April 7, 2021

## Crestline Exempted Village School District IRN: 045344

# Ohio the Department of Education, Office for Exceptional Children 2019-2020 IDEA Monitoring Review Summary Report

#### Introduction

The Ohio the Department of Education's Office for Exceptional Children would like to extend appreciation to the Crestline Exempted Village School District staff for their efforts, attention and time committed to the completion of the review process.

#### **Definition of terms in this document**:

Individual Corrections or Record Corrections refers to the correction of Individualized Education Programs (IEPs), Evaluation Team Reports (ETRs) and other special education records that were reviewed by the Department and found to be non-compliant.

Systemic Corrections refers to non-compliance within the larger systems at work to implement IDEA within the district. This includes but is not limited to Systemic Correction of records and special education procedures and practices to document ongoing compliance with IDEA requirements.

#### Overview

The following report is a summary of the onsite review conducted by the Department on December 8, 2020, as part of its general supervision requirements under the Individuals with Disabilities Education Act (IDEA) and Am. Sub. H.B.1.

During the onsite review, the Department monitors the educational agency's implementation of IDEA to ensure compliance and positive results for students with disabilities. The primary focus of the review is to:

- Improve educational results and functional outcomes for all students with disabilities; and
- Ensure that educational agencies meet program requirements under Part B of IDEA, particularly those requirements that are most closely related to improving educational results for students with disabilities.

Onsite reviews are targeted to include the following specific areas:

- Child Find;
- Delivery of Services;
- Least Restrictive Environment;
- IEP Verification of Delivery of Services;
- Parent Input; and
- Teacher, Special Education Service Providers and Administrator Interviews.

#### **Data Sources**

During the review, the Department considered information from the following sources:

#### 1. Public Parent Meeting and Written Comments

Crestline Exempted Village School District mailed 158 the Department approved letters to all families with students with disabilities in the educational agency. The Department provided the educational agency with a public meeting announcement to post on the district website. Public parent meeting dates for all educational agencies selected for onsite reviews are also posted on the Department website.

On December 9, 2020, the Department consultants held a public meeting for parents and other interested parties. No parents or family members attended. One State Support Team (SST) Region 7

representatives attended. Attendees could speak to the Department representatives publicly in the meeting, speak to the Department representatives individually, provide written comments or both. Written comment forms were available before, during and after the meeting. The Department received one written comment.

During the public meeting, parents were advised by the Department consultants of the formal complaint process under IDEA and that their public comments did not constitute a formal complaint. The participants were also informed that while the information they provided may be helpful to the review, it may not necessarily be acted upon as part of the review process. Ohio's procedural safeguards notice was available for participants who wanted a copy.

#### 2. Pre-Onsite Data Analysis

The Department conducted a comprehensive review which included district, building and grade level data; Special Education Performance Profile; Ohio School Report Cards; Comprehensive Continuous Improvement Plan (CCIP) and/or OnePlan; and Education Management Information System (EMIS) data. The data analysis assisted the Department in determining potential growth areas for improvement and educational agency strengths.

#### 3. Record Review

Prior to the onsite visit, the Department consultants reviewed 14 records of school age students with disabilities. The Department consultants selected records of students with disabilities from a variety of disability categories and ages.

#### 4. Staff/Administrative Interviews

On December 8, 2020, the Department consultants held six sessions of interviews with six administrators and 29 teachers, school counselors, related services personnel, school psychologists, and paraprofessionals. The Department interviews focused on the following review areas: Child Find; Delivery of Services; Least Restrictive Environment (LRE) and IEP alignment and Discipline.

#### Strengths/Commendations:

- Staff speak to the strong communication from the Director of Special Education. Timelines for evaluations
  are met due to the diligence of the Director's communication. Related service personnel are present at
  most, if not all ETR/IEP meetings.
- The whole IEP team including special educators, general education teachers, students and parents, provide input in the annual goal decision making process. Virtual meetings offered by the district have helped to improve parent attendance at meetings.
- Related service personnel spoke to reviewing regression for ESY purposes. Additionally, they spoke to the inclusion of OOD with the Crestline team at Transition meetings to support students.
- Rarely conduct record reviews as it does not provide the IEP team with current information on how to meet student needs through services and supports.
- A lot of teachers have been trained with de-escalation techniques which has benefited students with behavioral concerns to be supported better in general education classroom environments.
- Strong collaboration between general and special education teachers to support students in the general
  education environment.

#### Findings of Noncompliance/Required Actions

A finding is made when noncompliance is identified by the Department with IDEA and Ohio Operating Standards requirements. Findings are also made when noncompliance is identified in relation to the evaluation team report (ETR) and/or individualized education program (IEP) requirements. For a noncompliance level of 30% or greater in any single area or for identified areas of concern that did not reach 30% or greater, a Corrective Action Plan (CAP) will be developed to address those areas. All noncompliance identified by the Department as part of the review (listed by subject area in the *Department's Review Findings and Educational Agency Required Actions Table*) must be corrected as indicated in the *Evidence of Correction/Recommendations* column.

Refer to the details of requirements in the <u>Evidence of Findings and Evidence of Correction/Recommendations table below</u>, and the attached <u>Individual Record Review Comment Sheets</u> for specific individual record corrections.

The Department provides separate written correspondence to the parent/guardian when action is required to correct findings of noncompliance for individual students. The educational agency will receive copies of this correspondence.

#### **Corrective Action Plan (CAP)**

The educational agency will develop a CAP to address any items identified in this summary report. An approved form for the CAP will be provided by the Department or can be accessed on the Department's website by using the keyword search "Monitoring". The CAP developed by the educational agency with SST assistance must include the following:

- Activities to address all areas identified in this summary report;
- Documentation/evidence of implementation of the activities;
- Individuals responsible for implementing the activities;
- Resources needed;
- Completion dates; and
- Continued Plan for Improvement and/or Compliance.

The educational agency must submit the CAP by email to <a href="mailto:raymond.mccain@education.ohio.gov">raymond.mccain@education.ohio.gov</a> within 30 school days from the date of this report. The Department will review the corrective action plan submitted by the educational agency for approval. If the Department determines that a revision(s) is necessary, the educational agency will be required to revise and resubmit. The educational agency will be contacted by the Department and notified when the action plan has been approved.

CAP Due Date: Friday, May 21st, 2021

#### **Department Trainings**

As part of the Department monitoring process, Crestline Exempted Village School District personnel, as identified by the Department, are required to complete the Special Education Essentials 2019-2020 training modules within the Learning Management System (LMS). The Department will provide specific instructions on completing these training modules during the Summary Report presentation. Participants must achieve a 75% or more on each quiz. Participants who do not achieve at least 75% will be contacted by the State Support Team (SST) for additional training.

Completion of LMS Training Modules Due Date: Friday May 21, 2021

#### **Individual Correction**

The educational agency has **60 school days** from the date of this summary report to correct all identified findings of noncompliance for individual students whose records were selected and reviewed by the Department during the onsite review unless noted otherwise in the report. Detailed information on individual findings are provided in a separate report.

Individual Correction Due Date: September 23, 2021

#### **CAP Activities and Systemic Correction**

The educational agency will provide the Department with documentation verifying the educational agency's completion of all CAP activities and all systemic corrections noted in this summary report. The Department will verify systemic correction through the review of this documentation and a review of additional student records.

Completion of CAP Activities and Systemic Correction Due Date: Monday February 7, 2022

Once the educational agency has completed all action plan activities, the educational agency will use the Department's monitoring process to create and implement a Strategic Improvement Plan with the Department and SST assistance.

For questions regarding the review, please contact: Raymond McCain, the Department's IDEA Monitoring Contact, at (614) 593-5477, toll-free at (877) 644-6338, or by e-mail at <a href="mailto:raymond.mccain@education.ohio.gov">raymond.mccain@education.ohio.gov</a>.

#### The Department's Review Findings and Educational Agency Required Actions

#### **Component 1: Child Find**

Each educational agency shall adopt and implement written policies and procedures approved by the Ohio Department of Education, Office for Exceptional Children, that ensure all children with disabilities residing within the educational agency, regardless of the severity of their disability, and who are in need of special education and related services are identified, located, and evaluated as required by the Individuals with Disabilities Education Improvement Act of 2004 and Federal Regulations at 34 C.F.R. Part 300 pertaining to child find, including the regulations at 34 C.F.R. 300.111 and 300.646 and Rule 3301-51-03 of the

Ohio Operating Standards serving Children with Disabilities.

| Record<br>Review<br>Item |                               | Evidence of Findings   | Evidence of Corrections/Recommendations   | Must be addressed in CAP                                      |
|--------------------------|-------------------------------|--|---|---|
| CF-1                     | Record Review                 | 34 CFR 300.305(a) [Review of Existing evaluation data] and OAC 3301-51-11 (c)(1)(a) [Preschool children eligible for special education] Preschool records were not reviewed.   | Individual Correction NA Systemic Correction NA   | ⊠ NA  |
|                          | Interviews/Public Comments    |  |   |   |
|                          | Concerns Noted                |  |   |   |
|                          | Record Review                 | OAC 3301-51-06 [Evaluations]  Fourteen (14) out of 14, or 100% of evaluations reviewed did not appropriately document interventions provided to resolve concerns for the child performing below grade-level standards. | Individual Correction The Department has verified that these students have a current ETR in place, so no additional individual correction is required.  Systemic Correction   | Yes The educational agency needs to address this finding in a |
| CF-2                     | Interviews/Public<br>Comments | Interviews indicated that Multi-Tiered System of Support (MTSS) is a new process this year since they switched from the Response to Intervention/Intervention Assistance Team (RTI/IAT) process.                       | The educational agency must submit evidence to the Department of written procedures and practices regarding documentation of intervention and supports provided prior to completion of the initial and reevaluation team report.  | Corrective<br>Action Plan.                                    |
|                          | Concerns Noted                |  | Opportunities for Improvement It is recommended that Crestline Exempted Village Local Schools develop a procedure of checks and balances to ensure interventions that are being provided to students are correctly documented within the ETR as well as in Part 2s, Summary of Interventions. |   |

| Record<br>Review<br>Item |                               | Evidence of Findings   | Evidence of Corrections/Recommendations  | Must be addressed in CAP                               |
|--------------------------|-------------------------------|--|--|--|
|                          |                               |  | Crestline will also need to provide new/additional training to all staff members regarding their new MTSS process.   |  |
| CF-3                     | Record Review                 | 34 CFR 300.501(b) [Parent participation in meetings] and OAC 3301-51-06 (E)(2)(a) [Evaluation procedures].  All student records showed evidence that the parent was afforded the opportunity to participate in the evaluation team planning meeting. | Individual Correction  NA  Systemic Correction  NA   | ⊠ NA   |
|                          | Interviews/Public Comments    |  |  |  |
|                          | Concerns Noted                |  |  |  |
|                          | Record Review                 | 34 CFR 300.300 [Parental Consent] Four out of 14, or 29% of student records reviewed did not provide evidence of parental consent obtained prior to new testing.   | Individual Correction  The educational agency must provide evidence that the parent provided informed, written consent for evaluation, based upon the planning form. Or the  | ∑ Yes     The educational agency needs to address this |
|                          | Interviews/Public<br>Comments | Some respondents indicated that parent involvement in the ETR process could be improved. Others stated that parents have had a multitude of participation during the planning process as well as the ETR meeting.                                    | agency must show documented repeated attempts to obtain informed, written consent to which the parent did not respond.  The evidence may include, prior written notice, parent invitation, communication log, or other   | finding in a<br>Corrective<br>Action Plan.             |
| CF-4                     | Concerns Noted                |  | documented attempts to obtain parental informed, written consent.  If the educational agency cannot provide documentation that the parent provided informed, written consent for evaluation, or did not respond to repeated attempts to obtain consent, the agency must conduct a reevaluation including documentation of parental consent.  Systemic Correction  The educational agency must submit evidence to the Department of written procedures and practices for obtaining parental consent obtained prior to new testing or policies and practices for moving forward when parents will not participate. |  |

| Record<br>Review<br>Item |                               | Evidence of Findings  | Evidence of Corrections/Recommendations   | Must be addressed in CAP  |
|--------------------------|-------------------------------|---|---|---|
|                          | Record Review                 | 34 CFR 300.304(c)(4) [Other evaluation procedures] OAC 3301-51-01 [Applicability of requirements and definitions] and 3301-51-06 (E)(2)(a) [Evaluation procedures] Thirteen (13) out of 14, or 93% of evaluations reviewed did not provide evidence that the evaluation addresses all areas related to the suspected disability.  | Individual Correction The educational agency will convene the ETR teams to conduct a reevaluation and provide evidence that the evaluation addresses all areas related to the suspected disability.  Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices to   | Yes The educational agency needs to address this finding in a Corrective Action Plan. |
| CF-5                     | Interviews/Public<br>Comments | Staff interviewed described difficulty in obtaining responses for Part 1 from the individuals listed on the planning form. It was discussed during the interview sessions that all teachers would benefit from attending training focusing on how to compliantly complete any Part 1 assigned to them. Several staff members indicated they were not actively involved in some of the ETR meetings and that they had little say in what assessments were going to be completed. | provide evidence that the evaluation addresses all areas related to the suspected disability.  Opportunities for Improvement Crestline Exempted Village Local Schools needs to develop an internal monitoring process which contains procedures to ensure:  Active team participation in the ETR planning process;  Appropriate evaluation data is available; and  Assessments identified on the planning form are being completed and represented in a Part 1. |   |
|                          | Concerns Noted                | In several cases, assessments included on the planning form were not presented in Part 1 of the ETR, and, in other cases, assessments were reported in Part 1 that were not included on the planning form. All assessments and data listed for evaluation on the ETR planning form, and agreed upon by the parent, must appear, in some form, in a Part 1 individual evaluator's assessment.  |   |   |
| CF-6                     | Record Review                 | 34 CFR 300.306(c) [Procedures for determining eligibility and educational need] Thirteen (13) out of 14, or 93% of evaluations reviewed did not show evidence of clearly stating the summary of assessment results.   | Individual Correction The educational agency will reconvene the ETR teams to conduct a reevaluation and provide a clear and concise summary of the data and assessment conducted that meets the requirements of 3301-51-  | Yes The educational agency needs to address this finding in a                         |
|                          | Interviews/Public<br>Comments | Staff members stated they would like to see more training on how to complete Part 2 and Part 3 (SLD) of the ETR, since the School Psychologist does most of that transition of information.   | 06 (G) (Summary of information). The IEP team must consider the results of this reevaluation.   | Corrective<br>Action Plan.  |

| Record<br>Review<br>Item |                               | Evidence of Findings   | Evidence of Corrections/Recommendations  | Must be addressed in CAP                                      |
|--------------------------|-------------------------------|--|--|---|
|                          | Concerns Noted                | The information from Part 1 was not summarized in a clear and concise manner in Part 2. In some instances, the information was entirely omitted. Information in Part 1s must be brought forward to Part 2 in a manner that can be clearly understood by the parent and used by the IEP team to develop meaningful goals and services.  | Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices regarding summary of data and assessment results.  Opportunities for Improvement In several instances, information that was identified in the Part 1s was omitted from Part 2. Providing additional training to both General Education Teachers as well as Intervention Specialists will greatly improve this area of noncompliance. |   |
|                          | Record Review                 | 34 CFR 300.306(c) [Procedures for determining eligibility and educational need] Eleven (11) out of 14, or 79% of evaluation team reports reviewed did not contain a clear and succinct description of educational needs.   | Individual Correction The educational agency will reconvene the ETR teams to conduct a reevaluation and provide a clear and succinct description of the student's educational needs. The IEP team must consider the results of this  | Yes The educational agency needs to address this finding in a |
| CF-7                     | Interviews/Public<br>Comments | Staff mentioned they have not received any formal training on how to complete a Part 1 but feel they know how to complete them. They also stated they were not sure if a new staff member joined Crestline, if they would know how those forms are to be completed. As far as the completion of any Part 2s, they do not play a role in their completions. The School Psychologist takes their information from the Part 1s and completes the Part 2s. | reevaluation.  Systemic Correction  The educational agency must submit evidence to the Department of written procedures and practices regarding description of educational needs.  Opportunities for Improvement  In several instances, Educational Needs that were identified in the Part 1s were omitted from Part 2.  | Corrective<br>Action Plan.                                    |
|                          | Concerns Noted                | Educational needs were sometimes generic in nature and did not address the child's individualized needs. Sometimes educational needs were stated in Part 1 but were not included in the Part 2 summary.  | Providing additional training to both General Education Teachers as well as Intervention Specialists will greatly improve this area of noncompliance.  |   |
| CF-8                     | Record Review                 | 34 CFR 300.306(c) [Procedures for determining eligibility and educational need] Eleven (11) out of 14, or 79% of evaluation team reports reviewed did not contain specific implications for instruction.   | Individual Correction The educational agency will reconvene the ETR teams to conduct a reevaluation and provide a clear description of specific implications for instruction. The IEP team must consider the results of this   | Yes The educational agency needs to address this finding in a |
|                          | Interviews/Public Comments    |  | reevaluation.  | Corrective<br>Action Plan.                                    |

| Record<br>Review<br>Item |                               | Evidence of Findings  | Evidence of Corrections/Recommendations   | Must be<br>addressed in<br>CAP   |
|--------------------------|-------------------------------|---|---|--|
|                          | Concerns Noted                | Record reviews revealed that implications for instruction were stated in Part 1 but were not included in the Part 2 summary. In some instances, only the School Psychologist's idea of implications for instruction was represented without a clear summary representing other evaluators from the team.  | Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices regarding implications for instruction.  Opportunities for Improvement In several instances, the implications for instruction and progress monitoring omitted specific educational needs that were identified, or listed non-instructional activities, such as accommodations or modifications. Providing additional training to both General Education Teachers as well as Intervention Specialists will greatly improve this area of noncompliance. |  |
| CF-9                     | Record Review                 | 34 CFR 300.306(a)(1) [Determination of eligibility] OAC 3301-51-01 (B)(21) [Applicability of requirements and definitions] Two out of 14, or 14% of evaluations reviewed did not show evidence that a group of qualified professionals, as appropriate to the suspected disability, were involved in determining whether the child is a child with a disability as well as the child's educational needs. | Individual Correction The educational agency must provide evidence that the ETR teams and other qualified professionals, as appropriate, participated in the determination of eligibility and educational needs. If not, the ETR team must reconvene and provide the Department evidence of group participation.  Systemic Correction The educational agency must submit evidence to the  | No The educational agency does not need to address this finding in a Corrective Action Plan. |
|                          | Interviews/Public<br>Comments | Several staff members indicated they were not actively involved in some of the ETR meetings and that they had little say in what assessments were going to be completed.  | Department of written procedures and practices regarding the eligibility determination process.   |  |
|                          | Concerns Noted                |   |   |  |

Component 2: Delivery of Services

Each educational agency shall have policies, procedures and practices to ensure that each child with a disability has an IEP that is developed, reviewed, and revised in a meeting and implemented in accordance with 300.320 through 300.324.

| Record<br>Review<br>Item |                               | Evidence of Findings   | Evidence of Correction/Recommendations   | Must be<br>addressed in<br>CAP  |
|--------------------------|-------------------------------|--|--|---|
| DS-1                     | Record Review                 | <ul> <li>SPP Indicator 13</li> <li>34 CFR 300.320(b) [Transition services]</li> <li>OAC 3301-51-07 (H)(2) [Definition of individualized education program]</li> <li>Six out of 7, or 86% of applicable IEPs review did not show evidence that the postsecondary transition plan met all eight required elements of the IDEA for the student, specifically in the following area(s):</li> <li>1. There are appropriate measurable postsecondary goal(s).</li> <li>2. The postsecondary goals are updated annually.</li> <li>3. The postsecondary goals were based on age appropriate transition assessment (AATA).</li> <li>4. There are transition services that will reasonably enable the student to meet the postsecondary goal(s).</li> <li>5. The transition services include courses of study that will reasonably enable the student to meet the postsecondary goal(s).</li> <li>6. The annual goal(s) are related to the student's transition service needs.</li> <li>7. There is evidence the student was invited to the IEP Team Meeting where transition services were discussed.</li> <li>8. When appropriate, there is evidence that a representative of any participating agency was invited to the IEP Team Meeting.</li> </ul> | Individual Correction The educational agency must reconvene the teams to review and correct the postsecondary transition plan for the IEPs identified as noncompliant or provide documentation of the student's withdrawal date from the educational agency.  Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices regarding transition services.  Opportunities for Improvement There is a need for all personnel involved with students of transition age to be trained in, and familiar with, the secondary transition process, including responsibilities at every level. | Yes The educational agency needs to address this finding in a Corrective Action Plan. |
|                          | Interviews/Public<br>Comments | Interviews revealed a lack of understanding of the secondary transition process and responsibilities, indicating a need for training and technical assistance in this area.  |  |   |
|                          | Concerns Noted                |  |  |   |

| Record<br>Review<br>Item |                               | Evidence of Findings   | Evidence of Correction/Recommendations  | Must be<br>addressed in<br>CAP  |
|--------------------------|-------------------------------|--|---|---|
| DS-2                     | Record Review                 | 34 CFR 300.320(a)(1) [Definition of individualized education program]  Fourteen (14) out of 14, or 100% of IEPs reviewed did not contain Present Levels of Academic Achievement and Functional Performance (PLOP) that addressed the needs of the student. | <ul> <li>Individual Correction</li> <li>The educational agency must reconvene the IEP teams of the IEPs identified as noncompliant to review and amend the PLOP related to each goal to include:</li> <li>Summary of current daily academic/ behavior and/ or functional performance (strengths and needs) compared to expected grade level standards in order to provide a frame of reference;</li> <li>PLOP must relate to the goal measurement;</li> <li>Baseline data provided for developing a measurable goal.</li> </ul> | Yes The educational agency needs to address this finding in a Corrective Action Plan. |
|                          | Interviews/Public<br>Comments | Teachers have an active role in developing the IEPs. Teachers receive a packet to complete regarding the student's current academic performance.   | Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices regarding the review of current academic/functional data when writing IEPs.  Opportunities for Improvement An internal monitoring and review system would be helpful to promote compliance in present levels of   |   |
|                          | Concerns Noted                | Often, the present levels of performance did not relate to the annual goal, and measurable baseline data were missing.   | performance. There is also an opportunity for professional development and/or targeted technical assistance in developing Present Levels of Academic Achievement and Functional Performance (PLOP) that clearly address the needs of the student.   |   |

| Record<br>Review<br>Item |   | Evidence of Findings   | Evidence of Correction/Recommendations   | Must be<br>addressed in<br>CAP   |
|--------------------------|---|--|--|--|
|                          | Record Review  Interviews/Public Comments | 34 CFR 300.320(a)(2)(i) [Definition of individualized education program]  Thirteen (13) out of 14, or 93% of IEPs reviewed did not contain measurable annual goals.    | The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend annual goals to contain the following critical elements:  1. Clearly defined behavior: the specific action the child will be expected to perform.  2. The condition (situation, setting or given material) under which the behavior is to be performed.  3. Performance criteria desired: the level the child must demonstrate for mastery and the number of times the child must demonstrate the skill or behavior.  Systemic Correction  The educational agency must submit evidence to the Department of written procedures and practices regarding the development of measurable annual IEP goals.  Opportunities for Improvement  There is an opportunity for professional development | <ul> <li>✓ Yes</li> <li>The educational agency needs to address this finding in a</li> <li>Corrective</li> </ul> |
| DS-3                     | Comments                                  | Measurable goals in the IEPs reviewed were inconsistent in quality and content. Often one or more required elements were missing.                                      |  | Action Plan.   |
|                          | Concerns Noted                            |  |  |  |
|                          |   |  |  |  |
|                          |   | 34 CFR 300.320(a)(2)(i) [Definition of   | Individual Correction  | ⊠ No   |
| DS-4                     | Record Review                             | individualized education program]  One out of nine, or 11% of applicable IEPs reviewed did not contain annual goals that address the child's academic area(s) of need. | The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend the IEP. Annual goals must address the academic needs of the child unless the team provides evidence that the goals were prioritized  | The educational agency does not need to address this finding in a Corrective                                     |
| DO- <del>4</del>         | Interviews/Public                         |  | based on the severity of the needs of the child.   | Action Plan.   |
|                          | Comments  Concerns Noted                  |  | Systemic Correction  The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of addressing identified academic needs.  |  |

| Record<br>Review<br>Item |   | Evidence of Findings  | Evidence of Correction/Recommendations   | Must be<br>addressed in<br>CAP   |
|--------------------------|---|---|--|--|
| DS-5                     | Record Review  Interviews/Public Comments  Concerns Noted | 34 CFR 300.320(a)(2)(i) [Definition of individualized education]  Two out of 11, or 18% of applicable IEPs reviewed did not contain annual goals that address the child's functional area(s) of need.   | Individual Correction  The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend the IEP. Annual goals must address the functional needs of the child unless the team provides evidence that the goals were prioritized based on the severity of the needs of the child.  Systemic Correction  The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of addressing identified functional needs. | No The educational agency does not need to address this finding in a Corrective Action Plan. |
|                          | Record Review   | 34 CFR 300.320(a)(4) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e)(i) [Definition of IEP] Nine out of 14, or 64% of IEPs reviewed did not contain a statement of specially designed instruction that addresses the individual needs of the child and supports the annual goals. | Individual Correction The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend the specially designed instruction, as appropriate, to address the needs of the child.  Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices   | Yes The educational agency needs to address this finding in a Corrective Action Plan.        |
| DS-6                     | Interviews/Public<br>Comments                             | Intervention specialists and general educators described that specially designed instruction (SDI) is individualized to students but struggled to explain what makes this instruction specialized.  | regarding the IEP process of determining specially designed instruction.   |  |
|                          | Concerns Noted  | In some cases, the specially designed instruction was generic in nature and not individualized to the needs of the student described in the present levels and goals. Other examples lacked specific instructional reference and only listed accommodations.  |  |  |

| Record<br>Review<br>Item |                               | Evidence of Findings   | Evidence of Correction/Recommendations   | Must be<br>addressed in<br>CAP   |
|--------------------------|-------------------------------|--|--|--|
|                          | Record Review                 | 34 CFR 300.320(a)(7) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(i) [Definition of IEP] Four out of 14, or 29% of IEPs reviewed did not indicate the specific location where the specially designed instruction will be provided. | Individual Correction The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend the location where the specially designed instruction will be provided.  Systemic Correction The educational agency must submit evidence to the | No The educational agency does not need to address this finding in a Corrective Action Plan. |
| DS-7                     | Interviews/Public<br>Comments |  | Department of written procedures and practices regarding the IEP process of determining the location where specially designed instruction will occur.  |  |
|                          | Concerns Noted                | Several different locations were listed for the delivery of SDIs. "Separate School" and "School Environment" were the main ones listed. Some SDIs contained two different locations for one SDI.   |  |  |
|                          | Record Review                 | 34 CFR 300.320(a)(7) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(i) [Definition of IEP] Ten out of 14, or 71% of IEPs reviewed did not indicate the amount of time and frequency of the specially designed instruction.           | Individual Correction The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend the amount of time and frequency of the specially designed instruction.  Systemic Correction The educational agency must submit evidence to the | Yes The educational agency needs to address this finding in a Corrective Action Plan.        |
| DS-8                     | Interviews/Public<br>Comments |  | Department of written procedures and practices regarding the IEP process of determining the amount and frequency of specially designed instruction to be provided.   |  |
|                          | Concerns Noted                | Seven IEPs reviewed contained two providers for one SDI.   | Opportunities for Improvement There is an opportunity for professional development and/or targeted technical assistance in correctly identifying the appropriate provider for the delivery of SDIs.  |  |

| Record<br>Review<br>Item |   | Evidence of Findings  | Evidence of Correction/Recommendations   | Must be<br>addressed in<br>CAP   |
|--------------------------|---|---|--|--|
| DS-9                     | Record Review  Interviews/Public Comments | 34 CFR 300.320(a)(7) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e) [Definition of IEP] One out of eight, or 13% of applicable IEPs reviewed did not identify related services that address the needs of the child and support the annual goals. | Individual Correction The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend the IEP to include related services that were identified as needed in the IEP.  Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of addressing identified related service needs. | No The educational agency does not need to address this finding in a Corrective Action Plan. |
|                          | Concerns Noted                            |   |  |  |
| DS-10                    | Record Review                             | 34 CFR 300.320(a)(7) [Definition of individualized education] OAC 3301-51-07 (H)(1)(i) [Definition of IEP] Two out of eight, or 25% of applicable IEPs reviewed did not indicate the location where the related services will be provided.                                  | Individual Correction The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend the IEP to include the location where the related services will be provided.  Systemic Correction The educational agency must submit evidence to the  | No The educational agency does not need to address this finding in a Corrective Action Plan. |
|                          | Interviews/Public Comments                |   | Department of written procedures and practices regarding the IEP process of determining the location   |  |
|                          | Concerns Noted                            |   | where related services will occur.   |  |
| DS-11                    | Record Review                             | 34 CFR 300.320(a)(7) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(i) [Definition of IEP] All applicable IEPs indicated the amount of time, duration and frequency of the related services to be provided.   | Individual Correction NA Systemic Correction NA  | ⊠ NA   |
|                          | Interviews/Public Comments                |   |  |  |
|                          | Concerns Noted                            |   |  |  |

| Record<br>Review<br>Item |   | Evidence of Findings  | Evidence of Correction/Recommendations   | Must be<br>addressed in<br>CAP   |
|--------------------------|---|---|--|--|
| DS-12                    | Record Review                                   | 34 CFR 300.324(a)(2)(v) [Development of IEP] OAC 3301-51-01(B)(3) [Applicability of requirements and definitions] One out of five, or 20% of applicable IEPs reviewed did not identify assistive technology to enable the child to be involved and make progress in the general education curriculum. | Individual Correction The educational agency must reconvene the teams of the IEPs identified as noncompliant to review assistive technology and/or services that would directly assist the child with a disability to increase, maintain, or improve their functional capabilities and include them on the IEP.  Systemic Correction   | No The educational agency does not need to address this finding in a Corrective Action Plan. |
|                          | Interviews/Public<br>Comments<br>Concerns Noted |   | The educational agency must submit evidence to the Department of written procedures and practices regarding assistive technology.  |  |
| DS-13                    | Record Review                                   | 34 CFR 300.320(a)(6)(i) [Definition of individualized education] OAC 3301-51-07 (H)(1)(g) [Definition of IEP] Eleven out of 13, or 85% of applicable IEPs reviewed did not identify accommodations provided to enable the child to be involved and make progress in the general education curriculum. | Individual Correction The educational agency must reconvene the teams of the IEPs identified as noncompliant to review the accommodations that would directly assist the child to access the course content without altering the scope or complexity of the information taught and include them on the IEP.  Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices | Yes The educational agency needs to address this finding in a Corrective Action Plan.        |
|                          | Interviews/Public<br>Comments                   | Staff members stated that all students are provided with some type of accommodation to help meet their individual needs.  | regarding accommodations.  Opportunities for Improvement  There is an opportunity for professional development and/or targeted technical assistance in identifying   |  |
|                          | Concerns Noted                                  | Accommodations listed in the IEPs reviewed were stated as "when available," "as appropriate," "as permitted," "as needed," and "at teacher's discretion."   | accommodations. An internal monitoring and review system would be helpful to promote compliance in the area of accommodations.   |  |

| Record<br>Review<br>Item | Evidence of Findings          |  | Evidence of Correction/Recommendations  | Must be addressed in CAP  |
|--------------------------|-------------------------------|--|---|---|
| DS-14                    | Record Review                 | 34 CFR 300.320(a)(4) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e) [Definition of IEP] All applicable IEPs reviewed identified modifications to enable the child to be involved and make progress in the general education curriculum.   | Individual Correction NA Systemic Correction NA   | ⊠ NA  |
|                          | Interviews/Public Comments    |  |   |   |
|                          | Concerns Noted                |  |   |   |
| DS-15                    | Record Review                 | 34 CFR 300.320(a)(4) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e) [Definition of IEP] Three out of seven, or 43% of applicable IEPs reviewed did not identify supports for school personnel to enable the child to be involved and make progress in the general education curriculum. | Individual Correction The educational agency must reconvene the teams of the IEPs identified as noncompliant to review the supports for school personnel that were identified by the IEP team and define the supports on the IEP including who will provide the support and when it will take place.  Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices regarding supports for school personnel.  Opportunities for Improvement There is a need to better describe adult-to-adult consultation. Clarify the support to include who will | ∑ Yes     The educational agency needs to address this finding in a Corrective Action Plan. |
|                          | Interviews/Public<br>Comments | The concept of supports for school personnel is generally understood by district personnel, however, its description in the IEP is not always well-developed.  |   |   |
|                          | Concerns Noted                |  | receive; who will deliver; when the support will be provided; and for what purpose. For example, the Intervention Specialist consults with the General Education Teachers and Paraprofessionals on progress monitoring for a particular goal or goals. General Education Teachers/Paraprofessionals would then be listed as receiving support for school personnel.   |   |

| Record<br>Review<br>Item | Evidence of Findings                                      |   | Evidence of Correction/Recommendations  | Must be<br>addressed in<br>CAP  |
|--------------------------|---|---|---|---|
| DS-16                    | Record Review   | OAC 3301-51-07 (H)(1)(h)(ii) [Definition of IEP] All applicable student records reviewed had a justification statement explaining why the student cannot participate in the regular assessment and why the alternate assessment is appropriate for the student.   | Individual Correction  NA  Systemic Correction  NA  | ⊠ NA  |
|                          | Interviews/Public Comments                                |   |   |   |
|                          | Concerns Noted  |   | In this lead Connection   | N   |
| DS-17                    | Record Review  Interviews/Public Comments  Concerns Noted | OAC 3301-51-07(L)(2) [Development, review and revision of IEP]  Twelve (12) out of 13, or 92% of applicable student records reviewed did not show evidence of progress reporting data collected and analyzed to monitor performance on each goal.  Collaboration between intervention specialists and general education teachers in reviewing student data for progress reporting was described by interviewees.  Progress reports reviewed were missing both quantitative and qualitative data and did not relate to the measurable goal, but to the objectives instead. | Individual Correction None  Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices regarding measurable annual goals and services consistent with progress made.  Opportunities for Improvement Crestline Exempted Village Schools would benefit from developing a procedure to ensure progress reporting is correctly documented, stating how the student is progressing towards mastering their measurable annual goals. Training from SSTs as well as an internal monitoring review system would be helpful to promote compliance in the area of progress | Yes The educational agency needs to address this finding in a Corrective Action Plan. |
| DS-18                    | Record Review   | OAC 3301-51-07(L) [Development, review and revision of IEP]  There were no IEPs reviewed to show evidence that revisions were made based on data indicating changes in student needs or abilities.  | monitoring.  Individual Correction  NA  Systemic Correction  NA   | ⊠ NA  |
|                          | Interviews/Public Comments                                |   |   |   |
|                          | Concerns Noted  |   |   |   |

| Record<br>Review<br>Item | Evidence of Findings          |  | Evidence of Correction/Recommendations   | Must be<br>addressed in<br>CAP   |
|--------------------------|-------------------------------|--|--|--|
| DS-19                    | Record Review                 | 34 CFR 300.321(5) [IEP team] OAC 3301-51-07(I) [IEP team] Two out of 14, or 14% of IEPs reviewed did not indicate that the IEP Team included a group of qualified professionals. | Individual Correction  For the IEPs identified as noncompliant, the educational agency must:  Provide documentation that the parent was informed prior to the IEP meeting that the person qualified to interpret the instructional implications of evaluation results would not participate in the meeting, and  Provide a written excuse signed by the parents and the educational agency that allowed the person qualified to interpret the instructional implications of evaluation results not to be in attendance at the IEP meeting, or  Reconvene the IEP team to review the IEP with all required members present.  Systemic Correction  The educational agency must submit evidence to the Department of written procedures and practices regarding the involvement of people qualified to interpret the instructional implications of evaluation results in the IEP process. | No The educational agency does not need to address this finding in a Corrective Action Plan. |
|                          | Interviews/Public<br>Comments |  |  |  |
|                          | Concerns Noted                |  |  |  |

### Component 3: Least Restrictive Environment (LRE) and IEP Alignment

Each educational agency shall ensure that to the maximum extent appropriate, children with disabilities, including children in public or nonpublic institutions or other care facilities, are educated with children who are nondisabled; and that a continuum of alternative placements is available to meet the needs of children with disabilities for special education and related services.

| Record<br>Review<br>Item | Evidence of Findings |  | Evidence of Correction/Recommendations   | Must be<br>addressed in<br>CAP  |
|--------------------------|----------------------|--|--|---|
| LRE-1                    | Record Review        | 34 CFR 300.114 [LRE requirements] and 300.320(a)(5) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(f) [Definition of individualized education program] Nine out of 12, or 75% of applicable IEPs reviewed did not include an explanation of the extent to which the child will not participate with nondisabled children in the general education classroom. | Individual Correction  The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and include a justification as to why the child was removed from the general education classroom.  The justification should:  Be based on the needs of the child, not the disability.  Reflect that the team has given adequate                      | Yes The educational agency needs to address this finding in a Corrective Action Plan. |
|                          | Interviews           |  | consideration to meeting the student's needs in the  |   |
|                          | Concerns Noted       | Often the justification for removal from the general education setting was not fully explained. This is a problematic area for some IEPs where LRE placement in section 7 did not match the explanation in the placement in section 11.  | <ul> <li>general classroom with supplementary aids and services.</li> <li>Document that the nature or severity of the disability is such that education in general education classes, even with the use of supplementary aids and services, cannot be achieved satisfactorily.</li> <li>Describe potential harmful effects to the child or others, if applicable.</li> </ul> |   |
|                          |                      |  | Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices regarding the least restrictive environment placement decision process.  |   |
|                          |                      |  | Opportunities for Improvement  There is an opportunity for professional development and/or targeted technical assistance in developing LRE statements that explain the extent to which the child will not participate with nondisabled children in the general education classroom. An internal monitoring and review system would be helpful to promote compliance in LRE.  |   |