

June 11, 2021

██████████ ██████████  
Special Education Director  
Fremont County School District #21  
90 Ethete Road  
Fort Washakie, WY 82514

Dear ██████████:

In order to address the IDEA general supervision requirements [§300.600] which affect educational results and functional outcomes for children with disabilities, the Special Education Programs Division of the Wyoming Department of Education (WDE) completed a verification review of Fremont County School District #21 (Fremont #21) on April 26-30, 2021. The purpose of the verification was to determine whether the areas of noncompliance identified through the Special Monitoring report of March 20, 2020 had been fully corrected. Areas identified in the original report were: 1. Evaluation and eligibility procedures, 2. Related services, 3. IEP goals, and 4. Least Restrictive Environment (LRE).

During the review, the WDE re-examined the identified areas of noncompliance addressed in the district's Corrective Action Plan (CAP). The results of the verification visit indicate that the district has not fully corrected these areas of noncompliance. Evidence collected through file reviews suggested that multiple students are still affected by similar types of noncompliance, originally identified in the district's Special Monitoring report. Due to this continued noncompliance, the WDE and Fremont County School District #21 will now enter into a compliance agreement. This compliance agreement will stipulate a plan of action for correcting the remaining non-compliance.

A sample of 10 students from the verification files, across all grade bands, was reviewed to gather data. The following areas of previously identified non-compliance were found to be a continuing concern within Fremont #21:

- The initial file review indicated non-compliance in the linking of needs identified in the evaluation and the services being provided to students. 5 of the 10 files were found to still contain misalignment within the file, despite a new evaluation having been conducted after the initial findings had been reported. [34. C.F.R. §300.304]
- The second area of non-compliance from the initial file review indicated concerns with annual goals. The baselines did not contain enough data to determine a trajectory for the goal or progress during the progress monitoring phase. All goals should contain baseline data that is measurable and specific to the target that is reflected in the PLAAFP. While in many cases the goal is based on a state standard, the baseline does not give enough information to understand what the student's current level of proficiency is to assure the student is making progress. 6 of the 10 sample files indicated continued non-compliance as it relates to specific baseline data tied to the target. [34. C.F.R. §300.320]

- The initial file review also indicated non-compliance in the area of Least Restrictive Environment. It was found that many IEPs are written for four(or less) days of services per week even though Fremont #21 is in session five days per week. During the initial interview process, it was explained that this is due to the students having a shortened day on Wednesday. However, some staff stated that the IEP documents the minimum amount of time that they would offer and some students receive more services than is detailed in the IEP. This practice causes concerns because it does not accurately reflect the learning environment where the student is receiving services. The IEP should accurately reflect the amount of services a student receives. A student receiving more service time than indicated can be a violation of student rights just as receiving less than what is indicated in the IEP. There were no files within the sample of ten that reflected services being offered to students 5 days per week and through discussion with staff, it was determined that this practice remains in place to account for potential absences, field trips, etc. and that students may be provided with additional service time if deemed necessary. [34. C.F.R. §300.114]
- The final finding area of non-compliance indicated in the original monitoring report was in regards to related services. Several of the related services at Fremont #21 were being provided in isolation of the special education and general education needs of the student. The lack of collaboration resulted in nearly all related services being provided within a pull-out environment. Currently, due to the COVID-19 pandemic and the ever-changing reopening status of the district, FCSD #21 has elected to document their service locations as "gen ed classroom/resource room/virtual". Because of this, it is difficult to determine if this original area of non-compliance has been corrected and therefore the WDE will continue to monitor and work with the district to establish if non-compliance has been corrected. [34. C.F.R. §300.34]

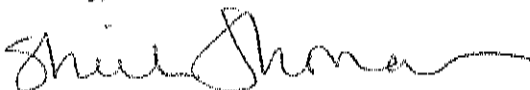
Through the verification process, the following file was identified as an individual finding. The student's WISER ID number is listed below, along with the corresponding area of concern, noted during the review. The district is required to take action to correct the individual finding of noncompliance by reconvening the student's IEP team and considering all areas of concern in order to ensure the provision of FAPE in accordance with §300.101.

WISER ID [REDACTED]

- Evidence from the file review indicated noncompliance due to a counseling service being listed as a supplementary aid and service without direct service minutes or goals. The district is responsible to provide services including related services necessary for a student to make progress toward annual goals. The special education team should reconvene to determine appropriate related services and/or goals tied to counseling.

Although further correction is necessary, the WDE acknowledges the efforts of the district and that have resulted in movement toward successful correction of the noncompliance identified in the report. The WDE recognizes the challenges districts face to correct systemic findings of any nature and looks forward to assisting Fremont #21 as it works to make further improvements and ensure positive outcomes for its students with disabilities.

Sincerely,



Sheila Thomalla  
General Supervision and Monitoring Team Supervisor

Cc: [REDACTED] Superintendent, Fremont County School District #21  
Margee Robertson, Special Education Programs Director, WDE  
Susan Shipley, Continuous Improvement Supervisor, WDE