

Office of the Independent Monitor
Modified Consent Decree
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Austin Beutner
Superintendent of Schools
Los Angeles Unified School District
333 S. Beaudry Avenue, 24th Floor
Los Angeles, CA 90017

Re: MCD Quarter 2 Report and Disengagement Update

Dear Mr. Beutner:

On October 25, 2018, I provided you the Modified Consent Decree (MCD) Quarter 1 Report and Disengagement Update. The letter indicated that a report on the progress with Outcome 13B—which requires the identification of students not receiving at least 70% of their services, and notification to parents of such noncompliance—would be issued prior to the winter break. Due to delays in obtaining data, this report is being submitted with this Quarter 2 Report and Disengagement Update. Two additional reports accompany this letter and provide more in-depth analysis of progress in the areas of Outcome 13: Service Delivery and MiSiS.

This second quarterly report includes updates on the following:

Making Schools Accessible (Program Accessibility)

- Rapid Access Program (RAP)
- Preschool for All Learners (PALs)

Substantial Compliance

- Complaint Response Unit (CRU)
- Outcome 10: Timely Completion of Initial Evaluations
- Outcome 16: Qualified Providers
- Compliance Indicators: Completion of Annual IEP Meetings
- Program Accessibility/Americans with Disabilities Act (ADA) Components
- MiSiS
- Outcome 13: Delivery of Services
- Substantial Compliance Framework
- IEP Complaint Investigation

On December 20, 2018, the District provided its Quarter 2 submission with updates on the monitoring efforts in these areas as well as responses to the Office of the Independent Monitor's (OIM's) Quarter 1 report. This report highlights some of these responses.

To provide the most current assessment of progress, this report includes data from September 15 through December 15, 2018. For brevity, this update does not contain comprehensive background of the ongoing efforts and/or historical OIM findings or directives regarding some of these items.

Making Schools Accessible (Program Accessibility)

Rapid Access Program

1. Establish a functioning RAP with ongoing commitment to fund requests and outreach to schools.
 - a. This is a critical component of a system that ensures substantial compliance and must be funded, effective, and responsive before disengagement from the MCD.
 - b. The District provided a tracking sheet with 15 projects (with RAP applications) at 12 sites with request dates ranging from September 3 to December 3, 2018.
 - c. The spreadsheet includes nine completed projects.
 - i) Five projects were completed within 16 days, with one completed the day the request was made and one completed the day before the request was submitted. Three others were completed on the 32nd day, and one the 53rd day.
 - ii) Two projects (one in Local District Northeast and one in Central), requested mid to late September, have yet to be completed. The District noted that contract processes were affected by wildfires. Both had estimated completion dates of December 21, 2018.
 - iii) One project was canceled due to the student leaving the school, one was still open, and one was transferred to the Critical Barrier Removal (CBR) program.
 - iv) One project was denied due to the student not having a "qualified disability." This was a request made after the OIM PALs visit, with the school principal noting that the "student is very small and requires support while toileting." The principal states that in the interim the teacher's assistant will "help student with verbal directions to hold toilet paper dispenser."
 - d. The District provided responses to several issues raised in the Independent Monitor's (IM's) Quarter 1 report. The following shows the response to the IM's assertion that the low number of projects requested was of concern given the high needs identified by the District's ADA Self-Evaluation and Transition Plan and historical findings from the OIM's site visits, such as those at PALs programs.
 - i) The District responded by stating, "It is widely understood that the District has many needs as it relates to Barrier Removal Projects, and Project Execution is actively performing this work. LAUSD has an extensive schedule that is extremely aggressive, and cannot be matched throughout the country. LAUSD has committed \$344,754,914 thus far, and the BOE approved an additional \$53,281,659 in November 2018. As the District's Self-Evaluation and Transition plan is implemented, it is anticipated that the number of RAP request will decrease over time a [sic] structural modifications and operational solutions are executed."
 - ii) This response shows disconnect with the realities of the systemic noncompliance that exist across the District. The laudatory tone of this response is misguided given that the District has yet to comply with the ADA, when it was to have met these obligations by 1995. While the District's current effort may be considered aggressive and unmatched in the country, this statement fails to recognize that the "aggressive" plan will address only one-third of its schools over the next 8-10 years. It is unknown how long it will take for the District to achieve full compliance with the law. Most public entities including school districts have

long since implemented Self-Evaluation and Transition Plans and come into compliance with the ADA.

This lack of compliance and long delays for achieving compliance should render the RAP a critical component in remediating areas of noncompliance that impact program accessibility. Therefore, the RAP should be the primary mechanism that is readily communicated and available for schools to ensure program accessibility. This should result in an increase in the use of the RAP program over the next several years.

Status: Progress noted, Not met

- a. The Quarter 1 report noted concerns with the negative accounting of timelines and whether this misrepresented the time required for completing projects. This includes the reporting of projects that are completed before they are even requested. Although the District has defended this approach, it is in the organization's best interest to accurately report data.
- b. The denial of the project for a child who was deemed by District staff as not having a "qualified disability," despite having an IEP and a need for support clearly conveyed by the principal, is troubling. If the student has an IEP or 504 plan, they have a qualified disability in accordance with the criteria of an IEP or 504 plan as authorized by the LEA (local education agency) representative of Los Angeles Unified School District.

It is unclear as to who made the determination that the student with the IEP does not have a qualified disability, and furthermore it is unclear what criteria were used. Qualifying disabilities under the ADA include many conditions, not just mobility impairments. Qualifying conditions also include sensory, visual, cognitive, emotional, and hearing impairments. Some students with disabilities other than mobility may use grab bars, such as students with vision impairments. Furthermore, it fails to recognize the basic developmental aspects of three-year-olds, even those without disabilities. These students have not fully developed gross and fine motor skills, and can demonstrate difficulties with coordination and balance.

This case shows the fundamental misunderstanding of the program accessibility requirements of the ADA and Section 504 by those handling this program. The request was for a cost-effective support (grab bars) and for an accessible feature that should have already been made available in the bathroom. The failure to provide a simple and low-cost support for this three-year-old student with a disability is unconscionable.

Preschools for All Learners (PALs) changing stations

2. Readiness and appropriateness of changing conditions at PALs classrooms.
 - a. The Quarter 1 report noted that joint site visits conducted by the OIM and District continued to reveal a lack of equipment and/or practices, resulting in students being changed in substandard conditions, such as without privacy screens in the classroom and/or on nonstandard tables.
 - i) The District's December 20, 2018, response confirmed these conditions and reported carrying out remedies at these sites.
 - b. The Quarter 1 findings indicated that the District had not fully implemented its plan for improving changing conditions at PALs programs by the beginning of the 2018-2019 school year, as directed by the IM in the June 26, 2018, Annual Report.
 - i) The District noted it has consistently implemented elements of the plan, including having delivered the universal precaution kits within 11 days of the first day of school.

- a) Although additional monitoring of conditions was not conducted by the OIM since the last report, the District response confirms that the plan was not fully implemented and is under continuous implementation. The District is advised to continue monitoring its implementation as the findings were based on a small sample of programs and can be reasonably assumed that other programs might require remediation.
- c. By November 15, 2018, the District was to report on the systemic failures that resulted in newly remodeled inaccessible bathrooms at Angeles Mesa Elementary, and those reported last year at Toluca Lake Elementary.
 - i) The District confirmed that these two noncompliant projects had completed work without Access Compliance Unit (ACU) review. The rationale noted that these projects began as repair tickets performed by the Maintenance and Operations (M&O) unit and do not typically require a design review. The District contends that both of these situations are anomalies and do not represent a systemic failure, and that it has not occurred at more than 650 District schools.

- a) The District must comply with Section 10 and Section 17 of the MCD. Section 10 requires that any new construction, repairs, and renovations comply with federal and state requirements. Section 17 requires the IM to determine that the District has no systemic program accessibility problems that prevent substantial compliance with the program accessibility requirements of federal special education laws and regulations.

The argument that this project was not vetted by the ACU due to the initial designation of a “repair” is inconsistent with the obligations mandated by the MCD. The issue of performing noncompliant new construction, repairs, and renovations is not new and has been discussed at great length. The fact that noncompliant repairs occurred at two different sites, with presumably different M&O crews, suggests that other “repair” projects have also resulted in inaccessible construction. After 15 years of the MCD and many contentious interactions regarding noncompliant work, it is difficult to comprehend how any unit from the Facilities Services Division (FSD) is not aware of the MCD requirements regarding new construction, repairs, and renovations.

- d. The Quarter 1 report found that 25 of the PALs program bathrooms (43%) that the OIM visited did not contain grab bars in toilet compartments, despite staff reporting changing students standing up. The lack of grab bars is inconsistent with the District’s assertion and plan to train students to toilet independently. Below is the District’s response:
 - i) “Teachers indicated that during toilet training, preschool children assist in pushing down and pulling up their clothing and do not use the grab bars.

The District is implementing its ADA Self-Evaluation and Transition Plan, which requires physical changes/barrier removal for program accessibility. The ADA also indicates that physical changes would be necessary for individuals with qualified disabilities. Of the over 4,200 students enrolled in the PAL program, the vast majority of the students have disabilities that do not necessarily impact their mobility. Approximately 207 of the 4,200 students enrolled in the PALs program have physical disabilities. This is only 4-5% of students enrolled in the PALs program.

The reason for training students to toilet independently is not because of a disability. Students in the PALs program are three to four years old, and in the beginning of the school

year, the focus is to perform toileting assistance. This does not provide the justification for not renovating spaces to be accessible. LAUSD FSD conducts surveys and scopes schools in accordance with the Self-Evaluation and Transition Plan, and many of these restrooms will inevitably require renovation to be Readily Achievable for Program Accessibility. If a request is made on behalf of a student that has these needs, they will be met. Upon the FSD's review of recent requests from the OIM for grab bar installation, it was found that "there was not a program accessibility need for grab bars as noted."

- ii) This explanation is troubling and seems more intent on disputing the finding than conveying a fundamental understanding of the District's obligations (under the MCD, ADA, and Section 504) and the needs of preschool-aged children with disabilities. This argument is indicative that some District staff are not fully committed to ensuring the readiness and appropriateness of changing conditions at PALs programs. This reactive approach to program accessibility for programs that are designed for and continuously enroll students who turn three (throughout the school year, not just the beginning), with intellectual, developmental, and mobility disabilities and limitations, is unacceptable particularly since the District has failed to meet its ADA obligations for almost 25 years, and its Self-Evaluation and Transition Plan will address only one-third of its schools within the next 8-10 years.

Status: Not met

The District's responses confirmed that it has not fully implemented the plan and continues to address these conditions. The argument that because only 4-5% of the students in these programs have physical disabilities and does not present much student need for full program accessibility in toileting and changing areas, and thus there is not enough justification to meet its MCD, ADA, and Section 504 obligations, is simply wrong. This would be analogous to an argument that because 5% of the population has mobility impairments, only 5% of curb cuts need to be accessible. The installation of accessible curb cuts would then be dependent on someone in a wheelchair showing up and waiting for it to be made accessible.

This argument also fails to acknowledge the District's noncompliance with the ADA for almost 25 years, and its wait-and-react posture confirms systemic noncompliance with program accessibility at PALs programs. It must be noted that the District chooses the locations of PALs programs. Yet, it persistently chooses locations that are inadequately prepared to meet students' needs. Overall, the argument that there is not enough need to justify making these programs is indicative of continued deliberate indifference by the District to these students' needs.

- a. The District must make these programs accessible for students when they arrive the first day of school, including having Universal Precaution supplies operational the first day of school—not two weeks after school opens.
- b. The OIM will continue to monitor changing stations at PALs programs as part of its overall monitoring effort.
- c. The ADA Compliance Manager must provide the necessary training to ensure that District staff understand the program accessibility requirements of the ADA.

Substantial Compliance

Elements of the Framework – Complaint Management System

1. Process for receiving and resolving compliance complaints.
 - a. Between September 15, 2018, and December 15, 2018, the District identified 134 complaint calls. Of these, 108 cases were resolved or closed by this date.
 - i. To examine the District’s adherence to its procedures for identifying and resolving complaints, the OIM reviewed these complaints with their corresponding lawful response letters.
 - ii. Of the 108 complaints, 106 contained corresponding lawful response letters. The OIM review found that of these, 42 were recorded as having a violation founded, and 64 were deemed unfounded.
 - a) Four of the founded letters contained a statement that the District’s investigation had not found a violation.
 - b) Five of the unfounded letters did not contain this statement.
 - iii. Although the accuracy and information contained in the lawful response letter and complaint database have improved, many letters continue to lack clarity as to the remedy or the reason why the alleged violation was unfounded.
 - b. Of the 108 complaints reviewed, the OIM found:
 - i. High level of agreement between the nature of the complaint and resolution noted in the District’s database, and those stated in the lawful response letters sent to parents.
 - a) The OIM noted two cases that could be categorized as a referral (Type 2), and one as a recommended action (Type 3).
 - b) Twelve cases should have been categorized as a concern, as they did not allege a violation of special education law or the District’s Special Education Policies.
 - c. On October 8, 2018, at the meeting of the Parties, the IM raised concerns that the CRU processes (from the middle to the end) between Parent Community Facilitators and Specialists were not occurring as outlined in the District’s December 2017 letter. The IM asked the District to look into this concern and report back.
 - i. On December 20, 2018, the District provided a detailed accounting of the processes for handling complaints.

Status: Not met

- a. Although progress was noted in the accurate identification of complaints, there continue to be instances of misidentification.
 - i. The District acknowledged improvements in the accurate identification of complaints and noted ongoing training to improve consistent processing of complaints.
- b. The District should continue its ongoing training and quality assurance procedures to ensure accurate lawful response letters.
 - i. It is recommended that letters clearly state the alleged violation and response. Parents should be able to easily identify the remedy, suggested action, or referral. Unfounded letters should include the rationale for such determination.

MCD Outcomes and Substantial Compliance Indicators

2. Section 7 of the MCD, regarding the achievement of outcomes, states that “the Independent Monitor shall continue to monitor whether the District is maintaining satisfaction of the outcome. All outcomes have to continue to be achieved on the date the Independent Monitor certifies that all outcomes have been met” (pp. 17-18).
 - a. Outcome 10: Timely Completion of Initial Evaluations
 - i. Outcome 10 requires completion of initial evaluations within the following timeframes:

- within 60 days (90%), within 75 days (95%), within 90 days (98%).
- ii. As of December 15, 2018, the District conducted 7,093 initial evaluations within the following timeframes:
 - a) Within 60 days (86.1%), within 75 days (94.4%), within 90 days (97.4%), over 90 days (2.6%). This performance falls below the three targets.
 - iii. In the December 20, 2018, response, the District included a list of ongoing interventions and resources to support the goal of achieving Outcome 10. The two below are summarized and included to show the increase in resources and monitoring support to improve progress in this area.
 - a) Twenty additional school psychologist positions were funded for this school year, and overtime on unassigned days, vacation time, and Saturdays has been allotted to these providers to facilitate timely completion of initial evaluations.
 - b) The District is developing teams at local districts that will identify high- and low-performing sites. The team will prepare a report delineating support to underperforming schools, and will submit the report to the Associate Superintendent of the DSE and the Superintendent.

Status: Not met

- a. The District must demonstrate improvements in these areas for disengagement to occur.
- b. Outcome 16: Qualified Providers
 - i. Outcome 15 and stipulation between the Parties require the District to maintain the percentage of qualified providers at least at 88%.
 - ii. As of December 15, 2018, 85.4% (3,925 of 4,598) of special education teachers were qualified providers. This performance is the same as reported in Quarter 1.
 - a) The District reports that it will pursue discussions with the United Teachers of Los Angeles (UTLA) union to obtain an agreement that would allow displaced general education teachers, or those subject to a reduction in force, to receive a stipend as an incentive to become special education teachers. It is also providing signing bonuses for credentialed special education teachers through a \$1 million grant awarded by the California Commission on Teacher Credentialing (CTC).

Status: Not met

- a. The District must demonstrate improvements in these areas for disengagement to occur.
- c. Timely completion of annual IEPs
 - i. As of December 15, 2018, the District held 30,129 annual IEPs within the following timeframes:
 - a) On time, 94.98%, with a total overdue of 5.02%. IEPs overdue by: 1 to 30 days (3.94%), 31 to 60 days (0.88%), 61 to 90 days (0.16%), more than 90 days (0.04%).
 - b) To date, this performance constitutes systemic compliance.
 - (i) Although this performance is at acceptable levels, performance has decreased slightly since Quarter 1.
 - d. The District must provide quarterly evidence of its monitoring mechanisms that results in the identification and correction of noncompliance.
 - a) The District provided evidence of monitoring for sites with high numbers of overdue IEPs during Quarter 1 and 2. This includes a “school-level report reflecting

monitoring mechanisms resulting in the identification and correction of noncompliance.”

- (i) The school-level report consists of summaries of discussions and actions taken at more than 100 sites. The majority of comments are very similar or identical in nature and centered on the schools’ monitoring capacity and procedures, tools available to improve self-monitoring, and procedural guidelines. Three entries noted staffing issues, with one site administrator committing funds for overtime to enable staff to come into compliance. The other two noted staffing issues due to leave or training as issues.
- b) Although this is a positive step, the District has many areas of noncompliance. The documents submitted did not include any references to next steps or accountability measures for schools that do not improve compliance.

Status: Partially met

3. Program Accessibility/ADA Components

- a. Complete transition plans and program accessibility betterments within 10 years. There must be a firm commitment for funding of the proposed \$1.2 billion estimate. These commitments must be Board approved and are irrevocable.
 - i. The District must provide information on plans for ensuring sustainability of this effort, including the allocation of additional resources if needed.

Status: Not met

- b. Complete a sufficient number of surveys to ensure institutional commitment of at least 150 schools with transition plans, with 50% of these schools having completed betterments.
 - i. On April 30, 2018, the District provided completed surveys at 47 schools.
 - ii. The OIM will initiate its first round of visits at three sites due for completion by April 1, 2019. This initial review will occur over the next few months and provide an update on whether these surveys appear to align with the category type for each school. Surveys and betterments must align with the proper categories (1, 1a, 2, and 3) assigned to each site. The OIM anticipates reviewing an additional sample of sites that are scheduled to be completed through June 30, 2019.

Status: Not met

4. MiSiS

- a. The OIM’s final comprehensive assessment of the District’s performance and status of MiSiS can be viewed in Attachment A. To summarize, the District has effectively met the primary requirements for MiSiS, which can be deemed a functional and stable student information system. Several items remain outstanding and are scheduled to be finalized by the end of this calendar year.
- b. One of the main unmet requirements is the integration of independent charter schools. Although a requirement, this is a complicated issue more indicative of political and organizational will challenges than technical solutions.

Status: Met

- a. The District is commended for the successful completion of MiSiS. Despite many challenges, the current MiSiS team and leadership has demonstrated persistent commitment to the development and completion of the program.
 - b. The District is required to provide updates on any remaining items, or issues that arise that might compromise the MiSiS program, by June 30, 2019, and thereafter if needed.
 - c. It is recommended that senior leadership and the Board of Education (BOE) continue to communicate any future financial commitments to ensure maintenance and sustainability of the MiSiS program.
5. Outcome 13: Delivery of Services
- a. Outcome 13A requires the District to demonstrate it provided 90% or more of the aggregate minutes prescribed by the end of the school year. On July 9, 2018, the IM notified the Parties that this part of the outcome is met.

Status: Met

- b. Outcome 13B requires the identification of students not receiving the majority of their services (less than 70%), and notification to parents of such noncompliance and an offer of compensatory services within 10 days. The District will provide all letters to the OIM within 10 days after notifying parents. Students receiving less than 70% of their services will be identified on the following dates: October 15, February 15, and April 15.
 - i. The OIM validated the accuracy of data to examine the accuracy of the Welligent Service Tracking system and reports. The study reviewed a sample of 582 services across five service categories. The report can be viewed in its entirety in Attachment B. The OIM also conducted telephone surveys at 51 schools to better understand why some students received no services through October 15, 2018.
 - ii. The study revealed vulnerabilities within the Welligent program that impact the accuracy of the service delivery data. These findings highlight the need for improvement in Welligent as well as procedures and practices for documenting and monitoring service tracking information. The review also found that the application of exclusionary codes associated with the methods for calculating performance of the newly revised Outcome 13 can have a detrimental effect by considerably reducing service delivery obligations and inflating service delivery rates.
 - iii. The OIM also conducted a study to examine the circumstances that might explain why students have not received any services. The study consisted of telephone interviews of schools with a considerable number of students who had not received services since the beginning of the school year through October 15, 2018 (Attachment C).

The telephone surveys found that many sites where a high number of students did not receive any services through the first nine weeks of the school year had staffing vacancies related to shortages or leaves. The study found concerns with the District's policy to address the lack of service delivery at each student's next scheduled IEP date, and make an offer of compensatory services at this time. This reactive approach is not indicative of a system that can prevent systemic substantial noncompliance.

- iv. As noted in the previous report, the Parties agreed to an outcome that does not require a measurable increase in service delivery (rather a basic notification to

parents and an offer of compensatory services); service delivery will be monitored by the OIM under the purview of substantial compliance.

Status: Not met until the third benchmark

- c. Outcome 13C requires all parents to have access through the MiSiS Parent Portal to a quarterly (October 15, February 15, April 15, and June 15) year-to-date snapshot report summarizing all services delivered in accordance with the IEP.

Status: Not met until the third benchmark

- 6. Substantial Compliance
 - a. Establish training initiatives to improve school and parent communication and collaboration at IEP meetings.
 - b. On December 20, 2018, the District provided evidence of parent and staff training in these areas for this school year. This training initiative is funded by a five-year grant issued by the California Department of Education (CDE) that expires in 2020.

Status: Met

- 7. IEP Complaint Investigation
 - a. The District must present the revised Prior Written Notice policy and demonstrate an effective complaint management system.
 - b. The District included its policy outlining procedures for providing Prior Written Notice.

Status: Partially met

Conclusions

The completion of MiSiS is a significant accomplishment of the MCD and yields many benefits that extend beyond special education. It is important to recognize the efforts of the MiSiS leadership team. In particular, I would like to acknowledge the contributions and professionalism of Sharyar Khazei, Gary Sabia, and Dianne Pappas. The successful completion of the MiSiS program was undoubtedly facilitated by the collaborative relationship between the leadership team and the OIM and Plaintiffs' Counsel. The MiSiS leadership team always acted in good faith and with transparency, and demonstrated accountability by owning problems and solutions. Despite many challenges, the MiSiS team persevered and developed a program that will further the best interests of the District for years to come.

The end of the MCD is near. It is my hope that this possibility encourages senior leadership and Board members to reflect on the direction of the District with respect to its special education programs, partnerships with parents, and compliance with the ADA. It is my hope that the success seen with MiSiS, and the behaviors of its leadership team, provide an example of what works for making positive organizational change.

Since my appointment four years ago, there has been a notable decline in the transparency and ownership of problems and solutions by District personnel. This includes the defense of poor performance and, at times, responses to the OIM reports and findings that I have noted as having been as "unnecessarily contentious." I have stated that the OIM's findings and reports are based on data and

facts. I recognize that at times this has led to highly critical comments of efforts and staff, but nothing has ever been personally motivated. The District responses have at times been so off-base and hostile that I have questioned whether these views represent the District and Board. The District's December 20, 2018, response is another example of such behavior. Lamentably, these attitudes don't convey ownership of the District's problems and solutions.

More important than meeting performance levels of the MCD—many of which were established with a three-year timeframe and should be considered a low bar and not indicative of a compliant system—are the attitudes and posture of senior officials who demonstrate good faith, transparency, and accountability with parents and the public. Given the charge of the OIM and IM to point out noncompliance and areas of organizational weaknesses, criticism is par for the course. However, if the District is serious about disengagement and, more importantly, about sustaining the successes made and continuing to pursue organizational changes that lead to improved compliance, it is critical to convey a positive and good faith attitude. In addition, positive and collaborative leadership will foster trust and partnerships and send a message to groups such as the Plaintiffs' Counsel that the District is solely focused on solutions and improvement.

The District is a large organization with tens of thousands of employees and hundreds of thousands of students. Poor performance and noncompliance will always exist to some extent. The MCD was designed to develop District capacities that would allow it to self-monitor and self-correct noncompliance—in short, taking ownership of its problems and solutions. I recognize that the majority of employees have the best intentions and work hard despite organizational limitations. It is the job of senior leadership to address these organizational limitations and to provide site-level staff with the professional flexibility and tools needed to serve students and families.

I have repeatedly stated that disengagement will not occur based on District assurances or self-imposed timelines. Credible action, transparency, and the timely identification and remediation of noncompliance must occur in order for disengagement from federal court oversight. Although I remain cautiously optimistic, it is incumbent on the District to demonstrate a more positive approach to owning its noncompliance and organizational weaknesses. This will go a long way in developing and maintaining good faith with the Plaintiffs' Counsel and the public.

I am available to discuss this report in further detail and hope that this update provides you the necessary feedback to further the District's progress.

Sincerely,



David Rostetter, Ed.D.
Independent Monitor

C: Robert Myers, Catherine Blakemore, Beth Kaufman, Deneen Evans Cox, David German, Veronica Smith