

**Georgia Part B  
Table B  
Previously Identified Issues**

Issue	State Submission	OSEP Analysis	Required Action
<p><b>Indicator 4A Suspension and expulsion rates (34 CFR §300.146)</b></p> <p>In its October 13, 2005 APR letter, OSEP noted that the State did not meet the requirements of 34 CFR §300.146, because the State reported that it “asks” (rather than “requires”) local school systems (LSSs) to review policies and practices, and only when the State selects them for focused monitoring (rather than whenever the Georgia Department of Education (GDOE) determines that there is a significant discrepancy in their discipline data). OSEP required GDOE to submit a plan to meet the requirements of 34 CFR §300.146 within a reasonable period of time not to exceed one year from the date that OSEP accepted the plan.</p>	<p>In its discussion of baseline data for Indicator 4A in the SPP, the State reported that LSSs identified by the State as having a significant discrepancy in the rates of suspensions and expulsions of children with disabilities are required to develop a Georgia Continuous Improvement Monitoring Process (GCIMP) plan to address suspension/expulsion that includes a review and revision of policies, procedures and practices. GDOE requires the LSS to submit this plan to the State, which will verify that policies, procedures and practices have been revised accordingly.</p>	<p>The State set forth a plan for ensuring compliance with the requirements of 34 CFR §300.146.</p>	<p>In its APR, due February 1, 2007, the State must provide evidence that it has implemented its plan and ensured compliance with the requirements of 34 CFR §300.146.</p>

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<p><b>Indicator 9 Disproportionality (34 CFR §300.755(b))</b></p> <p>OSEP's October 13, 2005 APR letter required the State to: (1) desist from enforcing the numerical performance goal in LSSs, regarding disproportionality; (2) focus its performance measures on the required reviews, and, if appropriate, revision of policies, procedures and practices; and (3) submit to OSEP data and information on the results of the State's review and, if appropriate, revisions of the policies, procedures and practices.</p>	<p>In its discussion of Indicator 9 in the SPP and the November 29, 2005 cover letter, GDOE reported that it changed the wording of its performance goal regarding disproportionality to read, "Decrease the disproportionate representation of students with disabilities due to inappropriate policies, procedures and practices."</p> <p>In its response to Indicator 9 in the SPP, GDOE reported that its review of data for the 2004-2005 school year identified 132 LSSs with a potential for disproportionality due to inappropriate policies, procedures and practices. The State reported that those systems underwent a review of their policies, procedures and practices and the State verified that any necessary changes were implemented.</p>	<p>The State reported that it revised its Performance Goal regarding disproportionality, that the LSSs had undergone reviews of policies procedures and practices, and that revisions were required, where appropriate, and verified by the State.</p>	<p>OSEP looks forward to reviewing the State's updated data for Indicator 9 in the APR, due February 1, 2007.</p>

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<b>Issue</b>	<b>State Submission</b>	<b>OSEP Analysis</b>	<b>Required Action</b>
<p><b>Indicator 12</b>  <b>Transition of children from Part C to preschool programs (34 CFR §300.132)</b>                      OSEP's October 13, 2005 APR letter required the State to submit responsive baseline data regarding the percentage of children referred by Part C prior to age three, who are found eligible for Part B, and have an IEP developed and implemented by their third birthdays.</p>	<p>In its discussion of Indicator 12 in the 2005 SPP, GDOE reported that 88% of the children referred by Part C prior to age three, that were found eligible for Part B, had an IEP developed and implemented by their third birthdays. (See Table A for the discussion of unreported data elements for Indicator 12.)</p>	<p>The State submitted the data required by OSEP's October 2005 letter. Those data indicated a compliance level of 88% for Indicator 12 in the SPP, specifically the requirement at 34 CFR §300.132(b) (Sect. 612(a)(9) of the IDEA), that an IEP or, if appropriate, an IFSP, has been developed and is being implemented by the third birthday of a child with a disability who participated in the Part C program and who will participate in a preschool program under Part B.</p>	<p>The State must ensure that this noncompliance is corrected within one year of its identification and include data in the APR, due February 1, 2007, that demonstrate compliance with this requirement. The State should review and, if necessary revise, its improvement strategies in the SPP to ensure they will enable the State to include data in the APR, that demonstrate full compliance with this requirement. Failure to demonstrate compliance at that time may affect OSEP's determination of the State's status under section 616(d) of the IDEA. (See Table A for the discussion of unreported data elements for Indicator 12.)</p>
<p><b>Indicator 15</b>  <b>General Supervision</b>                      In its FFY 2003 APR, GDOE indicated that correction plans are "determined when thirty percent of the records reviewed contain the same findings."                      OSEP's October 2005 response required GDOE to clarify that it is ensuring correction of all noncompliance identified through its records review process.</p>	<p>In its discussion of Indicator 15 in the 2005 SPP, the State reported that it conducts record reviews (as part of its technical assistance activity) with at least one-fifth of the LSSs in conjunction with a team from the LSS and that "areas for correction are determined to be systemic when thirty percent of the records reviewed contain the same findings." GDOE further reported in the November 29, 2005 cover letter to the SPP, that when it conducts on-site Record Reviews, GDOE and the LSS together develop a Corrective Action Plan (CAP) to address both isolated and systemic issues, and the CAP includes the items of noncompliance, plan for correction and timeline for correction. GDOE reported that in 2004-2005, thirty-nine out of forty LSSs selected for on-site record reviews developed CAPs to address compliance issues for correction. (See Table A for discussion of data issues related to Indicator 15.)</p>	<p>The State has provided clarification that it is ensuring correction of all noncompliance identified through its records review process.</p>	<p>OSEP looks forward to reviewing data in the APR, due February 1, 2007, demonstrating that noncompliance is being corrected within one year of identification. (See Table A for discussion of data issues related to Indicator 15.)</p>