



**Individuals with Disabilities Education Act  
Results Driven Accountability  
Monitoring Report  
for  
Goshen County School District #1**

**Monitoring Dates: October 4 - October 12, 2021**

**Report Date: 1/21/22**

**Report Created by: Wyoming Department of Education,  
Special Education Programs Division**

1/21/22

██████████, Director of Special Services  
Goshen County School District #1  
626 West 25th Avenue  
Torrington, WY 82240

Dear Special Education Director ██████████,

The Wyoming Department of Education (WDE) Special Education Programs team would like to thank you for your assistance during your recent Results Driven Accountability (RDA) monitoring.

With respect to the monitoring process, the state's federal requirements are to focus upon and address the areas of compliance within IDEA 2004 [34 C.F.R. §300.600] that most directly affect educational results and functional outcomes for children with disabilities. That focus is consistent with the mission of Goshen County School District #1 in the commitment to prepare each student to become a career and college ready citizen by being a partner with families and the community to provide an engaging and challenging education in a safe and positive environment.

It is the WDE's goal that this report and the implementation of the ensuing **Compliance Agreement** will guide the district as it seeks to improve its own system-wide delivery of special education services. The findings of noncompliance detailed in the report are not likely to be corrected through any quick fix, and you may notice that systemic findings are not tied directly to individual students, teachers, or groups of students. Correction of these deeper issues will require a more global approach and requires the cooperation of, not only special education staff, but general education staff, building leadership, and district administration as well. To that end, the WDE would like to offer technical assistance to Goshen County School District #1 in understanding the report and the required Compliance Agreement.

Again, thank you for your collaboration with the monitoring team and for your continued commitment to children with disabilities. We look forward to working with you and your team over the next twelve months as this Compliance Agreement is put into effect.

Sincerely,



Sheila Thomalla , Monitoring Team Supervisor  
Division of Special Education Programs, Wyoming Department of Education

cc: ██████████, Superintendent, Goshen County School District #1  
Margee Robertson, Director of Special Education, WDE  
Susan Shipley, Special Education Systems Administrator, WDE

Enclosures: Verification Monitoring Report; Compliance Agreement



Opportunity Through Education

Jillian Balow – *Superintendent of Public Instruction*

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The Wyoming Department of Education, Special Education Programs (WDE) is the state educational agency responsible for special education compliance as granted by Part B of the Individuals with Disabilities Education Act (IDEA) 34 C.F.R. §300.149. In order to address the IDEA general supervision requirements 34 C.F.R. §300.600, which effect educational results and functional outcomes for children with disabilities, the WDE completed a program review of Goshen County School District #1 (Goshen 1) Special Education services upon being selected for Results Driven Accountability (RDA) monitoring. During the initial review, WDE and the Goshen #1 team elected to monitor a sample of special education records in the areas of Free and Appropriate Public Education (FAPE), Extended School Year Services (ESY), and Least Restrictive Environment (LRE) to determine potential noncompliance with IDEA, federal regulation, and Wyoming Special Education Rules (Chapter 7).

### **Summary of Program Review**

Selection for RDA monitoring occurred during school year 2017-2018. A data drill down and creation of monitoring hypotheses was completed April 8, 2019. A sample of 54 files were reviewed by WDE, September 1 - October 5, 2020 with the district being notified of the results on November 24, 2020. At this time, Goshen 1 was found to be noncompliant in 3 areas:

1. Prior Written Notice: Special education files lacked accurate documentation regarding proposed or refuted actions suggesting teams did not consistently provide Prior Written Notice to parents.
2. Documentation of students' needs/individualization: Individual Education Programs (IEP) at Goshen 1 did not always document student needs found through comprehensive evaluations, leading to lack of individualization.
3. Progress Monitoring: Progress monitoring processes at Goshen 1 were limited, incomplete, or did not result in periodic monitoring of data.

A Corrective Action Plan (CAP) went into effect December 18, 2020. The school district had one year to complete the agreed upon action steps to remediate noncompliance, ensure changed practices to maintain IDEA compliance in the future, and improve outcomes for students with disabilities.

### **Verification of Correction of Noncompliance**

The purpose of the current verification process is to determine whether the areas of noncompliance identified through the RDA monitoring have been fully corrected during CAP activities. The process does not duplicate findings of noncompliance prior to the 2020 review and focuses on correction subsequent to that review. A verification review of Goshen 1 was completed October 4, 2021. During this process, WDE reviewed 40 student files. 23 files were removed from the sample of 63 due to 1) the student no longer being an active student in Goshen 1 (8 files) or 2) no new IEP had been written since the initial monitoring process(13 files). The

40 files were reviewed for FAPE, specifically for the three areas of noncompliance from the initial monitoring.

### **Commendations**

It is apparent through interviews with teachers that programming for students with disabilities is more individualized than is evident on the IEP. During interviews, teachers discussed their students with passion and concern, asking questions regarding how to improve. Administration is aware of some areas of concern and is working on processes for improvement. Also, through CAP activity, it is evident that evaluation summaries have significantly improved and can now be a strong foundation to help teams build programs for students.

### **Findings**

**Area 1: Prior Written Notice** Citation: [34 C.F.R. §300.503] Prior notice by the public agency

According to 34 C.F.R § 300.503, LEAs are required to provide “written notice to parents of a child with a disability a reasonable time before the public agency” proposes or refuses a change in identification, evaluation, educational placement, or the provision of FAPE to the child.

The initial RDA monitoring review of files in Goshen 1 indicated a **lack of accurate documentation regarding proposed or refuted actions**. In addition, there was a lack of evidence suggesting that parents were receiving notice of such proposals **prior** to those actions being implemented. Finally, the lack of documentation resulted in **limited documentation of parent participation**. 3 individual cases were found with missing, blank, or incomplete PWNs. Processes were reported by team members, however, review found that these practices were not being implemented.

Verification monitoring indicates 15 files that were found to continue to show Prior Written Notice noncompliance. No PWNs were found to be missing. However, files show evidence that parents are not receiving written notice in a “reasonable time” **prior** to implementation of the IEP to review the proposed/refused change. Two files indicated the PWN date to be after the IEP service start date. Files were found to have PWNs dated the same day as the service start date, which is most often written as one day after the IEP meeting date. Files were also found to have PWN, IEP, service start dates, and in two instances Notice of Team Meeting, all with the same date. These practices do not allow parents reasonable time to review the proposals.

Interviews made clear that the timeline policy and process for IEPs including drafting, holding the meeting, finalizing, submitting to parents, and initiating the new IEP, creates a system by which IEPs could be modified after the date of a PWN. PWNs could be issued prior to the finalization of the IEP as the IEP is submitted for review then goes back to the case manager - all after the meeting and submission of the PWN to parents. There are no records indicating that parents are receiving notice of modifications after these edits.

In addition, PWNs do not contain adequate information describing the proposed changes/refusals in order for parents to have a clear idea of the proposals. Examples include: WISER [REDACTED] PWN does not discuss changes made, only states an IEP meeting is needed to create a new IEP.

WISER [REDACTED] PWN does not discuss reevaluation of eligibility category after an evaluation. While several PWNs had more specifics and descriptive language than found during initial monitoring, most reviewed did not clearly provide descriptions and explanations for parents as required by 34 C.F.R §300.503(b), thereby **limiting parent participation in the IEP process.**

**Area 2: Identified Needs Reflected In the IEP** Citation: [34 C.F.R. §300.320] Definition of Individualized Education Program

According to 34 C.F.R. §300.320, IEPs must include the child's present levels of academic achievement and functional performance (PLAAFP) including 1) how the disability affects involvement and progress in the general education curriculum and appropriate activities, 2) measurable goals that meet the child's needs to enable such involvement and progress, as well as other educational needs that result, and 3) supplementary aids and services to enable the child to advance toward attaining goals as well as be involved in and make progress in the general education curriculum and other activities. Identifying how a student's disability impacts their education involves pinpointing of individual needs and is a foundation to providing FAPE.

Initial RDA monitoring of Goshen 1 found concerns with documentation of students' needs as determined through comprehensive evaluations within the PLAAFP, measurable goals, or supplemental aids and services. Needs found through evaluation were not addressed in educational programming. Goals did not contain baseline data that were measurable and specific to targets reflected in the PLAAFP. Supplemental aids and services were not considered based on needs. Needs no longer a concern were not highlighted in PLAAFP. Needs were frequently not addressed as part of annual review of individualized program. Needs identified through evaluations were left out of the PLAAFP on subsequent IEP reviews. Adequate progress was difficult to determine due to all or specific needs not being addressed on the IEP. Additionally, middle and high school grade bands were found to have similar supplementary aids and service packages indicating a concern regarding individualization. Predetermination of services was a concern at the elementary level.

**Identified needs not being addressed remains a concern.** Verification monitoring has resulted in 22 files being flagged for student needs not being addressed. Evaluation summaries include detailed information about student needs; however, this is left off of the PLAAFP and subsequent programming. This applies consistently to social-emotional needs and/or executive functioning skills, even when there is testing, parent or teacher concerns, or other evidence to show a need. Occasionally a goal exists in these areas; however it is not specific to the specially designed instructional needs of the child.

Also, analysis of academic and learning profile needs are not included in the PLAAFP leading to programming of goals and accommodations that are not individualized or specific enough to meet the student's needs. For example, processing speed, memory, or analysis of skill deficits in academic areas is not carried over to programming either in goals or accommodations. An additional concern is the lack of sufficient information to understand a student's baselines and therefore create individualized goals as well as carry through or develop recommended and individualized accommodations.

In addition, there are minimal to no parental concerns and/or discussion about how to address the concerns or if these concerns affect the education of the student documented on the IEP or PWN. Educational concerns are often a list of qualifying areas without specifics. PLAAFPs are often identical from year to year and contain evaluation results and test scores with little interpretation to the needs of the child. General curriculum information is at times present; however, discussion of teacher input regarding student functioning in the classrooms and curriculum is minimal.

Finally, lack of progress on goals is not being addressed consistently. Lack of progress is often linked to the needs of the child not being identified, such as specific skill deficits or social/emotional, executive functioning or other needs.

Examples of needs identified in evaluation, but not present in IEP:

- WISER ID [REDACTED]: Highly elevated Conners and BASC assessment scores. Discrepancies shown in math and written language which is not discussed.
- WISER ID [REDACTED]: PWN indicates a FBA to be done and a behavior plan, however plan is not evident.
- WISER ID [REDACTED]: Comprehension and receptive language concerns are evidenced in the reevaluation, however, are stated as strengths on IEP. Executive functioning, behavior, social/emotional, memory, specific academics deficits, math concerns, and teacher concerns not addressed. There are no parent concerns indicated.
- WISER ID [REDACTED]: Evaluation contained recommendations for accommodations and/or specially designed instruction, but not included on IEP. Supports not provided for auditory comprehension and oral language processing and recall/memory deficits.
- WISER ID [REDACTED]: Student is diagnosed with Fetal Alcohol Syndrome and Reactive Attachment Disorder. Detailed parent concerns and areas of significant concerns on multiple areas of the BASC not addressed including withdrawal, impulsivity, peer relations, engagement, and use of incentives.
- WISER ID [REDACTED]: Student demonstrates decoding deficits, but goal is fluency. Presents with executive functioning difficulties. PLAAFP indicates accommodations not carried to supplementary aids and services page.

### **Area 3: Monitoring Progress** Citation: [34 C.F.R. §300.320 (3)(i)(ii)]

As described in the initial monitoring report for Goshen 1, IDEA [34 C.F.R. §300.320(3) (i) (ii)] indicates “periodic reports on the progress the child is making toward meeting the annual goals (such as through the use of quarterly or other periodic reports, concurrent with the issuance of report cards) will be provided”. Tracking progress monitoring data to determine a student’s progress on goals is a checkpoint to determine if the current IEP and offering of FAPE is sufficient. Failure to complete such steps reduces the team’s ability to determine appropriateness of the IEP.

**Progress Monitoring remains a concern.** At least 11 files were found to be out of compliance in the area of Progress Monitoring. 10 files demonstrate progress reporting on skills not matched to the target. In addition, a lack of progress or faster than expected progress is not

consistently addressed as seen in 8 files.

Progress monitoring is made more difficult by the nature of how goals and objectives are written. 26 files were found to contain insufficient goals. Examples of concerns include 1) baselines not matching targets in either method of measurement or skill (24 files), 2) goals that are not clearly defined in scope, condition, criterion or specific skill deficit of the student, (18 files) 3) objectives spanning the length of the IEP (9 files).

### **1%Threshold**

As clarified in Ryder, R.E. (2017, May 16). *Requirements for the cap on the percentage of students who may be assessed with an alternate assessment aligned with alternate academic achievement standards.* [Memorandum}. Department of Education, ESEA section 1111(b)(2)(D)(i)(I) limits the total number of students with the most significant cognitive disabilities who are assessed statewide with an alternate assessment to 1.0 percent of the total number of students assessed. As described in 34 CFR 200.6(c)(3), WDE may not prohibit Goshen 1 from assessing more than 1.0 percent of its students with the WY ALT, however, WDE must require Goshen 1 to submit information to the WDE justifying the need to exceed the 1.0 percent threshold and is accountable to ensure the district is trained and using appropriate determination criteria.

Upon review of participation rates for the WY-ALT alternate state assessment, it has been determined that Goshen 1 is over the 1% Threshold for participation. At a rate of 2.2%, Goshen is testing at a significantly higher rate than other districts in the state of Wyoming (1.0%). Goshen 1 is also trending up as they were at 2.0% in 2019. 14 of the 22 students who took the WY-ALT in Goshen 1 scored proficient or higher in ELA and 13 in math. Two fourth graders, five eighth graders, and seven ninth and tenth graders took the test. 100% of grade four and eight students scored proficient in ELA. 100% of grade four math and 80% grade eight math. Only 42.85% and 28.57% ninth and tenth graders scored proficient in ELA and math respectively. This combined with the 1% threshold figure indicate a concern that Goshen 1 is not following WY-ALT participation guidance criteria.

### **Individual Findings**

#### **WISER:** [REDACTED]

The student failed vision screening for a number of years with evaluation paperwork indicating "needs to have a complete eye exam from a doctor." The current PWN states "The team discussed following up on vision screenings that had been recommended in the past to determine if it is impacting his current educational needs. The school will take these measures to get his vision tested" and that Dad is open to this. As per IEP, the counselor will be notified to help with getting this arranged. Through teacher interview it was determined that the counselor had been notified, but to date the eye exam has not taken place.

**WISER:** [REDACTED]

Student found to be court placed at St Joseph's Children's Home. WDE could not locate a Prior Written Notice indicating the court placement, his move to a residential facility and that his services had changed significantly. A paper copy was found in the hard file, however it was dated 3/24/21 but stated he was placed in St. Josephs 2/22/21. No description of reason. The Notice of Team Meeting was blank and it is unclear who/if someone from Goshen 1 attended the IEP meeting. The student has no academic goals or services. Student's Independent Living Goal, managing his Celiac's disease, was suspended while at St. Josephs. Therapy on current IEP at St Josephs are listed in supplemental aids and services instead of related services.

**WISER:** [REDACTED]

Student is coded as SL, however the MDE dated 3/18/19 indicates the team's recommendation was for the student to be labeled LD: "student with a learning disability primarily in the area of math" and SLD eligibility criteria form complete. Student transferred from another Wyoming school on 5/5/20 which indicates SL eligibility, SL is indicated on the current IEP, however the corresponding PWN indicates SLD. Current Prior Written Notice refers to a behavior plan, however no plan was found on file or follow up to FBA. Previous and recent suicide attempts not documented or addressed in IEP. Mention of outside counseling, but not on the IEP. Failing grades not addressed; PWN states "At the present time, the team feels that the student's disability should not prevent her from achieving grade-level curriculum standards."

**WISER:** [REDACTED]

The student has not made progress for several years. There does not seem to be direct instruction being provided to the student in the areas of need. The student is exhibiting increased concerns in the areas of need. Current services may be inadequate for his needs and do not include specialized instruction.

**WISER:** [REDACTED]

There is a concern that goals and services may not be addressing student needs in all areas and the calculation of the student's programming in light of those needs. The student does not understand basic sound/symbol relationships and has made minimal progress on goals over the past two years. However, the current reading goals require the student to meet grade level standards. Goals have been changed to be aligned with grade level standards, yet the student has failed to make progress on the prior years' goals. Similar concerns are seen with his writing goal. Current goals may not be addressing the student's skill deficits and his needs. The team also addressed needs with emotional regulation, especially when confronted with challenging tasks.. The student failed the vision screening 2 years in a row without his glasses. It was unclear to the reviewer if there were needs in the area of vision that needed to be addressed.

**Evidence must be submitted within 30 days of receiving this report to clear individual findings.**



## Recommendations

- Digital files do not contain all documents related to students' special education services. While documents were found in the paper files, errors and missing significant information have been found due to IEP teams relying on incomplete digital records (as in individual finding WISER [REDACTED]). This includes an example of the only copy of an outside evaluation being held with the teacher. WDE recommends Goshen 1 develop a system where all records are held in one location and all staff are made aware of this location.
- When a student is found to require speech/language services or have other communication needs, this needs to be indicated as a "Consideration of Special Factors" §300.324(a)(2). Files were found in which this special factor was not marked for students receiving speech/language services. WDE recommends that this procedure be clarified for all staff.

Although further correction is necessary, the WDE recognizes the efforts of the district to work toward correction of noncompliance over the past year. There have been many unique challenges facing all districts in the recent past; WDE acknowledges that correcting systemic findings of any nature is challenging in and of itself and especially so when compounded by unusual circumstances. The WDE is here to assist Goshen #1 as it continues to work on further improvements and ensure positive outcomes for students with disabilities. WDE will be in touch regarding the development of a Compliance Agreement and other next steps. As always, please feel free to contact WDE at any time.

Sincerely,



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General Supervision and Monitoring Team Supervisor  
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307-777-6468

CC: [REDACTED], Superintendent, Goshen County School District #1  
Margee Robertson, Special Education Programs Director, WDE  
Susan Shipley, Continuous Improvement Supervisor, WDE