WDE
Opportunity Through Education

Megan Degenfelder – *Superintendent of Public Instruction*
Dicky Shanor – *Chief of Staff*

Wyoming Department of Education
122 W. 25th St., Ste. E200
Cheyenne, WY 82002
307-777-7675

Individuals with Disabilities Education Act
Results Driven Accountability
Monitoring Report
for
Fremont County School District #38

Monitoring Dates: September 4, 2024 - April 30, 2025
Report Date: June 10, 2025

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

TO: Karen Brown, Special Education Director
Fremont School District #38

FROM: Sheila Thomalla, Monitoring Team Supervisor

SUBJECT: Results Driven Accountability Verification Monitoring Report

REVIEW DATE: September 4, 2024 - April 30, 2025

REPORT DATE: June 10, 2025

In accordance with 34 CFR § 300.600, the Wyoming Department of Education is required to monitor and enforce the requirements of the Individuals with Disabilities Education Act (IDEA). The focus of this monitoring process is to promote systems change that will positively influence educational results and functional outcomes for students with disabilities. This report reflects the findings as the result of a verification monitoring of Fremont County School District #38 (Fremont 38).

District Selection

During the 2021-2022 school year, Fremont 38 was selected for Results Driven Accountability (RDA) Monitoring.

Fremont 38 was found to fall into the *Needs Intervention* determination level for the 2020-2021 year. The Data-Drill Down completed on March 19, 2021, as part of the RDA monitoring process, was used to determine the monitoring hypotheses and samples of students for review.

The WDE elected to monitor a sample of special education records for Fremont 38 in compliance with Part B regulations governing the following areas:.

The original monitoring event occurred from February 15, 2022, through March 16, 2022. At that time, Fremont 38 was found to be noncompliant in three areas. A Corrective Action Plan (CAP) went into effect on May 16, 2022.

The WDE began a verification monitoring of a sample of students to determine whether the noncompliance was corrected. The verification monitoring took place from March 20, 2023, to April 26, 2023. The monitoring team reviewed a total of 75 student files. Members of the team also completed on-site observations, interviews, and paper document reviews from April 24, 2023, to April 26, 2023. Fremont 38 was found to be out of compliance in 9 areas. A compliance agreement was then developed to target the areas of noncompliance and improve district systems.

A verification of files took place from September 4, 2024, through April 30, 2025. This verification entailed monthly file reviews to closely examine LEA practices throughout the school year. This sample contained 60 student files. 29 files were removed from the sample due to the student transferring out of the district, returning to general programming, or the file not being reviewed. Of the 31 remaining files, eight were found to be cleared of noncompliance. The following is a detailed explanation of systemic findings of noncompliance.

Systemic Findings

Area 1: Procedural

Citation:
§ 300.323 When IEPs must be in effect.

* * * * *

(c) ***Initial IEPs; provision of services.*** Each public agency must ensure that—
(1) A meeting to develop an IEP for a child is conducted within 30 days of a determination that the child needs special education and related services; and
(2) As soon as possible following development of the IEP, special education and related services are made available to the child in accordance with the child's IEP.
(d) ***Accessibility of child's IEP to teachers and others.*** Each public agency must ensure that—
(1) The child's IEP is accessible to each regular education teacher, special education teacher, related services provider, and any other service provider who is responsible for its implementation; and
(2) Each teacher and provider described in paragraph (d)(1) of this section is informed of—
(i) His or her specific responsibilities related to implementing the child's IEP; and
(ii) The specific accommodations, modifications, and supports that must be provided for the child in accordance with the IEP.

§ 300.501 Opportunity to examine records; parent participation in meetings.
(a) ***Opportunity to examine records.*** The parents of a child with a disability must be afforded, in accordance with the procedures of §§ 300.613 through 300.621, an opportunity to inspect and review all education records with respect to—
(1) The identification, evaluation, and educational placement of the child; and
(2) The provision of FAPE to the child.

Evidence: 10 files raised concerns around the completion and record-keeping of documents. Six files contained a document, such as an IEP or Evaluation form, that had not yet been finalized and was still in the system under “Draft”. Student #14 had evaluation documents from a meeting held in October that were not finalized until the following January. Several IEPs were still in “Draft Form” one month after the meeting had taken place. Six of the 10 files contained documents that were

incomplete at least one month after the date the meeting had taken place, thus creating an overlap to have a new finalized IEP in place at the annual due date. Student #3 had an IEP developed and a meeting held in May of the previous school year. At the time the file was reviewed in September, the IEP was still incomplete and had not been finalized as the active plan.

Conclusion: Noncompliant. Fremont 38 has continued violations, particularly in regard to 34 CFR § 300.323, which mandates that IEPs be implemented "as soon as possible" following the IEP meeting and be in place at the beginning of the school year. The fact that multiple student files contained IEPs or evaluation documents left in draft form for over a month, and in one case, up to four months, indicates significant delays in finalizing and implementing educational plans. This compromises timely access to services and may hinder appropriate educational progress. The overlap with annual due dates also suggests a risk of procedural violations related to timely IEP review and development. Furthermore, the lack of accurate record keeping creates a potential hindrance to parent and other team members' access to the student's documents; ultimately preventing parent participation in the IEP process.

Area 2: Comprehensive Evaluations

Citation:
§ 300.304 Evaluation Procedures.

(c) Other evaluation procedures. Each public agency must ensure that-

(4) The child is assessed in all areas related to the suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities;

(6) In evaluating each child with a disability under §§ 300.304 through 300.306, the evaluation is sufficiently comprehensive to identify all of the child's special education and related services needs, whether or not commonly linked to the disability category in which the child has been classified.

Evidence: Per the file reviews, there is no evidence of noncompliance regarding the completion of comprehensive evaluations.

Conclusion: Fremont 38 is not found to be systemically out of compliance when conducting comprehensive evaluations.

Area 3: Link Between Identified Needs and Services Provided

Citation:
§ 300.324 Development, review, and revision of IEP.

(a) Development of IEP -

(1) General. In developing each child's IEP, the IEP Team must consider -

(i) The strengths of the child;
(ii) The concerns of the parents for enhancing the education of their child;
(iii) The results of the initial or most recent evaluation of the child; and
(iv) The academic, developmental, and functional needs of the child.

Evidence: The file review indicated 12 files contain identified needs of students that are insufficiently addressed in their IEP. Identified needs that go unaddressed without justification violate federal regulations requiring the consideration of all "academic, developmental, and functional needs of the child" in the development of the IEP (34 CFR 300.324(a)). Needs related to behavior, attention and functional needs are regularly mentioned and not targeted with IEP implementation. Student #2 has attention needs mentioned throughout the evaluation documents, including the statement, "[Student] would likely benefit from instruction to address weak executive functioning skills, attention control, and problem-solving" along with parent and teacher reports of concern. However, these needs go unaddressed in the IEP. Student absenteeism is another recurring need identified in PLAAFP statements that goes unmet. Student #49 had a statement in their IEP indicating they had “...246 absences and 5 tardies across various classes.” However, there was no evidence to suggest the IEP has made efforts to address this.

Alternatively, Student #25 and Student #56 have services listed on their IEP without a corresponding goal. Typically, this would be an instance that could be appropriate based on the needs of the student. However, the minutes grid states “study skills” without an annual goal to be working on during this time. Student #7 has a writing goal on their IEP without corresponding service minutes to indicate when or how the team is ensuring the delivery of SDI to target this area.

Conclusion: Based on the evidence, the reviewed files demonstrate violations of both federal and Wyoming state special education regulations, primarily through the insufficient addressing of identified student needs and a lack of alignment between IEP goals and services. Furthermore, the presence of services without clear corresponding goals and goals without specified service delivery indicates a failure to ensure the IEP comprehensively outlines how specially designed instruction will address identified needs. These deficiencies violate regulations that require IEPs to be comprehensive, address all student needs, and clearly link goals to the services necessary for a student to receive a Free Appropriate Public Education (FAPE).

Area 4: Goal Development

Citation:
§ 300.320(a)(2)
(i) A statement of measurable annual goals, including academic and functional goals designed to -
(A) Meet the child's needs that result from the child's disability to enable the child to be involved in and make progress in the general education curriculum; and

(B) Meet each of the child's other educational needs that result from the child's Disability;

(ii) For children with disabilities who take alternate assessments aligned to alternate academic achievement standards, a description of benchmarks or short-term objectives;

Evidence: 10 files contain annual goals that raise concerns regarding measurability. The measurability of a goal is crucial to ensure a way of clearly determining if the student is making adequate progress on closing the gap in achievement. Student #37 has a goal that states, “Target: Given phonics, prefix and suffix instruction, visual supports, and repeated reading, [Student] will enhance [their] reading comprehension by accurately understanding and responding to questions about texts that include phonemically complex words and advanced language structures. Specifically, [Student] will correctly answer comprehension questions about grade-level passages that incorporate multisyllabic words, advanced vowels, unusual spellings, soft c, soft g, prefixes, and suffixes, achieving 70% accuracy in 4 out of 5 reading sessions by the end of the IEP Year.” This goal is targeting multiple components of reading that do not coincide during instruction and therefore prevents the goal from being adequately progress monitored. This student also had multiple missing progress reports, which further indicates monitoring challenges based on the development of their goals. Student #2 has a goal that states, “The goal is that 80% of [their] activities will involve the evolution of mastering a self designated task within the counseling session.” Components of this goal such as, “activities” and “mastering a self-designated task” are undefined and subjective. This goal also lacks observable behavior as criteria for mastery, making it unmeasurable. Student #5 has a goal that states, "By the end of the IEP year, [Student] will improve [their] ability to solve academic and real-world math problems involving fractions, decimals, basic algebra, and geometry, increasing overall accuracy from 19% to 70% on [X]th grade curriculum-based measures and classroom assessments, with appropriate instructional supports." The use of terms “academic” and “real-world” as well as “appropriate instructional supports” are subjective and undefined. The goal is also targeting four very different mathematical operations that prohibit the development of targeted instruction and therefore adequate monitoring of progress.

Conclusion: The evidence suggests a continued systemic deficit around the development of annual goals. Specifically, goals lack clear measurability, contain vague language, and often target multiple, unrelated skills, making progress monitoring ineffective or impossible. For example, Student #37’s goal combines numerous reading skills that do not naturally align during instruction, undermining the ability to assess progress reliably. Similar problems are evident in the goals for Student #2 and Student #5, which include ambiguous terms such as “activities,” “self-designated task,” and “appropriate instructional supports,” thereby failing to meet the legal requirement for observable, measurable goals. These patterns across multiple files indicate that noncompliance is not isolated, indicating broader concern regarding the development of goals that allow the student to access the general education curriculum.

Area 5: Least Restrictive Environment (LRE)

Citation:
§ 300.114 LRE requirements.

(a)(2) Each public agency must ensure that -

(i) To the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are nondisabled; and

(ii) Special classes, separate schooling, or other removal of children with disabilities from the regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Evidence: Four files raised concern regarding a student's LRE. The regulations require that the LEA ensures students are educated with peers in the general education setting to the maximum extent appropriate. The team is to only consider a more restrictive environment when a student's participation in a less restrictive setting cannot be achieved satisfactorily with the use of supplementary aids and services (§ 300.114(a)(2)). Student #37's service grid indicates they are out of the general classroom for at least two hours on a typical day. Their file, however, lacks justification to suggest why their needs cannot be met in a less restrictive environment. Their justification statement is written as "[Student] participates in reading, writing and math instruction in the resource setting as well as speech / language in the therapeutic setting for more than 20% of [their] school day; [their] placement is RR." Student #16 is receiving ample services in the resource setting to meet their needs due to behavioral challenges. This student's IEP has not changed to reflect the time actually spent outside of the classroom. Student #38's IEP only has justification explanations around the time spent in Speech and does not address the need for other services to take place outside of the classroom. Lastly, Student #7's IEP states, "[Student] participates in Speech / Language services and Counseling in a co-treat environment to address [their] emotional and communication needs that is not practical or appropriate in the general education setting; [Student's] placement is RE." However, this student receives academic services in addition to the two mentioned here.

Conclusion: Fremont 38 demonstrates a pattern of insufficient justification for removing students from the general education setting. IDEA mandates that students with disabilities be educated alongside their nondisabled peers to the maximum extent appropriate, with removal only when their needs cannot be satisfactorily met even with supplementary aids and services. However, in multiple cases, such as Students #37, #16, #38, and #7, the documentation fails to provide clear, individualized justification for the extent of time students spend outside the general education environment. The use of generic statements labeling the student's LRE code is not a justification of their needs for a more restrictive setting. These recurring issues across multiple files indicate a continuing systemic lack of success in meeting IDEA's LRE requirements, undermining students' rights to be educated with nondabled peers to the maximum extent appropriate.

Area 6: Related Service Provision

Citation:
§ 300.34 Related Services.

(a)General. Related services means transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech-language pathology and audiology services, interpreting services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services for diagnostic or evaluation purposes. Related services also include school health services and school nurse services, social work services in schools, and parent counseling and training.

Evidence: Of the files reviewed, no concerns were noted.

Conclusion: The LEA demonstrates compliance regarding the provision of related services.

Area 7: Appropriate IEP Team Participation

Citation:
§ 300.321 IEP Team.

(a) General. The public agency must ensure that the IEP Team for each child with a disability includes

(1) The parents of the child;
(2) Not less than one regular education teacher of the child (if the child is, or may be, participating in the regular education environment);
(3) Not less than one special education teacher of the child, or where appropriate, not less than one special education provider of the child;
(4) A representative of the public agency who -
(i) Is qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of children with disabilities;
(ii) Is knowledgeable about the general education curriculum; and
(iii) Is knowledgeable about the availability of resources of the public agency.
(5) An individual who can interpret the instructional implications of evaluation results, who may be a member of the team described in paragraphs (a)(2) through (a)(6) of this section;
(6) At the discretion of the parent or the agency, other individuals who have knowledge or special expertise regarding the child including related services personnel as appropriate; and
(7) Whenever appropriate, the child with a disability.

Evidence: Of the files reviewed, no concerns were noted.

Conclusion: The LEA demonstrates compliance regarding the appropriate participation of IEP team members.

Commendations

Fremont 38 has made significant progress toward compliance. Previous monitoring revealed nine major areas of noncompliance. This verification revealed three areas. While there are continued challenges, Fremont 38 has vastly improved their process of conducting comprehensive evaluations and development of IEPs. The WDE recognizes the work of the Special Education Director and their staff to continue to make changes, ultimately resulting in improved systemic practices.

The LEA has 30 days from the date of this letter to dispute in writing to John Balow, Special Education Programs Director, any areas of noncompliance by providing written documentation for review. Per the Office of Special Education Program's (OSEP) 23-01 Memo, the LEA has one year from the date of this letter to correct all noncompliance. It is the goal of the WDE that this letter and the implementation of the ensuing Compliance Agreement (CA) will guide the district as it seeks to improve its system-wide delivery of special education services.

Thank you for your collaboration with the monitoring team and continued commitment to improving outcomes for children with disabilities. If you have any questions concerning this report, please contact Sheila Thomalla at sheila.thomalla2@wyo.gov.

Sincerely,

Sheila Thomalla
Monitoring Team Supervisor
cc: Curtis Mayer, Superintendent, Fremont County School District #38
John Balow, Special Education Programs Director, WDE