



PUBLIC SCHOOLS OF NORTH CAROLINA

DEPARTMENT OF PUBLIC INSTRUCTION | June St. Clair Atkinson, Ed.D., *State Superintendent*

WWW.NCPUBLICSCHOOLS.ORG

March 9, 2010

TO: LEA Superintendents and Charter School Directors

FROM: Rebecca Garland, Chief Academic Officer *RBG*

Angela Quick, Deputy Chief Academic Officer *AQ*

SUBJECT: Accommodations

In accordance with the *Individuals with Disabilities Education Improvement Act of 2004* (IDEA) and the *No Child Left Behind Act of 2001* (NCLB), all students must participate in state assessments with or without state approved accommodations. The state approved testing accommodations must be routinely used during instruction and on similar classroom assessments that measure the same content. Students eligible to receive testing accommodations include the following:

- Students with disabilities with a current Individualized Education Program (IEP),
- Students with a current Section 504 Plan,
- Students identified as limited English proficient (LEP) who score below Level 5.0 Bridging on the reading subtest of the W-APT/ACCESS for ELLs[®] (for all tests except grade 10 writing) and below Level 5.0 Bridging on the writing subtest of the W-APT/ACCESS for ELLs[®] (for grade 10 writing only), and
- Students with appropriate documentation identified with a transitory impairment.

This memo is being sent as a reminder that the state, LEAs, and schools must monitor the use of all instructional and testing accommodations. This monitoring is to ensure that documented testing accommodations are in fact provided during test administrations, and that the usage of these accommodations is documented and kept on file.

School Level Responsibilities

Test administrators must provide approved accommodations during test administrations. These accommodations must be routinely used during instruction and on similar classroom assessments that measure the same content. All accommodations must be documented in the student's current IEP, Section 504 Plan, LEP documentation, or Transitory Impairment documentation. Test administrators must monitor accommodation usage by completing monitoring forms (see attached). The completed forms will provide valuable information during annual meetings to determine the instructional and testing accommodations students need to receive. Therefore, completed forms must be kept on file with the student's IEP, Section 504 Plan, LEP documentation, or

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AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

**School Level
Responsibilities
(continued)**

Transitory Impairment documentation. Immediately following test administrations, test administrators must report to the state which accommodations were provided to students during tests as marked on answer sheets or any supplemental forms provided by the North Carolina Testing Program.

**LEA
Responsibilities**

The LEA/charter school must monitor to ensure students receive their required accommodations. This involves

- routinely reviewing IEPs, Section 504 Plans, LEP documentation, and Transitory Impairment documentation to ensure the accommodations a student should receive are properly documented,
- ensuring approved testing accommodations are used routinely in instruction,
- reviewing school testing plans for providing testing accommodations,
- observing test administrations to ensure testing accommodations are administered appropriately,
- ensuring the school reports the provided accommodations to the NCDPI (e.g., accommodations provided to students are marked on the answer sheets), and
- ensuring completed monitoring forms are kept on file with the student's IEP, Section 504 Plan, LEP documentation, or Transitory Impairment documentation.

**State
Responsibilities**

Beginning in spring 2010, the NCDPI will conduct site visits in selected schools and LEAs to observe test administrations. During site visits, the NCDPI will work with LEA staff to ensure accommodations are properly documented in IEPs, Section 504 Plans, LEP documentation, and Transitory Impairment documentation. Evidence of school and LEA monitoring (e.g., monitoring forms kept on file in students' IEPs, Section 504, LEP, and Transitory Impairment documentation) will also be reviewed to help ensure monitoring is sufficient and documented.

**New
Requirements
for 2010–11**

Beginning in 2010–11, LEAs/charter schools must report to the NCDPI all required accommodations by student, by test. To assist with this requirement, a new feature is being added to North Carolina Window of Information on Student Education (NC WISE). The Student Improvement Plans screen in NC WISE will allow schools to manually enter required accommodations for testing prior to the actual test administration. A Reporting Hub feature in NC WISE will allow required accommodation information from the Student Improvement Plan to be extracted. Once extracted, the information may be sorted by student, accommodation type, etc.

For exceptional children personnel currently using the DEC 4 IEP form to document testing accommodations in the Comprehensive Exceptional Children Accountability System (CECAS), no data in NC WISE will be required. CECAS and NC WISE are collaborating to develop a process to integrate the data from the DEC 4 in CECAS with the data from the Student Improvement Plans in NC WISE. Therefore, LEAs will enter accommodation information either in the Student Improvement Plans screen in NC WISE or in the DEC 4 in CECAS. No double entry will be required. Until the planned integration between NC WISE and CECAS is completed, Accountability Services will provide a mechanism for LEA Test Coordinators to regularly view consolidated reports on what is in each system.

The North Carolina Department of Public Instruction's Data Management Group (DMG) requires that authoritative sources be utilized (Policy Number: DMG-2008-001-DQ). For the 2010–11 school year, NC WISE and CECAS will be the authoritative sources for all testing accommodations that are documented in IEPs, Section 504 Plans, LEP documentation, and Transitory Impairment documentation. Housing accommodation information in NC WISE or the DEC 4 in CECAS will provide schools, LEAs, and the state with uniform electronic access to information needed for ordering appropriate test materials (e.g., Braille, large print editions), planning for test administrations, monitoring and federal reporting.

**Preparing for
the New
Reporting
Requirement of
2010–11**

The NCDPI will hold an Informational Webinar on March 17 from 2:00 to 3:30 to help districts understand the need to collect all required accommodations at the state level. A broad overview of the new NC WISE functionality will be discussed. It is recommended that district teams participating in the Webinar informational session consist of a representative from LEP, from Section 504, from the Exceptional

**Preparing for
the New
Reporting
Requirement of
2010–11
(continued)**

Children’s Program, from NC WISE, and from Testing/Accountability.
To register, go to <https://www1.gotomeeting.com/register/117976537>.
If you are unable to attend the Webinar, it will be archived and available
on the Testing News Network and the NC WISE Web site
(www.ncwise.org).

Thank you for your continued effort to ensure that students receive required accommodations.
If you have any questions, please contact your Regional Accountability Coordinator.

RBG/AHQ/sm

- c: LEA Exceptional Children Program Directors
- LEA LEP/ESL Coordinators
- LEA Section 504 Coordinators
- LEA NC WISE Managers
- LEA Testing Directors/Coordinators
- Regional Accountability Coordinators
- June St. Clair Atkinson
- Peter Asmar
- John Wetsch
- Lou Fabrizio
- Gary Williamson
- Cindy Bennett
- Mary Watson
- Elissa Brown
- Helga Fasciano
- Ira Wolfe
- Sarah McManus

Attachments

Review of Accommodations Used During Testing

This form is to be completed in its entirety. Prior to testing, the accommodations that are documented on the student's IEP, 504 Plan, or LEP documentation are to be checked off. After testing, the test administrator must complete the remaining columns regarding what actually took place during testing. Completed forms should be kept in the student's IEP folder or Section 504 or LEP documentation so that it is accessible for future meetings and in case of auditing/monitoring of accommodations use. NOTE: While the list below includes all accommodations, some do not apply to students identified as LEP.

Student Name	
Grade	
Choose one or more of the following:	<input type="checkbox"/> EC (IEP) <input type="checkbox"/> LEP <input type="checkbox"/> 504 Plan
Date	

Test	
Subject	
Test Administrator	

To Be Completed Prior to Testing	Was this accommodation provided to student during testing?	To Be Completed After Testing	
Accommodations Documented on Student's IEP/ Section 504 Plan/ LEP Documentation	Yes	If yes, provide specifics regarding how this accommodation was provided. (This has been shaded for some accommodations if it does not apply.)	Describe if and how the student used this accommodation
<input checked="" type="checkbox"/> Example: Test Administrator Reads Test Aloud		All items and answer choices were read to student.	Student completed test without following along with the read aloud.
<input type="checkbox"/> Braille Edition			
<input type="checkbox"/> Large Print Edition			
<input type="checkbox"/> One Test Item Per Page Edition			
<input type="checkbox"/> Assistive Technologies/Devices (Specify)			
<input type="checkbox"/> Braille Writer/Slate and Stylus (and Braille Paper)			
<input type="checkbox"/> Cranmer Abacus			
<input type="checkbox"/> Dictation to a Scribe			
<input type="checkbox"/> Interpreter/Transliterater Signs/Cues Test			
<input type="checkbox"/> Keyboarding Devices			
<input type="checkbox"/> Magnification Devices			
<input type="checkbox"/> Student Marks Answers in Test Book			
<input type="checkbox"/> Student Reads Test Aloud to Self			
<input type="checkbox"/> Test Administrator Reads Test Aloud (Specify)			
<input type="checkbox"/> Hospital/Home Testing			
<input type="checkbox"/> Multiple Testing Sessions (Explain: _____)			
<input type="checkbox"/> Scheduled Extended Time (Estimated Amount: _____)			
<input type="checkbox"/> Testing in a Separate Room			
<input type="checkbox"/> Other (Specify: _____)			

Comments/Considerations for next IEP/504/LEP team meeting:

Printed name of person completing form: _____
 Signature of person completing form: _____

This form is available in electronic format at <http://www.ncpublicschools.org/accountability/policies/atswd>.

Review of Accommodations Used During NCEXTEND1 Testing

Accommodations designated for the **NCEXTEND1** should be consistent with the accommodations used routinely during classroom instruction and similar classroom assessments. This form is to be completed in its entirety. Prior to testing, check (1) any accommodations listed below that are used by the student to respond to assessment tasks, and check (2) any accommodations used by the teacher to present assessment information to the student. After testing, complete the remaining columns regarding what actually took place during testing. The completed form should be kept in the student's IEP folder so that it is accessible for future meetings and in case of auditing/monitoring of accommodations' use.

Student Name	
Grade	
Check if EC student is identified LEP <input type="checkbox"/> LEP	
Date	

	NCEXTEND1
Test	
Subject	
Assessor	

Complete Prior to Testing			Complete After Testing	
Accommodations Used Routinely during Classroom Instruction and Similar Classroom Assessments	Required for response purposes	Required for presentation purposes	Was this accommodation provided to student during testing?	Describe if and how the student used this accommodation
<input checked="" type="checkbox"/> Example: Test Administrator Reads Test Aloud			Yes	Student completed test without following along with the read aloud.
<input type="checkbox"/> Braille Edition				
<input type="checkbox"/> Large Print Edition				
<input type="checkbox"/> Assistive Technologies/Devices				
<input type="checkbox"/> Braille Writer/Slate and Stylus (and Braille Paper)				
<input type="checkbox"/> Crammer Abacus				
<input type="checkbox"/> Dictation to a Scribe				
<input type="checkbox"/> Interpreter/Transliterater Signs/Cues Test*				
<input type="checkbox"/> Keyboarding Devices				
<input type="checkbox"/> Magnification Devices				
<input type="checkbox"/> Student Reads Test Aloud to Self				
<input type="checkbox"/> Test Administrator Reads Test Aloud* <div style="margin-left: 20px;"> <input type="checkbox"/> Read Everything <input type="checkbox"/> Read by Student Request <input type="checkbox"/> Other </div>				
Hospital/Home Testing				
<input type="checkbox"/> Multiple Testing Sessions <div style="margin-left: 20px;"> <input type="checkbox"/> More Frequent Breaks (Every ___ Minutes) <input type="checkbox"/> Over Multiple Days (Number of Days ___) </div>				
<input type="checkbox"/> Responds with Use of Augmentative Communication Device, Picture Board, etc.				
<input type="checkbox"/> Adaptations to NCDPI provided manipulatives, such as raised lines, enlarged text/pictures, placement of pictures on information boards, and use of student-specific symbols are allowed. Adaptations to the NCDPI-provided manipulative may be created by Assessor 1 as needed for those students who routinely have adaptations to materials for instructional use. This accommodation may be used only for the NCDPI-provided manipulatives.				
<input type="checkbox"/> Other (Specify: _____)				
* For the NCEXTEND1 reading assessment, Selections 1-3 are read to the students. Use of the Interpreter/Transliterater Signs/Cues Test and/or the Test Administrator Reads Test Aloud accommodation(s) for Section 4 will result in incorrect item scores. Items 1-10 may be read to all students. Use of the Interpreter/Transliterater Signs/Cues Test and/or the Test Administrator Reads Test Aloud accommodation(s) for items 11-15 will result in an invalid score for these items. If the Interpreter/Transliterater Signs/Cues Test and/or the Test Administrator Reads Test Aloud accommodation(s) is used for these items, both assessors must score these items as incorrect.				
Comments/considerations for the next IEP meeting:				
Printed name of person completing form: _____ Signature of person completing form: _____				