the CDS State IEU

Management Team when necessary. A significant change in the structure of the B-20 GSST team over the past year has been the GSST Team Lead named by the Commissioner of Education has been placed on medical level.

- As a part of GSST a schedule of events for the year was completed. Due to some specific requirements and diversity with the CDS system some of the timelines and dates were changed to meet the needs of CDS system.
- The CDS State IEU has participated in all monthly Director Council meetings and each month has discussed findings of noncompliance, correction of noncompliance procedures, provided guidance on OSEP Memo 09-02, provided information obtained through OSEP technical assistance webinars and OSEP Conferences. Regional site director's and staff are much more aware of the requirements and expectations of General Supervision.
- Over the last year the Data DE has maintained a database of all areas of noncompliance. The system documents when the finding was made, when it was corrected and if within a year of identification. The information has been shared with regional site director and NERRC.
- Each regional site that received a finding of noncompliance or continued to have an open area of noncompliance was required to submit a Corrective Action Plan (CAP) to the CDS State IEU for approval. When submitting data to the CDS State IEU for verification of correction the data submitted was reviewed and verified using the data system or through a file review. For findings that were child specific the CDS State IEU reviewed the child's file through the data system as well as the file located at the regional site to ensure the child's was provided the needed requirement.
- The GSST Team visited York County site on 12/22/2010 to perform an on-site review as follow-up to a due process compliant. Following the review on 12/22/2010 CDS State IEU personnel visited York County for further file review and provided technical assistance to the site staff.
- Maine participated in the Targeting Indicator Improvement (TII) process facilitated by NERRC during the fall 2011. This intensive two-day structured process helped state team members identify underlying performance drivers and barriers to improvement for this indicator. As a result of the TII process, specific, prioritized action steps informed by indicator data and contributing factors were created to address the barriers to improved performance. As part of the TII process, progress checkpoints have been created to review action steps and progress will be reported in future Annual Performance Reports. The indicators Maine selected to focus on in this work is C9/ B15. Most of the work and action planning has been specific to CDS due to the make-up of the TII group, but learning and procedure changes are being applied in the school age LEAs as well.
- Program review activities with the LEAs have included extensive technical assistance and guidance as non-compliance is discovered. The non-compliance identifications and the resulting corrective action plans are focused heavily on improving the level of understanding, consistency, and permanence of the correction so that future occurrences of non-compliance are eliminated. Staff

changes and evolution of regulations has created a gap in specific implementation knowledge that has been identified and is closing.

- Several goals of the State Professional Development Grant (SPDG) are focused specifically on addressing needs directly related to indicators in the SPP. The work groups assigned to the development of solutions within those goals are prioritizing their work to align with the needs identified by demonstrate non-performance in the compliance indicators. Professional development delivery will occur in those districts with the poorest compliance rate first, but then spread to statewide. Performance in the compliance indicators in the SPP is a significant part of the metrics used to measure success of the SPDG.

Activities completed by regional sites/LEAs:

- Regional site directors share Letters of Findings, Letters of Correction and information distributed to by the CDS State IEU to their staff.
- Some regional sites have invited CDS State IEU staff to their schedule staff meetings to explain GSST Letters, documents or requirements.
- Special education directors in the school aged LEAs share Letters of Findings, Letters of Correction and information distributed to by the LEA to their staff.
- School district representatives from special education and administration have joined the SPDG goal teams, the Data and Performance Partnership, task forces, and the Low Incidence Disabilities Steering committee to provide front-line insight and implementation support to dozens of initiatives directed at improving results and compliance to measures for children with disabilities across the districts in the state.

Note: For this indicator, report data on the correction of findings of noncompliance the State identified in FFY2009 (July 1, 2009 through June 30, 2010) and verified as corrected as soon as possible and in no case later than one year from identification.

Timely Correction of FFY2009 Findings of Noncompliance (corrected within one year from identification of the noncompliance):

1. Number of findings of noncompliance the State identified in FFY2009 (the period from July 1, 2009 through June 30, 2010) (Sum of Column a on the Indicator B15 Worksheet)	**139**
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the LEA of the finding) (Sum of Column b on the Indicator B15 Worksheet)	**99**
3. Number of findings not verified as corrected within one year [(1) minus (2)]	**40**

FFY2009 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance and/or Not Corrected):

4. Number of FFY2009 findings not timely corrected (same as the number from (3) above)	**40**

5. Number of FFY2009 findings the State has verified as corrected beyond the one-year timeline ("subsequent correction")	**26**
6. Number of FFY2009 findings not yet verified as corrected [(4) minus (5)]	**14**

Description of Other Areas of Noncompliance from B-15 Worksheet:
56 of the 139 findings of noncompliance made in FFY 2009 are indicated in the B-15 Worksheet as "OTHER AREAS OF NONCOMPLANCE: Findings of non-compliance related to implementation of Maine's Unified Special Education Regulation". Those findings are related to documentation in the following areas:

6	CDS Sites (age 3 through 5)	**9**
	Written notice of initial referral	4
	Receipt of consent for initial evaluation	5

24	School aged LEAs	**47**
	Policies and Procedures	9
	Effective Response	13
	Local Entitlement	13
	ICAP	8
	Personnel Survey	4

Verification of Correction for findings of noncompliance identified in FFY2009 (either timely or subsequent):
Prior to considering any finding from FFY2009 corrected, CDS State IEU/MDOE verified that each regional site/LEA with noncompliance: (1) was correctly implementing specific regulatory requirements (IDEA and MUSER) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring, desk audits or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site/LEA, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY2009 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):
Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e performed on-site file reviews, verified subsequent data submitted through regional site self-assessments and compliance reports submitted for each regional site. To verify that each LEA was correctly implementing the requirements, MDOE reviewed subsequent updated data and verified subsequent data submitted through LEA self-assessments. The time period for which each regional site/LEA was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit corrective action plans. To verifying correction according to the OSEP 09-02 Memorandum, MDOE also complied with the requirements to account for all instances of noncompliance identified through self-assessments and other monitoring procedures; identify the level, location, and root cause(s) of all noncompliance; and require any LEA with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs.

Actions Taken if Noncompliance Not Corrected:

For FFY2009 findings that remain uncorrected the CDS State IEU has provide technical assistance to the regional sites on what is monitored, how to correct the outstanding finding and the steps taken to verify the correction. Regional sites with outstanding findings were required to update their Corrective Action Plan (CAP).

For FFY2009 findings that remain uncorrected as of submission of this report, the CDS State IEU will enforce sanctions on the regional sites with a strict timeline to ensure improvement and correction. CAPs will be revised with input from the CDS State IEU Management Team to ensure an increased level of detail and attention. The CDS State IEU will mandate indicator and site specific action steps when necessary. Site specific recommendations will be made by the CDS State IEU State Director on staffing patters, procedures and or budget refinements.

On May 2 and 3, 2012 Susan Hayes and Susan Marks from NERRC will provide on-site support to Maine Part C and B staff to:

- Review all outstanding uncorrected findings of non-compliance (both Part C and B)
- Review correction efforts/corrective actions taken to date with local sites and LEAs related to these findings of non-compliance
- Analyze the effectiveness of existing correction efforts and corrective actions
- Explore additional progressively stringent corrective actions/sanctions including those employed by other states
- Strategize how best to apply these new corrective actions to local sites/LEAs with outstanding non-compliance
- Develop a plan (including specific corrective actions or sanctions to be utilized, timelines, staff responsibilities for follow-up, and communication to local sites/LEAs) to implement new corrective actions with local sites/LEAs to ensure correction of all outstanding non-compliance
- Re-evaluate the Maine process for verifying correction of non-compliance to see what overall improvements can be made to ensure future timely correction of any new findings of non-compliance

As part of this two-day meeting, the Maine CDS state team, NERRC, and representatives from OSEP will also speak with CDS Regional Site Directors and program leads through the scheduled May 3rd "Lunch and Learn" teleconference about the importance of correction of non-compliance and the state's plan for ensuring this happens in a timely manner going forward.

Correction of Remaining FFY2008 Findings of Noncompliance (if applicable)
If the State reported less than 100% for this indicator in its FFY2009 APR and did not report in the FFY2009 APR that the remaining FFY2008 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY2008 findings noted in OSEP's FFY2009 APR response table for this indicator	13
2. Number of remaining FFY2008 findings the State has verified as corrected	1
3. Number of remaining FFY2008 findings the State has NOT verified as corrected [(1) minus (2)]	12

Actions Taken if Noncompliance Not Corrected:
For FFY2008 findings that remain uncorrected the CDS State IEU has provide technical assistance to the regional sites on what is monitored, how to correct the outstanding finding and the steps taken to verify the correction. Regional sites with outstanding findings were required to update their Corrective Action Plan (CAP).

For FFY2008 findings that remain uncorrected as of submission of this report, the CDS State IEU will enforce sanctions on the regional sites with a strict timeline to ensure improvement and correction. CAPs will be revised with input from the CDS State IEU Management Team to ensure an increased level of detail and attention. The CDS State IEU will mandate indicator and site specific action steps when necessary. Site specific recommendations will be made by the CDS State IEU State Director on staffing patters, procedures and or budget refinements.
On May 2 and 3, 2012 Susan Hayes and Susan Marks from NERRC will provide on-site support to Maine Part C and B staff to:

- Review all outstanding uncorrected findings of non-compliance (both Part C and B)
- Review correction efforts/corrective actions taken to date with local sites and LEAs related to these findings of non-compliance
- Analyze the effectiveness of existing correction efforts and corrective actions
- Explore additional progressively stringent corrective actions/sanctions including those employed by other states
- Strategize how best to apply these new corrective actions to local sites/LEAs with outstanding non-compliance
- Develop a plan (including specific corrective actions or sanctions to be utilized, timelines, staff responsibilities for follow-up, and communication to local sites/LEAs) to implement new corrective actions with local sites/LEAs to ensure correction of all outstanding non-compliance

- Re-evaluate the Maine process for verifying correction of non-compliance to see what overall improvements can be made to ensure future timely correction of any new findings of non-compliance

As part of this two-day meeting, the Maine CDS state team, NERRC, and representatives from OSEP will also speak with CDS Regional Site Directors and program leads through the scheduled May 3rd "Lunch and Learn" teleconference about the importance of correction of non-compliance and the state's plan for ensuring this happens in a timely manner going forward.

Verification of Correction of FFY 2008 findings (either timely or subsequent)
Prior to considering any finding from FFY 2008 corrected, CDS State IEU verified that each regional site with noncompliance: (1) was correctly implementing the specific regulatory requirements (IDEA and MUSER) (i.e., achieved 100% compliance) based on updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the regional site, consistent with OSEP Memorandum 09-02, dated October 17, 2008 (OSEP Memo 09-02).

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2008 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):

Specifically, to verify that each regional site was correctly implementing the requirements, CDS State IEU reviewed subsequent updated data from Case-e, performed on-site file reviews, and verified subsequent data submitted through regional site self-assessments and compliance reports submitted by each regional site. The time period for which each program was required to demonstrate 100% compliance varied based on the level of noncompliance identified in the program.

For timeline specific requirements, CDS also verified that the action occurred, although late. For other requirements, CDS verified correction for each child.

In addition to verifying correction according to the OSEP 09-02 Memorandum, CDS State IEU also complied with the requirements to account for all instances of noncompliance identified through its database as well as on-site monitoring and other monitoring procedures; identify the level, location (regional site), and root cause(s) of all noncompliance; and require any regional site with policies, procedures, or practices that contributed to the noncompliance to revise those policies, procedures, or practices and submit CAPs.

Correction of Remaining FFY2007 Findings of Noncompliance (if applicable)
If the State reported less than 100% for this indicator in its FFY2009 APR and did not report in the FFY2009 APR that the remaining FFY2007 findings were subsequently corrected, provide the information below:

1. Number of remaining FFY2007 findings noted in OSEP's FFY2009 APR	19

response table for this indicator	
2. Number of remaining FFY2007 findings the State has verified as corrected	0
3. Number of remaining FFY2007 findings the State has NOT verified as corrected [(1) minus (2)]	19

Actions Taken if Noncompliance Not Corrected:
For FFY2007 findings that remain uncorrected the CDS State IEU has provide technical assistance to the regional sites on what is monitored, how to correct the outstanding finding and the steps taken to verify the correction. Regional sites with outstanding findings were required to update their Corrective Action Plan (CAP).

For FFY2007 findings that remain uncorrected as of submission of this report, the CDS State IEU will enforce sanctions on the regional sites with a strict timeline to ensure improvement and correction. CAPs will be revised with input from the CDS State IEU Management Team to ensure an increased level of detail and attention. The CDS State IEU will mandate indicator and site specific action steps when necessary. Site specific recommendations will be made by the CDS State IEU State Director on staffing patters, procedures and or budget refinements.
On May 2 and 3, 2012 Susan Hayes and Susan Marks from NERRC will provide on-site support to Maine Part C and B staff to:

- Review all outstanding uncorrected findings of non-compliance (both Part C and B)
- Review correction efforts/corrective actions taken to date with local sites and LEAs related to these findings of non-compliance
- Analyze the effectiveness of existing correction efforts and corrective actions
- Explore additional progressively stringent corrective actions/sanctions including those employed by other states
- Strategize how best to apply these new corrective actions to local sites/LEAs with outstanding non-compliance
- Develop a plan (including specific corrective actions or sanctions to be utilized, timelines, staff responsibilities for follow-up, and communication to local sites/LEAs) to implement new corrective actions with local sites/LEAs to ensure correction of all outstanding non-compliance
- Re-evaluate the Maine process for verifying correction of non-compliance to see what overall improvements can be made to ensure future timely correction of any new findings of non-compliance

As part of this two-day meeting, the Maine CDS state team, NERRC, and representatives from OSEP will also speak with CDS Regional Site Directors and program leads through the scheduled May 3rd "Lunch and Learn" teleconference about the importance of correction of non-compliance and the state's plan for ensuring this happens in a timely manner going forward.

Verification of Correction of FFY 2007 findings (either timely or subsequent):

CDS State IEU was unable to verify correction of non-compliance for indicators in FFY 2007.

Describe the specific actions that the State took to verify the correction of findings of noncompliance identified in FFY 2007 (including any revisions to general supervision procedures, technical assistance provided and/or any enforcement actions that were taken):

CDS State IEU was unable to verify correction of non-compliance for indicators in FFY 2007.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Changes were made to the "Overview of Issue/Description of System or Process" section of indicator 15 in the SPP to define the method used to select districts for program review monitoring.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 16: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint, or because the parent (or individual or organization) and the public agency agree to extend the time to engage in mediation or other alternative means of dispute resolution, if available in the State.

Measurement:

Table 7 data, section A

SECTION A: Written, Signed Complaints	
(1) Total number of written, signed complaints filed	63
(1.1) Complaints with reports issued	**24**
(a) Reports with findings of non-compliance	13
(b) Reports within timeline	**13**
(c) Reports within extended timelines	**11**
(1.2) Complaints pending	0
(a) Complaints pending a due process hearing	0
(1.3) Complaints withdrawn or dismissed	39

Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100 = **[(13+11)/24]*100 = 100**

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
100%	*100%*	**100%**

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY2010:

This measure met the target. One hundred percent of signed written complaints with reports issued were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint. Thirteen of the 24 complaints with reports issued were resolved within timelines without extension. Cases extended due to exceptional circumstances met the guidelines provided by the Due Process Office (DPO) for consideration of requests for extension.

As had been planned in the SPP, the DPO and the stakeholder group review cases monthly for closure timelines and consideration of support requirements. The SPP stakeholder group reviews case summaries and outcomes with members of the DPO to discuss procedural safeguards, support requirements, and opportunities for systemic improvement. The summaries are also posted on our website (http://www.state.me.us/education/speced/dueprocess/2009Complaints.html) in redacted form for parents and others in the public to review. Data reports of case progress and follow-up actions are produced interactively by DPO personnel using the case management database for use in their daily activities and in their presentations to stakeholder and interested parties. All of these activities have combined to heighten awareness of the timeline requirement and have improved case management through appropriate visibility and review.

Complaint investigation reports, procedures, policies and forms are available electronically on the due process website:
http://www.state.me.us/education/speced/dueprocess/index.htm

During FFY2010, Maine reported 13 complaint investigations with findings. Each of the corrective actions was tracked in a database and followed to completion with DPO overseeing the responsible LEA's completion. Each of the findings was corrected within the required 12 months and the closures have been reported among the findings corrected in indicator 15 of this report.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 17: Percent of adjudicated due process hearing requests that were adjudicated within the 45-day timeline or a timeline that is properly extended by the hearing officer at the request of either party or in the case of an expedited hearing, within the required timelines.

Measurement:

Table 7 data, section C

SECTION C: Due Process Complaints	
(3) Total number of due process complaints filed	30
(3.1) Resolution meetings	10
(a) Written settlement agreements reached through resolution meetings	2
(3.2) Hearings fully adjudicated	**2**
(a) Decisions within timeline (include expedited)	**0**
(b) Decisions within extended timeline	**2**
(3.3) Due process complaints pending	2
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing)	26

Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100 = **[(0+2)/2]*100 = 100**

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
n/a	*100%*	**100%**

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY2010:

This measure met the target. The DPO and the stakeholder group review case status and progress regularly to ensure timeline compliance.

The DPO and the stakeholder group review cases monthly for closure timelines and consideration of support requirements. The SPP stakeholder group reviews case summaries and outcomes with members of the DPO to discuss procedural safeguards, support requirements, and opportunities for systemic improvement. The summaries are also posted on our website (http://www.maine.gov/education/speced/dueprocess/2011hearings/index.html) in redacted form for parents and others in the public to review. Data reports of case progress and follow-up actions are produced interactively by DPO personnel using

the case management database for use in their daily activities and in their presentations to stakeholder and interested parties. All of these activities have combined to heighten awareness of the timeline requirement and have improved case management through appropriate visibility and review.

Hearing reports, policies and forms are available electronically on the due process website: http://www.state.me.us/education/speced/dueprocess/index.htm

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

An error was corrected in the improvement activity; the word “mediation” was replaced with the word “hearing”.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 18: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements.

Measurement:

Table 7 data, section C

SECTION C: Due Process Complaints	
(3) Total number of due process complaints filed	30
(3.1) Resolution meetings	**10**
(a) Written settlement agreements reached through resolution meetings	**2**
(3.2) Hearings fully adjudicated	2
(a) Decisions within timeline (include expedited)	0
(b) Decisions within extended timeline	2
(3.3) Due process complaints pending	2
(3.4) Due process complaints withdrawn or dismissed (including resolved without a hearing)	26

Percent = [(3.1(a) divided by 3.1)] times 100 **= [(2/10)]*100 = 20**

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
25%	*58%*	**20%**

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY2010:

Ten cases went to resolution session, two resulted in settlement agreements. This measure did not meet the target.

The DPO produced "Resolution Sessions, A Guide for Parents and Educators" to help parents and educators better understand the resolution session as one of the ways to resolve special education disputes. The handbook is provided to parties involved in a parentally-requested due process hearing.

The due process website has been significantly upgraded this year to provide a number of new documents and technical assistance to the public. The resolution session document and forms are available electronically on the due process website: http://www.state.me.us/education/speced/dueprocess/index.htm

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Minor changes were made to the description to place a date on past events that are no longer current.

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 19: Percent of mediations held that resulted in mediation agreements.

Measurement:

Table 7 data, section B

SECTION B: Mediation Requests	
(2) Total number of mediation requests received through all dispute resolution processes	113
(2.1) Mediations held	**51**
(a) Mediations held related to due process complaints	15
(i) Mediation agreements related to due process complaints	**9**
(b) Mediations held not related to due process complaints	36
(i) Mediation agreements not related to due process complaints	**28**
(2.2) Mediations pending	0
(2.3) Mediations withdrawn or not held	62

Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100 **= [(9+28)/51]*100 = 73**

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
77%	*85%*	**73%**

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY2010:

This measure did not meet the target.

When a dispute resolution request is received for a complaint investigation, hearing or expedited hearing, and the initiating party has indicated an unwillingness to participate in mediation, DPO staff follow up with the initiating party to discuss the benefits of mediation. Information is provided on: the difference between mediation and an IEP meeting; the expertise, knowledge and objectivity of the mediators on the DPO roster; the wide scope of issues that can be mediated; and the constructive/positive effect participation in mediation can have on the communication between the parties.

The mediation handbook is available electronically on the due process website: http://www.state.me.us/education/speced/dueprocess/index.htm

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

Part B State Annual Performance Report (APR) for FFY2010

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part B / General Supervision

Indicator 20: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

Measurement: See Indicator 20 Scoring Rubric

Actual Target Data for FFY2010:

FFY2009 Performance	*FFY2010 Target*	FFY2010 Performance
98.8%	*100%*	**90%**

Additional Information required by the June 20, 2011 OSEP APR Response Table for this indicator:

Statement from the Response Table	State's Response
OSEP appreciates the State's efforts and looks forward to reviewing in the FFY2010 APR, due February 1, 2012, the State's data demonstrating that it is in compliance with the timely and accurate data reporting requirements in IDEA sections 616 and 618 and 34 CFR §§76.720 and 300.601(b). In reporting on Indicator 20 in the FFY2010 APR, the State must use the Indicator 20 Data Rubric. If the State does not report 100% compliance in the FFY2010 APR, the State must review its improvement activities and revise them, if necessary.	Maine has made significant changes in the support systems and data validation processes regarding it 618 data submissions through EDFacts. While the data do not demonstrate compliance, the data requirements in the new formats are understood and are being corrected so that future reports will be both timely and complete.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY2010:

Maine is submitting most of its 618 data via EDFacts, but continues to submit Table 7 using the Data Accountability Center DTS workbook. The data validation procedure has been expanded to perform a double-check of the EDFacts data by entering the data into the DTS formats to ensure compatibility. Reports have been

developed to permit review of year-to-year changes in data in anticipation of clarification requests or to highlight where data notes may be necessary. These steps have improved data quality and have prepared the State to resolve data issues before the data are submitted.

Part B Indicator 20 Data Rubric (continued on next page)

Part B Indicator 20 - SPP/APR Data			
APR Indicator	**Valid and reliable**	**Correct calculation**	**Total**
1	1		1
2	1		1
3A	1	1	2
3B	1	1	2
3C	1	1	2
4A	1	1	2
4B	1	1	2
5	1	1	2
7	1	1	2
8	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	1	1	2
13	1	1	2
14	1	1	2
15	1	1	2
16	1	1	2
17	1	1	2
18	1	1	2
19	1	1	2
		Subtotal	40
APR Score Calculation	**Timely Submission Points** - If the FFY2009 APR was submitted on-time, place the number 5 in the cell on the right.		5
	Grand Total – (Sum of the subtotal and Timely Submission Points) =		45.00

Part B Indicator 20 - 618 Data					
Table	**Timely**	**Complete Data**	**Passed Edit Check**	**Responded to Data Note Requests**	**Total**
Table 1 – Child Count Due Date: 2/1/11	1	1	0	N/A	2
Table 2 – Personnel Due Date: 11/1/11	0	1	1	N/A	2
Table 3 – Ed. Environments Due Date: 2/1/11	1	1	1	N/A	3
Table 4 – Exiting Due Date: 11/1/11	0	1	1	N/A	2
Table 5 – Discipline Due Date: 11/1/11	0	1	1	N/A	2
Table 6 – State Assessment Due Date: 2/1/11	1	N/A	N/A	N/A	1
Table 7 – Dispute Resolution Due Date: 11/1/10	1	1	1	N/A	3
Table 8 MOE/CEIS Due Date: 5/1/11	1	N/A	N/A	N/A	1
				Subtotal	16
618 Score Calculation			**Grand Total** (Subtotal X 2.143)=		32.73

Indicator #20 Calculation	
A. APR Grand Total	45.00
B. 618 Grand Total	32.73
C. APR Grand Total (A) + 618 Grand Total (B) =	77.73
Total N/A in APR	0
Total N/A in 618*	4.0908
Base	**85.91**
D. Subtotal (C divided by Base) =	0.905
E. Indicator Score (Subtotal D x 100) =	90.48

* Note any cell marked N/A will decrease the denominator by 1 for APR and 2.045 for 618

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY2010:

GSST and the stakeholder group have reviewed the improvement activities for indicator 20.