



August 4, 2023

**Amanda-Clearcreek Local School District**  
**IRN: 046847**

**Ohio the Department of Education, Office for Exceptional Children**  
**2022-2023 IDEA Monitoring Review Summary Report**

**Introduction**

The Ohio Department of Education's Office for Exceptional Children would like to extend appreciation to the Amanda-Clearcreek Local 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 noncompliant.

Systemic Corrections refers to noncompliance 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 April 26, 27 and May 2, 2023. as part of its general supervision requirements under the Individuals with Disabilities Education Act (IDEA).

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. Parent Input**

On April 18, 2023, Amanda Clearcreek mailed 328 letters of the Department's notification of review to all families with students with disabilities in the educational agency. The educational agency posted the notification of review on its website which included a link to a recorded presentation from the Department providing an overview of the monitoring review process. The presentation also provides contact



information and requests parents to provide comments to the Department regarding the special education program in their school. The notification of review was also posted on the Department's website.

The Department received two emails with comments and four phone calls with messages.

## 2. Pre-Onsite Data Analysis

The Department conducted a comprehensive review which included district, building and grade level data; Special Education 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/IEP Verification

Prior to the onsite visit, the Department consultants reviewed 20 records of school-age students with disabilities. The Department consultants selected records of students with disabilities from a variety of disability categories and ages. Ten (10) student records were selected for IEP verification in the classroom setting. Overall, the verifications went well as the intervention specialists/general education teachers were very familiar with the content of their students' IEP and were delivering accommodations as written.

## 4. Staff/Administrative Interviews

On April 26 and May 2, 2023, the Department consultants held eight sessions of interviews with seven administrators and 49 teachers, school counselors, related services personnel, paraprofessionals and school psychologists. The contracted school psychologists were interviewed virtually on May 10, 2023. 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:**

During the interview sessions it was very evident that the culture of the district's special education services and programs was going through a positive change/growth with the hiring of the new special education director. Common response of "that's the way we did things before the new special education director came to our district and now, we are better equipped to complete our duties" was the theme.

### **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 **Evidence of Findings and Evidence of Correction/Recommendations table below**, and the attached **Individual Record Review Comment Sheets 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 [Joseph.Kujkowski@education.ohio.gov](mailto:Joseph.Kujkowski@education.ohio.gov) 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: September 27, 2023**

## Department Trainings

As part of the Department monitoring process, Amanda-Clearcreek Local School District personnel, as identified by the Department, are required to complete the OEC Required Special Education Essentials 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 80% or more on each quiz. Participants who do not achieve at least 80% will be contacted by the State Support Team (SST) for additional training.

**Completion of LMS Training Modules Due Date: September 27, 2023**

## 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 is provided in a separate report.

**Individual Correction Due Date: November 17, 2023**

## 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: April 5, 2024**

Once the educational agency has completed all corrective action plan activities, the educational agency will plan for continuous improvement through the One Needs Assessment and One Plan with Department and SST assistance.

For questions regarding the review, please contact: Joe Kujkowski, the Department's IDEA Monitoring Contact, at 614-623-2986, toll-free at 877-644-6338, or by e-mail at [joseph.kujkowski@education.ohio.gov](mailto:joseph.kujkowski@education.ohio.gov).



**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 Review Item	Evidence of Findings	Evidence of Corrections/Recommendations	Must be addressed in CAP
CF-1	<p><b>Record Review</b></p> <p><b>34 CFR 300.305(a) [Review of Existing evaluation data] and OAC 3301-51-11 (c)(1)(a) [Preschool children eligible for special education]</b>            Preschool records were not reviewed.</p>	<p><u>Individual Correction</u>            NA</p> <p><u>Systemic Correction</u>            NA</p>	<input checked="" type="checkbox"/> NA
CF-2	<p><b>Record Review</b></p> <p><b>OAC 3301-51-06 [Evaluations]</b>            Eight out of 20, or 40%, evaluations reviewed did not appropriately document interventions provided to resolve concerns for the child performing below grade-level standards.</p>	<p><u>Individual Correction</u>            The Department has verified that these students have a current ETR in place, so no additional individual correction is required.</p> <p><u>Systemic Correction</u>            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.</p> <p><u>Opportunities for Improvement</u>            It is recommended Amanda-Clearcreek develop a procedure of checks and balances to ensure interventions that are being provided to students are implemented with fidelity, which includes documenting the required components:</p> <ul style="list-style-type: none"> <li>• A description of the research-based interventions(s) used.</li> </ul>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	<p><b>Interviews/Public Comments</b></p> <p>During interviews, it was noted that the Multi-Tiered System of Supports (MTSS) process has been undergoing changes with new leadership. It was noted that staff are familiar with the Intervention Assistance Team (IAT) process, but they still need to expand and improve the process in providing interventions to students who are struggling. Staff shared that informal conversations take place regarding intervention strategies and discussions on which students are struggling.</p>		
	<p><b>Concerns Noted</b></p> <p>Although interventions were provided through various processes across the district, the results are not uniformly documented in ETRs.</p>		



Record Review Item	Evidence of Findings		Evidence of Corrections/Recommendations	Must be addressed in CAP
	<p>Frequently, the district's initial ETRs did not contain a summary of interventions implemented to include description, intensity, time, and results. For reevaluations, if no additional interventions were provided, simply providing a statement that it was determined by the ETR team that the student is making adequate progress with current special education supports and services required in the IEP is sufficient.</p>		<ul style="list-style-type: none"> <li>• How long the intervention was provided (how many weeks).</li> <li>• The intensity of the intervention – how often, and for how many minutes.</li> <li>• A description of the results compared to the baseline data.</li> <li>• The decision as a result of the intervention(s).</li> </ul>	
CF-3	Record Review	<p><b>34 CFR 300.501(b) [Parent participation in meetings] and OAC 3301-51-06 I(2)(a) [Evaluation procedures].</b></p> <p>Eight out of 20, or 40%, student records reviewed did not show evidence that the parent was afforded the opportunity to participate in the evaluation team planning meeting.</p>	<p><u>Individual Correction</u></p> <p>The educational agency must provide evidence that the parent was involved or provided the opportunity to participate in the evaluation planning process. The evidence may include evaluation planning form, prior written notice, parent invitation, referral form or communication log.</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices that include the parent in the evaluation planning process.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	<p>Discussions focused on ensuring documentation of attempts to secure parent involvement in the planning process; and in implementing a digital signature process for parents. Interviewees described how the process has improved within the past year with new leadership.</p>		
	Concerns Noted	<p>On several record reviews, it was noted that the Planning Form did not have a signature nor was there documentation provided (e.g., PR-01, OP-9, etc.) that the parent was afforded an opportunity to participate.</p>		



Record Review Item	Evidence of Findings		Evidence of Corrections/Recommendations	Must be addressed in CAP
CF-4	Record Review	<p><b>34 CFR 300.300 [Parental Consent]</b> Ten out of 20, or 50%, student records reviewed did not provide evidence of parental consent obtained prior to evaluation.</p>	<p><u>Individual Correction</u> The educational agency must provide evidence that the parent provided informed, written consent for evaluation, based upon the planning form. Or the 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 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.</p> <p><u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices for obtaining informed parental consent.</p>	<p><input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	Discussions focused on ensuring documentation of attempts to secure informed parental consent in the ETR process. Interviewees described how the process has improved within the past year with new leadership.		
	Concerns Noted	On several record reviews it was noted that the PR-05 was either blank or district wrote in “verbal consent” without documentation that the parent failed to respond. There was no PR-01 documenting that the PR-05 would be sent home to secure informed parental consent.		
CF-5	Record Review	<p><b>34 CFR 300.304l(4) [Other evaluation procedures]</b> <b>OAC 3301-51-01 [Applicability of requirements and definitions] and 3301-51-06 l(2)(a) [Evaluation procedures]</b>  Twenty (20) out of 20, or 100%, evaluations reviewed did not provide evidence that the evaluation addresses all areas related to the suspected disability.</p>	<p><u>Individual Correction</u> 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.</p> <p><u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices to provide evidence that the evaluation addresses all areas related to the suspected disability.</p>	<p><input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.</p>





Record Review Item	Evidence of Findings		Evidence of Corrections/Recommendations	Must be addressed in CAP
	<b>Interviews/Public Comments</b>	Staff shared in interviews that the ETR process is a true team approach in determining what areas to access for additional testing and sufficient data available.	<p><u>Opportunities for Improvement</u> Amanda-Clearcreek must develop an internal monitoring process which contains procedures to ensure:</p> <ul style="list-style-type: none"> <li>• Active team participation in the ETR planning process.</li> <li>• Appropriate evaluation data is available; and</li> <li>• Assessments identified on the Planning Form are being completed and represented in a Part 1.</li> </ul> <p>There is a need to refine the ETR planning process and individual evaluator's (Part 1s) input process. The district should consider using the assessment title from the Planning Form when completing a Part 1.</p> <p>Observations are required for all initial and reevaluations. The local educational agency must ensure that the child is observed in the child's learning environment (including the general education classroom setting) to document the child's academic performance and behavior in the area of difficulty (300.310).</p>	
<b>Concerns Noted</b>	Several records did not indicate observation and/or observation was indicated as "additional testing/data needed" but date, time and location of the observation were missing.			
<b>CF-6</b>	<b>Record Review</b>	<p><b><i>34 CFR 300.3061 [Procedures for determining eligibility and educational need]</i></b> Fifteen (15) out of 20, or 75%, evaluations reviewed did not show evidence of clearly stating the summary of assessment results.</p>	<p><u>Individual Correction</u> 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 3301-51-06 (G) (Summary of information). The IEP team must consider the results of this reevaluation.</p>	<p><input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.</p>
	<b>Interviews/Public Comments</b>	Through interviews, staff shared that the records reflect the previous practices which has since been enhanced to address the concerns. The staff has requested additional training.		



Record Review Item	Evidence of Findings		Evidence of Corrections/Recommendations	Must be addressed in CAP
	<b>Concerns Noted</b>	The information from Part 1s were not summarized in a clear and concise manner in Part 2. In some instances, the information was entirely omitted without explanation. Information in Part 1 must be brought forward with a clear and concise summary which is clearly understood by the parent and used to develop and individualized and actionable IEP that is an educational benefit to the student.	<u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding summary of data and assessment results.  <u>Opportunities for Improvement</u> Amanda-Clearcreek has an opportunity to develop an internal practice that will monitor the completion of the Part 2 Summary of the Evaluation Team Report (ETR) to ensure that all areas assessed in a Part 1 Individual Evaluator's Assessment are summarized in the Part 2 Team Summary. This is an opportunity for professional development and/or targeted technical assistance from SST staff.	
CF-7	<b>Record Review</b>	<b>34 CFR 300.306l [Procedures for determining eligibility and educational need]</b> Twelve (12) out of 20, or 60%, evaluation team reports reviewed did not contain a clear and succinct description of educational needs.	<u>Individual Correction</u> 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 reevaluation.  <u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding description of educational needs.  <u>Opportunities for Improvement</u> Amanda-Clearcreek has an opportunity to develop an internal monitoring process that will ensure the Part 2 Team Summary of the Evaluation Team Report contains all areas assessed in a Part 1 Individual Evaluator's Assessment. This is an opportunity for professional development and/or targeted technical assistance from the SST staff.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	<b>Interviews/Public Comments</b>	Through interviews, it appeared that there has been some professional development/coaching on writing Part 1s, but there is still some confusion regarding what kind of data to include for all three required components.		
	<b>Concerns Noted</b>	Some ETRs did not include all the needs identified in Part 1, or educational needs described in Part 1 were omitted in Part 2 without explanation and were not summarized in Part 2.		





Record Review Item	Evidence of Findings		Evidence of Corrections/Recommendations	Must be addressed in CAP
CF-8	Record Review	<p><b>34 CFR 300.306l [Procedures for determining eligibility and educational need]</b></p> <p>Eleven (11) out of 20, or 55%, evaluation team reports reviewed did not contain specific implications for instruction.</p>	<p><u>Individual Correction</u></p> <p>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 reevaluation.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	<p>Through interviews, it appeared that there has been some professional development/coaching on writing Part 1s, but there is still some confusion regarding what kind of data to include for all three required components.</p>	<p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding implications for instruction.</p>	
	Concerns Noted	<p>In some records, implications for instruction were noted in Part 1s but not included in the Part 2 (or those implications for instruction were omitted from Part 2 without explanation.)</p>	<p><u>Opportunities for Improvement</u></p> <p>Amanda-Clearcreek has an opportunity to develop an internal practice that will monitor the completion of the Part 2 Team Summary of the Evaluation Team Report to ensure that all areas assessed in a Part 1 Individual Evaluator’s Assessment are summarized in the Part 2 Team Summary. This is an opportunity for professional development and/or targeted technical assistance from SST staff.</p>	
CF-9	Record Review	<p><b>34 CFR 300.306(a)(1) [Determination of eligibility]</b>  <b>OAC 3301-51-01 (B)(21) [Applicability of requirements and definitions]</b></p> <p>Seven out of 20, or 35%, 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.</p>	<p><u>Individual Correction</u></p> <p>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.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>



Record Review Item	Evidence of Findings		Evidence of Corrections/Recommendations	Must be addressed in CAP
	<b>Interviews/Public Comments</b>	Several staff members indicated they were not actively involved in some of the ETR meetings and that they had little to say in the assessments or outcomes for their students. General education teachers were sometimes absent during the ETR meeting.	<u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding the eligibility determination process.  <u>Opportunities for Improvement</u> It is recommended Amanda-Clearcreek develop a procedure to ensure that all required team members of the ETR team are in attendance for the ETR meetings.	
<b>Concerns Noted</b>	Review of records indicated that all required team members were often not present at the ETR meeting.			
<b>CF-10</b>	<b>Record Review</b>	<b><i>OAC 3301-51-01 (B)(10) [Definitions] and 3301-51-06 [Evaluations]</i></b> Ten out of 20, or 50%, evaluations reviewed did not provide a justification for the eligibility determination decision.	<u>Individual Correction</u> The educational agency will reconvene the ETR teams to conduct a reevaluation and provide a clear justification for the eligibility determination.  <u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding the eligibility determination decision.  <u>Opportunities for Improvement</u> Amanda-Clearcreek would benefit from professional development and support from SST staff on how to write a compliant justification statement for the disability determination.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	<b>Interviews/Public Comments</b>	During the interviews, the staff indicated they would like additional training to understand how to write a comprehensive eligibility justification statement.		
	<b>Concerns Noted</b>	When reviewing records, it was noted that the justification often did not include how the student's disability affects the child's access to and progress in the general education curriculum.		



## 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 Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
DS-1	Record Review	<p><b>SPP Indicator 13</b>  <b>34 CFR 300.320(b) [Transition services]</b>  <b>OAC 3301-51-07 (H)(2) [Definition of individualized education program]</b></p> <p>Ten out of 10 applicable IEPs reviewed, or 100%, 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):</p> <ol style="list-style-type: none"> <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> </ol>	<p><u>Individual Correction</u></p> <p>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.</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding transition services.</p> <p><u>Opportunities for Improvement</u></p> <p>There is an opportunity for professional development and/or targeted technical assistance in developing a streamlined process to select and conduct age-appropriate transition assessments (AATAs) that clearly identify the students' preferences, interests, needs, and strengths (PINS) that clearly address the needs of the student, as well as relate to the development of the postsecondary goal.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>



Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
	Interviews/Public Comments	Staff indicated that professional development and/or targeted technical assistance on the selection of Age-Appropriate Transition Assessments (AATAs) would assist with providing comprehensive preferences, interests, needs, and strengths (PINS).		
	Concerns Noted	<p>Although the postsecondary goals can be the same as in the previous year, in many cases the transition services were also the same. If the student continues to work on the same transition services, provide documentation of why those services need to continue.</p> <p>In some cases, the development of the current postsecondary goal(s) was not based on current AATAs.</p>		
DS-2	Record Review	<p><b>34 CFR 300.320(a)(1) [Definition of individualized education program]</b></p> <p>Eighteen (18) out of 20, or 90%, IEPs reviewed did not contain Present Levels of Academic Achievement and Functional Performance (PLOP) that addressed the needs of the student.</p>	<p><u>Individual Correction</u></p> <p>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 the following information as it relates to each goal:</p> <ul style="list-style-type: none"> <li>• Summary of current daily academic/behavior and/or functional performance compared to expected <b>grade-level</b> standards or to expected age-appropriate performance in order to provide a frame of reference for annual goal development in the specific area of academic and/or functional need;</li> <li>• Baseline data provided for developing a measurable goal (for example, ETR results, if current, formative academic assessments, curriculum-based measurements, transition assessments or functional behavior assessments);</li> <li>• Current performance measurement <b>directly</b> relates to the goal measurement.</li> </ul>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	Based on the interview sessions, there is a lack of understanding among staff members regarding the required contents of the present levels to develop an annual measurable goal(s).		
	Concerns Noted	<p>Record reviews indicated that present levels of performance often lacked clear, current baseline that is directly related to the development of the annual measurable goal.</p> <p>Also, in many cases the present levels of performance were missing the required comparison to grade-level or age-appropriate performance expectations.</p>		



Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
			<p><u>Systemic Correction</u> 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.</p> <p><u>Opportunities for Improvement</u> There is an opportunity for professional development and/or targeted technical assistance in developing present levels of academic achievement and functional performance that clearly address the needs of the student, as well as relate to the development of the annual measurable goal.</p>	
DS-3	Record Review	<p><b>34 CFR 300.320(a)(2)(i) [Definition of individualized education program]</b> Eleven (11) out of 20, or 55%, IEPs reviewed did not contain measurable annual goals.</p>	<p><u>Individual Correction</u> 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:</p> <ol style="list-style-type: none"> <li>1. <u>Clearly defined behavior</u>: the specific action the child will be expected to perform.</li> <li>2. The <u>condition</u> (situation, setting or given material) under which the behavior is to be performed.</li> <li>3. <u>Performance criteria</u> desired: the level the child must demonstrate for mastery <b>and</b> the number of times the child must demonstrate the skill or behavior.</li> </ol> <p><u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding the development of measurable annual IEP goals.</p>	<p><input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	<p>General education teachers and paraprofessionals would like to have more input in developing annual measurable goals for their students. With this in place, present levels of performance relating to the goals could be obtained from staff when they are requested.</p>		
	Concerns Noted	<p>Annual measurable goals often did not contain all four required elements or were worded in an unclear manner with too many measurements or skills in one goal.</p> <p>At times, the IEP goals lacked clarity of behaviors expected and of the specific measurements for achievement and mastery of the goals.</p>		



Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
			<u>Opportunities for Improvement</u> There is an opportunity for professional development and targeted technical assistance in writing compliant measurable annual goals.	
DS-4	Record Review	<b>34 CFR 300.320(a)(2)(i) [Definition of individualized education program]</b> Seven out of 17 applicable IEPs reviewed, or 41%, did not contain annual goals that address the child's academic area(s) of need.	<u>Individual Correction</u> 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 based on the severity of the needs of the child.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	During interviews, staff indicated that the new administration is implementing a streamlined process to ensure that all educational needs are addressed through the development of an annual measurable goal or through accommodations.	<u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of addressing identified academic needs.	
	Concerns Noted	Record reviews indicated in some cases educational needs were not addressed through development of an annual measurable goal or through accommodations.	<u>Opportunities for Improvement</u> There is an opportunity for professional development and targeted technical assistance in addressing all educational needs as identified in the IEP and current ETR.	





Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
DS-5	Record Review	<p><b>34 CFR 300.320(a)(2)(i) [Definition of individualized education]</b></p> <p>Three out of 10 applicable IEPs reviewed, or 30%, did not contain annual goals that address the child’s functional area(s) of need.</p>	<p><u>Individual Correction</u> 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.</p> <p><u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of addressing identified functional needs.</p> <p><u>Opportunities for Improvement</u> There is an opportunity for professional development and targeted technical assistance in addressing all functional needs as identified in the IEP and current ETR.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	<p>During interviews staff indicated that the new administration is implementing a streamlined process to ensure that all functional needs are addressed through the development of an annual measurable goal or through accommodations.</p>		
	Concerns Noted	<p>Record reviews indicated in some cases functional needs were not addressed through development of an annual measurable goal or through accommodations.</p>		
DS-6	Record Review	<p><b>34 CFR 300.320(a)(4) [Definition of individualized education program]</b> <b>OAC 3301-51-07 (H)(1)I(i) [Definition of IEP]</b></p> <p>Nine out of 20, or 45%, IEPs reviewed did not contain a statement of specially designed instruction including related services that addresses the individual needs of the child and supports the annual goals.</p>	<p><u>Individual Correction</u> 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.</p> <p><u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of determining specially designed instruction.</p> <p><u>Opportunities for Improvement</u> Professional development and targeted technical assistance from SSTs as well as an internal monitoring</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	<p>During staff interviews, there was inconsistency in describing specially designed instruction and accommodations.</p>		
	Concerns Noted	<p>In some cases, the specially designed instruction was generic in nature and not individualized to the needs of the student described in the present</p>		



Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
		levels and goals. Other examples lacked specific instructional reference and only listed accommodations or instructional settings	review system would assist in promoting compliance in the area of specially designed instruction.	
DS-7	Record Review	<p><b>34 CFR 300.320(a)(7) [Definition of individualized education program]</b>  <b>OAC 3301-51-07 (H)(1)(i) [Definition of IEP]</b>            Seven out of 20, or 35%, IEPs reviewed did not indicate the specific location where the specially designed instruction will be provided.</p>	<p><u>Individual Correction</u>            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.</p> <p><u>Systemic Correction</u>            The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of determining the location where specially designed instruction will occur.</p> <p><u>Opportunities for Improvement</u>            An internal monitoring and review system would promote compliance in this area.            There is an opportunity to create a universal SDI tracking system that would be very helpful to promote compliance.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	During interviews, staff shared they were not aware that the location of specially designed instruction must only have one location per SDI. There is still a need for further training and technical assistance in this area.		
	Concerns Noted	During record reviews, it was noted that in some cases the description of location had multiple locations listed.		
DS-8	Record Review	<p><b>34 CFR 300.320(a)(7) [Definition of individualized education program]</b>  <b>OAC 3301-51-07 (H)(1)(i) [Definition of IEP]</b>            Six out of 20, or 30%, IEPs reviewed did not indicate the amount of time and frequency of the specially designed instruction (SDI).</p>	<p><u>Individual Correction</u>            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.</p> <p><u>Systemic Correction</u>            The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of determining the amount and frequency of specially designed instruction to be provided.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	During interviews, staff indicated that the parents were aware of the amount and frequency of specially designed instruction (SDI) but the district did not appropriately document that conversation through a PR-01 or other district wide documentation.		



Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
	Concerns Noted	In some cases, in record reviews, it was noted that “quarterly” was used to identify duration of the delivery of specially designed instruction (SDI).	<u>Opportunities for Improvement</u> An internal monitoring and review system would promote compliance in this area. There is an opportunity to create a universal SDI tracking system that would be very helpful to promote compliance	
DS-9	Record Review	<b>34 CFR 300.324(a)(2)(v) [Development of IEP]</b> <b>OAC 3301-51-01(B)(3) [Applicability of requirements and definitions]</b> One out of one applicable IEP reviewed, or 100%, did not identify assistive technology to enable the child to be involved and make progress in the general education curriculum.	<u>Individual Correction</u> 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.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	In general, the staff indicated during the interviews that they are fully aware if the student has assistive technology needs.	<u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding assistive technology.	
	Concerns Noted	The record reviewed indicated the need for assistive technology; however, it was not noted/described in the appropriate area.	<u>Opportunities for Improvement</u> An internal monitoring and review system would promote compliance in this area.	
DS-10	Record Review	<b>34 CFR 300.320(a)(6)(i) [Definition of individualized education]</b> <b>OAC 3301-51-07 (H)(1)(g) [Definition of IEP]</b> Thirteen (13) out of 19 applicable IEPs reviewed, or 68%, did not identify accommodations provided to enable the child to be involved and make progress in the general education curriculum.	<u>Individual Correction</u> 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.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	During staff interviews, there were inconsistencies in describing accommodations.	<u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding accommodations.	



Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
	Concerns Noted	In the record review process, explanations of accommodations were vague and did not explain in detail the conditions and/or extent (who, when, where services would be provided).	<u>Opportunities for Improvement</u> Professional development and targeted technical assistance from SSTs as well as an internal monitoring review system would assist in promoting compliance in the area of accommodations.	
DS-11	Record Review	<b>34 CFR 300.320(a)(4) [Definition of individualized education program]</b> <b>OAC 3301-51-07 (H)(1) [Definition of IEP]</b> One out of three applicable IEPs reviewed, or 33%, did not identify modifications to enable the child to be involved and make progress in the general education curriculum.	<u>Individual Correction</u> The educational agency must reconvene the teams of the IEPs identified as noncompliant to review the modifications that would alter the amount or complexity of grade-level materials and would enable the child to be involved and make progress in the general education curriculum and include them in the IEP  <u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding modifications.  <u>Opportunities for Improvement</u> An internal monitoring and review system would promote compliance in this area.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	During staff interviews, it was noted that some staff were not aware of the Ohio Learning Standards Extended or the learning progressions.		
	Concerns Noted	Record reviews indicated the need to describe/define the extent of the modification(s) regarding the content and instructional level.		
DS-12	Record Review	<b>34 CFR 300.320(a)(4) [Definition of individualized education program]</b> <b>OAC 3301-51-07 (H)(1) [Definition of IEP]</b> Five out of nine applicable IEPs reviewed, or 56%, did not identify supports for school personnel to enable the child to be involved and make progress in the general education curriculum.	<u>Individual Correction</u> 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.  <u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding supports for school personnel.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	During staff interviews, there were inconsistencies in how to appropriately document/describe supports for school personnel regarding the adult-to-adult consultation.		



Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
	Concerns Noted	Record reviews described in this section what the staff will provide to the student and not necessarily the adult-to-adult consultation.	<u>Opportunities for Improvement</u> An internal monitoring and review system would promote compliance in this area.	
DS-13	Record Review	<b><i>OAC 3301-51-07 (H)(1)(h)(ii) [Definition of IEP]</i></b> One out of one applicable student record reviewed, or 100%, did not have a justification statement explaining why the student cannot participate in the regular assessment and why the alternate assessment is appropriate for the student.	<u>Individual Correction</u> The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and determination if the alternate assessment is appropriate for the student.  <u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding the determination of participation in the AASCD.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	During staff interviews, it was clear that the staff were aware of the AASCD Decision-Making Tool.	<u>Opportunities for Improvement</u> An internal monitoring and review system would promote compliance in this area.	
	Concerns Noted	The record reviewed did not include the AASCD Decision-Making Tool.		
DS-14	Record Review	<b><i>OAC 3301-51-07(L)(2) [Development, review and revision of IEP]</i></b> Eighteen (18) out of 20, or 90%, student records reviewed did not show evidence of progress reporting data collected and analyzed to monitor performance on each goal.	<u>Individual Correction</u> None  <u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding measurable annual goals and services consistent with progress made.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	Staff reported that the method of reporting annual measurable goals is left to the discretion of the teacher.	<u>Opportunities for Improvement</u> Professional development and targeted technical assistance from SSTs as an internal monitoring review system would promote compliance in the areas of progress monitoring.	
	Concerns Noted	Although progress was being gathered and reported, it was not recorded using the same performance criteria as identified in the annual measurable goal. Progress on the goal itself did not contain both qualitative and quantitative data relating to the mastery level of each goal.		



Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
DS-15	Record Review	<p><b><i>OAC 3301-51-07(L) [Development, review and revision of IEP]</i></b></p> <p>All applicable IEPs reviewed showed evidence that revisions were made based on data indicating changes in student needs or abilities.</p>	<p><u>Individual Correction</u> NA</p> <p><u>Systemic Correction</u> NA</p>	<input checked="" type="checkbox"/> NA
DS-16	Record Review	<p><b><i>34 CFR 300.321(5) [IEP team]</i></b> <b><i>OAC 3301-51-07(I) [IEP team]</i></b></p> <p>Nine out of 20, or 45%, IEPs reviewed did not indicate that the IEP Team included a group of qualified professionals.</p>	<p><u>Individual Correction</u></p> <p>For the IEPs identified as noncompliant, the educational agency must</p> <ul style="list-style-type: none"> <li>• Provide evidence that the IEP team, including the parent, participated in the IEP meeting; or</li> <li>• Provide evidence that the educational agency made reasonable attempts to include the parent in the IEP meeting; and/or</li> <li>• Provide documentation that the parent and the educational agency consent, in writing, to excuse the required member prior to the IEP meeting; or</li> <li>• Reconvene the IEP team to review the IEP with all required members present.</li> </ul> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding the involvement of all required team members, including the parent, in IEP meetings.</p> <p><u>Opportunities for Improvement</u></p> <p>An internal monitoring and review system would promote compliance in this area.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	<p>Staff indicated that the district does attempt to ensure that the entire qualified team is present during the IEP meetings and in some cases will reschedule the meeting and/or use other means to involve the parent (e.g., Zoom, conference call, etc.)</p>		
	Concerns Noted	<p>Some records did not contain signatures in Section 14.</p>		





**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 Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
LRE-1	Record Review	<p><b>34 CFR 300.114 [LRE requirements] and 300.320(a)(5) [Definition of individualized education program]</b>  <b>OAC 3301-51-07 (H)(1)(f) [Definition of individualized education program]</b></p> <p>Eighteen (18) out of 20, or 90%, 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.</p>	<p><u>Individual Correction</u></p> <p>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.</p> <p>The justification should:</p> <ul style="list-style-type: none"> <li>• Be based on the needs of the child, not the disability.</li> <li>• Reflect that the team has given adequate consideration to meeting the student’s needs in the 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> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding the least restrictive environment placement decision process.</p> <p><u>Opportunities for Improvement</u></p> <p>An internal monitoring and review system would promote compliance in this area.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Interviews	<p>Staff indicated that the IEP team usually will attempt to keep the student in with their peers in the general education classroom, but behaviors and individual needs will determine their placement.</p>		
	Concerns Noted	<p>The LRE justification described the LRE setting and not based on the needs of the child.</p>		



### **Additional Considerations and Opportunities for Improvement:**

- Tracking of Specially Designed Instruction (SDI) delivery was a noted concern through the interview sessions and the IEP verifications. The district should strongly consider developing and implementing an SDI tracking system across the district to ensure Free Appropriate Public Education [OAC 3301-51-07(K)].
- Amanda-Clearcreek should highly consider developing and implementing a formal process of tracking and analyzing the progress of annual measurable goals. Progress on goals should be reported in alignment with the measurement used in the annual goal statement to ensure Free Appropriate Public Education [OAC 3301-51-07 (K)].
- Based on interviews and discussions with staff members, Amanda-Clearcreek will continue to redefine their Multi-Tiered System of Supports (MTSS) process to streamline their practices and develop a formal method to document their interventions. When school teams make data-based decisions on what supports students need, they should include a diverse set of perspectives, including paraprofessionals. The district should emphasize the paraprofessional's role at every level of the MTSS framework and provide them with ongoing training to effectively deliver the interventions.
- Amanda-Clearcreek should consider the Regional State Support Team 11's "*New Intervention Specialist*" academy scheduled for September 27<sup>th</sup>, November 8<sup>th</sup>, 2023, and January 17<sup>th</sup>/March 13<sup>th</sup>, 2024 (each session is scheduled from 8:30 AM – 11:00 AM in-person at ESCCO).