**Part B Results-Driven Accountability**

# Local Determination Scoring Rubric for Federal Fiscal Year (FFY) 2021

## Overview

The Virginia Department of Education (VDOE) is required, pursuant to the 2006 federal implementing regulations for the *Individuals with Disabilities Education Improvement Act* (IDEA) at 34 C.F.R. §300.600(a)(2), to make a determination for each school division based on submitted Annual Performance Report (APR) data. States consider division performance on certain results and compliance indicators, including:

* Indicator 1: Graduation
* Statewide Assessments: Reading and Mathematics (Grades 3-8 and High School)
* Indicator 4B: Significant Discrepancy in the Rate of Suspension by Race or Ethnicity
* Indicator 9: Disproportionate Representation in Special Education and Related Services
* Indicator 10: Disproportionate Representation in Specific Disabilities Categories
* Indicator 11: Timeline for Eligibility
* Indicator 12: Part C to Part B Transition
* Indicator 13: Secondary Individualized Education Program (IEP) Goals and Transition Services
* General Supervision: Correction of noncompliance
* Accurate Data Submission: IDEA Part B Indicator Data submitted accurately
* Timely Data Submission: IDEA Part B Indicator Data submitted timely
* Fiscal Audit: No outstanding findings in regard to the use of IDEA Part B Funds

Local determinations are a way of designating the status of each local educational agency (LEA) into one of the following four categories, as outlined in Section 616(d) of IDEA:

* Meets Requirements
* Needs Assistance
* Needs Intervention
* Needs Substantial Intervention

### Results-Driven Accountability

Results-Driven Accountability (RDA) is intended to balance focus on improving educational results and outcomes for students with disabilities. RDA provides greater supports to LEAs   
in improving results for children and youth with disabilities, and their families. For additional information pertaining to Monitoring of IDEA Part B by the VDOE Department of Special Populations, visit the [Program Improvement](https://www.doe.virginia.gov/?navid=252) webpage.

### Symbol Key

Reference key for symbols used with data throughout this document.

| **Symbol** | **Definition** |
| --- | --- |
| % | Percent |
| ≥ | Greater than or equal to |
| ≤ | Less than or equal to |

## Criteria for Part B Results-Driven Accountability Matr­ix

### Local Determination and Division Performance (Results and Compliance)

The local determination is based on the school division’s (1) results for graduation and statewide assessments; (2) demonstration of substantial compliance with Indicators 4B, 9, 10, 11, 12, and 13; (3) correction of previously identified noncompliance within one year; (4) accurate and timely data submission; and (5) fiscal audit findings in regard to the use of IDEA Part B funds.  
Source: Data submission related to Part B of IDEA.

| **Determination** | **Performance Score** |
| --- | --- |
| Meets Requirements | ≥80.00% |
| Needs Assistance | 65.00-79.99% |
| Needs Intervention | 55.00-64.99% |
| Needs Substantial Intervention | ≤54.99% |

### Part B Results Indicators

#### Indicator 1: Graduation

Percentage of youth with IEPs exiting special education due to graduating with a regular high school diploma. Target: ≥71.24%. Source: Data submitted for the FFY 2021 SPP/APR.

| **Indicator 1 Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 4 | ≥71.24% |
| Does Not Meet Requirements | 3 | 61.24-71.23% |
| Does Not Meet Requirements | 2 | 51.24-61.23% |
| Does Not Meet Requirements | 1 | 41.24-51.23% |
| Does Not Meet Requirements | 0 | ≤41.23% |

#### Statewide Assessments

##### Participation: Reading and Mathematics

Percentage of students with disabilities participating in reading and mathematics statewide assessments. Source: Statewide Assessment Data - School Year 2021-2022

| **Participation Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 4 | ≥95.00% |
| Does Not Meet Requirements | 3 | 90.00-94.99% |
| Does Not Meet Requirements | 2 | 85.00-89.99% |
| Does Not Meet Requirements | 1 | 80.00-84.99% |
| Does Not Meet Requirements | 0 | ≤79.99% |

##### Performance: Reading

Performance of students with disabilities on reading statewide assessments. Source: Statewide Assessment Data - School Year 2021-2022

| **Performance: Reading Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 4 | ≥41.30% |
| Does Not Meet Requirements | 3 | 36.30-41.29% |
| Does Not Meet Requirements | 2 | 31.30-36.29% |
| Does Not Meet Requirements | 1 | 26.30-31.29% |
| Does Not Meet Requirements | 0 | ≤26.29% |

##### Performance: Mathematics

Performance of students with disabilities on mathematics statewide assessments.   
Source: Statewide Assessment Data - School Year 2021-2022

| **Performance: Mathematics Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 4 | ≥32.00% |
| Does Not Meet Requirements | 3 | 27.00-31.99% |
| Does Not Meet Requirements | 2 | 22.00-26.99% |
| Does Not Meet Requirements | 1 | 17.00-21.99% |
| Does Not Meet Requirements | 0 | ≤16.99% |

### Part B Compliance Indicators

#### Indicator 4B: Significant Discrepancy in the Rate of Suspension/Expulsion by Race or Ethnicity

School division identified with significant discrepancy, by race or ethnicity, in the rate of suspensions and expulsions of greater than ten days in a school year for children with IEPs; and policies, procedures, or practices that contribute to the significant discrepancy and do not comply with requirements relating to the development of IEPs, the use of positive behavioral interventions and supports, and procedural safeguards. Target: 0%. Source: Data submitted for the FFY 2021 SPP/APR.

| **Indicator 4B Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | LEA is not identified with significant discrepancy in the rate of suspensions and expulsions by race or ethnicity. |
| Does Not Meet Requirements | 0 | LEA is identified with significant discrepancy in the rate of suspensions and expulsions by race or ethnicity. |

#### Indicator 9: Disproportionate Representation in Special Education and Related Services

School division identified with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification.   
Target: 0%. Source: Data submitted for the FFY 2021 SPP/APR.

| **Indicator 9 Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | LEA does not have disproportionate representation due to inappropriate identification in any racial or ethnic group receiving special education  or related services. |
| Does Not Meet Requirements | 0 | LEA does have disproportionate representation due to inappropriate identification for a particular racial  or ethnic group receiving special education or related services. |

#### Indicator 10: Disproportionate Representation in Specific Disability Categories

School division identified with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification. Target: 0%.   
Source: Data submitted for the FFY 2021 SPP/APR.

| **Indicator 10 Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | LEA does not have disproportionate representation due to inappropriate identification in any racial or ethnic group in specific disability categories. |
| Does Not Meet Requirements | 0 | LEA does have disproportionate representation due to inappropriate identification for a particular racial  or ethnic group in specific disability categories. |

#### Indicator 11: Timeline for Eligibility

Percentage of children with parental consent for initial evaluation who were evaluated and eligibility was determined within 65 business days. Source: Data submitted for the   
FFY 2021 SPP/APR.

| **Indicator 11 Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | 100% |
| Does Not Meet Requirements | 1 | 90.00-99.99% |
| Does Not Meet Requirements | 0 | ≤89.99% |

#### Indicator 12: Part C to Part B Transition

Percentage of children referred by Part C prior to age three who are found eligible for Part B and who have an IEP developed and implemented by their third birthdays. Source: Data submitted for the FFY 2021 SPP/APR.

| **Indicator 12 Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | 100% |
| Does Not Meet Requirements | 1 | 90.00-99.99% |
| Does Not Meet Requirements | 0 | ≤89.99% |

#### Indicator 13: Secondary IEP Goals and Transition Services

Percentage of youth 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. Source: Data submitted for the FFY 2021 SPP/APR.

| **Indicator 13 Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | 100% |
| Does Not Meet Requirements | 1 | 90.00-99.99% |
| Does Not Meet Requirements | 0 | ≤89.99% |

#### General Supervision

School division has no uncorrected noncompliance in general supervision of special education and related services. Source: The VDOE’s Office of Dispute Resolution and Office of Program Improvement (i.e., state complaints, due process hearings, and on-site monitoring)

| **General Supervision Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | LEA has no uncorrected noncompliance from the previous year. |
| Does Not Meet Requirements | 1 | LEA has 1 instance of uncorrected noncompliance from the previous year. |
| Does Not Meet Requirements | 0 | LEA has ≥2 instances of uncorrected noncompliance from the previous year. |

#### Accurate Data Submission

School division submitted all indicator data reports accurately to the VDOE. Source: Data submission related to Part B of IDEA

| **Accurate Data Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | All reports submitted accurately. |
| Does Not Meet Requirements | 1 | 1-3 reports not submitted accurately. |
| Does Not Meet Requirements | 0 | ≥4 reports not submitted accurately, or ≥2 years of inaccurate reports. |

#### Timely Data Submission

School division submitted all indicator data in a timely manner to the VDOE. Source: Data submission related to Part B of IDEA

| **Timely Data Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | All reports submitted timely. |
| Does Not Meet Requirements | 1 | 1-3 reports not submitted timely. |
| Does Not Meet Requirements | 0 | ≥4 reports not submitted timely,  or ≥2 years of untimely reports. |

#### Fiscal Audit

School division had no outstanding fiscal audit findings in regard to the use of IDEA Part B funds. Source: The VDOE’s offices of Business and Risk Management; Accountability; and Special Education Finance and Budget.

| **Fiscal Audit Determination** | **Points** | **Criteria** |
| --- | --- | --- |
| Meets Requirements | 2 | No fiscal audit findings or fiscal audit findings have been addressed through a corrective action plan that has been reviewed and accepted by the VDOE. |
| Does Not Meet Requirements | 1 | Fiscal audit findings that have not been addressed through a corrective action plan, or fiscal audit findings that have not been reviewed and accepted by the VDOE. |
| Does Not Meet Requirements | 0 | Unresolved fiscal audit findings cited in the previous year’s audit. |