

Bridge Gate Community School
IRN: 015710**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 Bridge Gate Community School 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 monitoring review conducted by the Department on November 17, 2020 as part of its general supervision requirements under the Individuals with Disabilities Education Act (IDEA).

During the 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

Bridge Gate Community School mailed 22 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 November 17, 2020, the Department consultants held a public meeting for parents and other interested parties. No parents or family members attend. Two State Support Team (SST) Region 11 representatives attended the public meeting. Attendees could speak to the Department representatives

publicly in the meeting, speak to the Department representatives individually, provide written comments or both. 0 attendees made comments during the public meeting. Written comment forms were available before, during and after the meeting. The Department did not receive any written comments.

During the public meeting, parents would have been advised of the Dispute Resolution options process under IDEA and that their public comments did not constitute a formal complaint. The participants would have been 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. The Guide to Parent Rights in Special Education 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/IEP Verification

Prior to the onsite visit, the Department consultants reviewed 16 records of school age students with disabilities. The Department consultants selected records of students with disabilities from a variety of disability categories and ages. Fifteen (15) student records were selected for IEP verification in the virtual classroom setting. In 13 of the 15 IEP verifications (classroom visits by OEC to observe Specially Designed Instruction and verify it is being conducted in accordance with the IEP) scheduled, only two resulted in verifying student services. In the case of 13 virtual verification visits students were not present in the learning environment. Various reasons were given for this. According to staff, students were unable to log in for their virtual learning session, the Intervention Specialist did not have login access to some of the students using The Learning Platform environment, and building staff denied the student's access to the virtual learning session. Staff shared these were not isolated incidences.

4. Staff/Administrative Interviews

On November 17, 2020, the Department consultants held four sessions of interviews with seven administrators and 19 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:

- During the interviews and IEP verifications, the Bridge Gate Community School staff were actively engaged and earnest in their attempts to make connections across the school and with families.
- Despite inadequate resources, staff provided feedback and evidence of their efforts to identify and troubleshoot challenges.
- The elementary principal was praised by staff from Bridge Gate Community School for creating a positive culture within the building.

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 Department will deliver a Directed CAP to Bridge Gate Community School to address any items identified to:

- Improve educational results and functional outcomes for all children with disabilities; and
- Ensure that Bridge Gate Community School meets program requirements under Part B of IDEA, the Ohio Revised Code and Ohio Administrative Code, particularly those requirements that are most closely related to improving educational results for children with disabilities.

The Educational Resource Consultants of Ohio's (ERCO's) Executive Director and The Educational Empowerment Group's (EEG's) Chief Executive Officer must sign and send the Directed CAP by email to Raymond.mccain@education.ohio.gov within 30 school days from the date of this report.

The Department will schedule regular status meetings with ERCO's Director of Compliance and Special Education Consultant and EEG's Executive Director of Special Education during the implementation and completion of the Directed CAP activities.

CAP Due Date: September 21, 2021

Department Trainings

As part of the Department monitoring process, Bridge Gate Community School 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: September 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: November 2, 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: March 15, 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 Raymond.mccain@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	Must be addressed in CAP
CF-1	Record Review	<p>34 CFR 300.305(a) [Review of Existing evaluation data] and OAC 3301-51-11 (c)(1)(a) [Preschool children eligible for special education]</p> <p>Preschool records were not reviewed.</p>	<p><u>Individual Correction</u> NA</p> <p><u>Systemic Correction</u> NA</p>	<p><input checked="" type="checkbox"/> NA</p>
CF-2	Record Review	<p>OAC 3301-51-06 [Evaluations]</p> <p>Sixteen (16) out of 16, or 100%, 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></p> <p>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></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 appears that teachers and other staff collect intervention data. However, it did not appear that there was a standard process of documenting and reporting interventions in the ETR. Some members confused data from interventions from the Response to Intervention (RTI) process with the initial ETR and the assessment process.</p> <p>The Department staff were also concerned with the number of students who have gone through the RTI process and are waiting for the School Psychologist to start the evaluation process.</p>	<p>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>See specific corrections needed below in <u>Summary of Findings and Requirements</u> as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	
	Concerns Noted	<p>Nine of the ETRs were missing data from interventions summarized within Part 2. The entire section was left blank. Several of these ETRs were initial evaluations that should have had intervention retrieved from the RTI/Referral process.</p>		

Record Review Item	Evidence of Findings		Evidence of Corrections	Must be addressed in CAP
		One ETR contained the PR-04 for an initial evaluation to be conducted, however, the entire document was left blank.		
CF-3	Record Review	<p>34 CFR 300.501(b) [Parent participation in meetings] and OAC 3301-51-06 (E)(2)(a) [Evaluation procedures].</p> <p>Nine (9) out of 16, or 56%, student records 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>If the educational agency cannot provide documentation that the parent was involved or provided the opportunity to participate in the evaluation planning process, the educational agency must conduct a reevaluation planning meeting with the parent.</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. See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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	During the interview session, it was stated an interpreter was offered to attend the planning meeting as well as to help engage the parent in attending the planning meeting.		
	Concerns Noted	<p>Six Planning forms did not contain parental signatures along with dates.</p> <p>One planning form was left entirely blank.</p> <p>The review of records revealed that the educational agency has difficulty involving parents in required meetings in some cases.</p>		

Record Review Item	Evidence of Findings		Evidence of Corrections	Must be addressed in CAP
CF-4	Record Review	<p>34 CFR 300.300 [Parental Consent] Seven (7) out of 15, or 47%, student records did not provide evidence of parental consent obtained prior to new testing.</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 educational 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. <u>Systemic Correction</u> 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. See specific corrections needed below in <u>Summary of Findings and Requirements</u> as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>During interview sessions, it was mentioned how difficult it is to get parental involvement. A lot of the parents do not understand the ETR process due to language barriers. Some of the staff members mentioned they will go to the student's house to get signatures if necessary.</p>		
	Concerns Noted	<p>One ETR received written consent before the planning meeting had taken place. Six ETRs were missing the Parent Consent for Evaluation (PR-05).</p>		

Record Review Item	Evidence of Findings		Evidence of Corrections	Must be addressed in CAP
CF-5	Record Review	<p>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]</p> <p>Sixteen (16) out of 16, or 100%, evaluations 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>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	<p>Staff members indicated that they would benefit from guidance for completing Part 1 assessments.</p>		
	Concerns Noted	<p>One ETR was expired.</p> <p>One ETR contained blank Part 1s.</p> <p>Two ETRs contained Planning Form with no suspected disability category listed. This made it difficult assuring all assessment areas of the suspected disability were covered.</p>		
CF-6	Record Review	<p>34 CFR 300.306(c) [Procedures for determining eligibility and educational need]</p> <p>Eleven (11) out of 16, or 69%, evaluations 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><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.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Concerns Noted	<p>One ETR contained a blank Part 2.</p>		

Record Review Item	Evidence of Findings		Evidence of Corrections	Must be addressed in CAP
CF-7	Record Review	<p>34 CFR 300.306(c) [Procedures for determining eligibility and educational need]</p> <p>Thirteen (13) out of 16, or 81%, evaluation team reports did not contain a clear and succinct description of educational needs.</p>	<p><u>Individual Correction</u></p> <p>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.</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding description of educational needs.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Staff members indicated that they would benefit from guidance for completing Part 1 assessments.</p> <p>Professional development in this area was mentioned as a need from staff members interviewed.</p>		
CF-8	Record Review	<p>34 CFR 300.306(c) [Procedures for determining eligibility and educational need]</p> <p>Twelve (12) out of 16, or 75%, evaluation team reports 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><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> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Staff members indicated that they would benefit from guidance for completing Part 1 assessments.</p> <p>Professional development in this area was mentioned as a need from staff members interviewed.</p>		
	Concerns Noted	<p>In some cases, there was no description or a lack of clarity of the implications for instruction (the implications description was generic in nature and did not address the specific needs of the child).</p> <p>Sometimes implications for instruction were stated in Part 1 but were not included into the Part 2 summary.</p>		

Record Review Item	Evidence of Findings		Evidence of Corrections	Must be addressed in CAP
CF-9	Record Review	<p>34 CFR 300.306(a)(1) [Determination of eligibility] OAC 3301-51-01 (B)(21) [Applicability of requirements and definitions]</p> <p>Nine (9) out of 16, or 56%, evaluations 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><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding the eligibility determination process.</p> <p>See specific corrections needed below in <u>Summary of Findings and Requirements</u> as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Many times, we do not know when an ETR meeting is being held.</p>		
	Concerns Noted	<p>Two ETRs did not contain any PR-02, Parent Invitations.</p> <p>Six ETRs had Blank PR-01, Prior Written Notice.</p> <p>Two ETRs contained blank PR-02.</p> <p>Six ETRs were missing the General Education Teacher.</p> <p>Three ETRs had no signatures along with no evidence of who was at the meeting.</p> <p>Two ETRs were missing parental signatures.</p> <p>Six ETRs had Planning Forms with no district representative's signature/representation.</p>		

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	Must be addressed in CAP
DS-1	Record Review	<p>SPP Indicator 13 34 CFR 300.320(b) [Transition services] OAC 3301-51-07 (H)(2) [Definition of individualized education program]</p> <p>Eight (8) out of eight (8), or 100%, applicable IEPs 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"> 1. There are appropriate measurable postsecondary goal(s). 2. The postsecondary goals are updated annually. 3. The postsecondary goals were based on age-appropriate transition assessment (AATA). 4. There are transition services that will reasonably enable the student to meet the postsecondary goal(s). 5. The transition services include courses of study that will reasonably enable the student to meet the postsecondary goal(s). 6. The annual goal(s) are related to the student's transition service needs. 7. There is evidence the student was invited to the IEP Team Meeting where transition services were discussed. 8. When appropriate, there is evidence that a representative of any participating agency was invited to the IEP Team Meeting. 	<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>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed CAP for detailed requirements."</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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	Must be addressed in CAP
	Interviews/Public 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. Staff mentioned the difficulty they endure when completing or carrying out Transition Plans. They state the lack of Special Educators within the building makes it difficult to complete Transition Plans and to provide those transition services.		
	Concerns Noted	Two IEPs were missing their Transition Plan. Two Transition Plans were missing Independent Living Goals.		
DS-2	Record Review	34 CFR 300.320(a)(1) [Definition of individualized education program] Sixteen (16) out of 16, or 100%, IEPs did not contain Present Levels of Academic Achievement and Functional Performance (PLOP) that addressed the needs of the student.	<u>Individual Correction</u> 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: <ul style="list-style-type: none"> • 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. • PLOP must relate to the goal measurement. • Baseline data provided for developing a measurable goal. <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. See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	There appears to be a lack of understanding among staff members regarding the required contents of the present levels for IEP goals, especially regarding data collection to develop measurable goals. This points to an opportunity for training and technical assistance in this area.		
	Concerns Noted	Often, the present levels of performance did not relate to the annual goal, and measurable baseline data were missing.		

Record Review Item	Evidence of Findings		Evidence of Correction	Must be addressed in CAP
DS-3	Record Review	<p>34 CFR 300.320(a)(2)(i) [Definition of individualized education program]</p> <p>Fourteen (14) out of 16, or 88%, IEPs did not contain measurable annual goals.</p>	<p><u>Individual Correction</u></p> <p>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"> 1. <u>Clearly defined behavior</u>: the specific action the child will be expected to perform. 2. The <u>condition</u> (situation, setting or given material) under which the behavior is to be performed. 3. <u>Performance criteria</u> desired: the level the child must demonstrate for mastery and the number of times the child must demonstrate the skill or behavior. <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding the development of measurable annual IEP goals.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Although most respondents indicated familiarity with the required elements for annual IEP goals, there is still a need for further training and technical assistance in this area.</p> <p>Staff mentioned they would like more hands-on training provided. They mentioned video trainings they can review, but what is missing is that ability to ask certain questions.</p>		
	Concerns Noted	<p>Measurable goals in the IEPs reviewed were inconsistent in quality and content. Often one or more required elements were missing.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction	Must be addressed in CAP
DS-4	Record Review	<p>34 CFR 300.320(a)(2)(i) [Definition of individualized education program]</p> <p>Seven (7) out of 16, or 44%, IEPs did not contain annual goals that address the child's academic area(s) of need.</p>	<p><u>Individual Correction</u></p> <p>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.</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of addressing identified academic needs.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Intervention specialists interviewed stated they were not properly trained for writing compliant IEPs since they were not a licensed Intervention Specialist.</p>		
	Concerns Noted	<p>Since some academic needs were addressed in the ETR as being an area of concern, they must be addressed in the IEP in some capacity. It can either be addressed as a goal, a related service or a statement that indicates the team has prioritized other needs or found that it is not an area of concern at this time.</p>		
DS-5	Record Review	<p>34 CFR 300.320(a)(2)(i) [Definition of individualized education]</p> <p>Eight (8) out of 14, or 57%, applicable IEPs did not contain annual goals that address the child's functional area(s) of need.</p>	<p><u>Individual Correction</u></p> <p>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></p> <p>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>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Intervention specialists interviewed stated they were not properly trained for writing compliant IEPs since they were not a licensed Intervention Specialist.</p>		
	Concerns Noted	<p>Since some functional needs were addressed in the ETR as being an area of concern, they must be addressed in the IEP in some capacity. It can either be addressed as a goal, a related service or a statement that indicates the team has prioritized other needs or found that it is not an area of concern at this time.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction	Must be addressed in CAP
DS-6	Record Review	<p>34 CFR 300.320(a)(4) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e)(i) [Definition of IEP] Seven (7) out of 16, or 44%, IEPs did not contain a statement of specially designed instruction 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>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Intervention specialists and general educators described that specially designed instruction (SDI) is individualized to students but struggled to explain what makes this instruction specialized.</p> <p>When asked how SDIs are tracked, the staff commented it is up to each individual member to track their own SDIs.</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 levels and goals. Other examples lacked specific instructional reference and only listed accommodations.</p>		
DS-7	Record Review	<p>34 CFR 300.320(a)(7) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(i) [Definition of IEP] Eleven (11) out of 16, or 69%, IEPs 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>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<p><input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Concerns Noted	<p>Five IEPs had “School Setting” as their location for SDI. Five IEPs had two different locations for one SDI</p>		

Record Review Item	Evidence of Findings		Evidence of Correction	Must be addressed in CAP
DS-8	Record Review	<p>34 CFR 300.320(a)(7) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(i) [Definition of IEP]</p> <p>Four (4) out of 16, or 25%, IEPs did not indicate the amount of time and frequency of the specially designed instruction.</p>	<p><u>Individual Correction</u></p> <p>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></p> <p>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> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>When asked how SDIs are tracked, the staff commented it is up to each individual member to track their own SDIs.</p>		
DS-9	Record Review	<p>34 CFR 300.320(a)(7) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e) [Definition of IEP]</p> <p>Five (5) out of nine (9), or 56%, applicable IEPs did not identify related services that address the needs of the child and support the annual goals.</p>	<p><u>Individual Correction</u></p> <p>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.</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of addressing identified related service needs.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Several staff members cited concerns with the fact that Bridge Gate does not have a full time School Psychologist. Concerns with proper implementation of the ETR and IEP were also mentioned.</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 levels and goals. Other examples lacked specific instructional reference and only listed accommodations.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction	Must be addressed in CAP
DS-10	Record Review	<p>34 CFR 300.320(a)(7) [Definition of individualized education] OAC 3301-51-07 (H)(1)(i) [Definition of IEP]</p> <p>Five (5) out of nine (9), or 56%, applicable IEPs did not indicate the location where the related services will be provided.</p>	<p><u>Individual Correction</u></p> <p>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.</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding the IEP process of determining the location where related services will occur.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Concerns Noted	<p>Two SDIs has “school setting” as their location. One SDI had two different locations for one SDI.</p>		
DS-11	Record Review	<p>34 CFR 300.320(a)(7) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(i) [Definition of IEP]</p> <p>Three (3) out of nine (9), or 33%, applicable IEPs did not indicate the amount of time, duration and frequency of the related services to be provided.</p>	<p><u>Individual Correction</u></p> <p>The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend on the IEP the amount of time and frequency of the related services to be provided.</p> <p><u>Systemic Correction</u></p> <p>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 related services to be provided.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>When asked how SDIs are tracked, the staff commented it is up to each individual member to track their own SDIs.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction	Must be addressed in CAP
DS-12	Record Review	<p>34 CFR 300.324(a)(2)(v) [Development of IEP] OAC 3301-51-01(B)(3) [Applicability of requirements and definitions]</p> <p>Three (3) out of three (3), or 100%, applicable IEPs did not identify assistive technology to enable the child to be involved and make progress in the general education curriculum.</p>	<p><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.</p> <p><u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding assistive technology.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Concerns Noted	<p>Assistive technology was recommended within the ETR or IEP but was not included in the assistive technology section.</p>		
DS-13	Record Review	<p>34 CFR 300.320(a)(6)(i) [Definition of individualized education] OAC 3301-51-07 (H)(1)(g) [Definition of IEP]</p> <p>Fifteen (15) out of 16, or 94%, IEPs did not identify accommodations provided to enable the child to be involved and make progress in the general education curriculum.</p>	<p><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.</p> <p><u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding accommodations.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	<p>The need for and use of accommodations was misunderstood by some staff members, indicating a need for training and technical support in this area.</p>		
	Concerns Noted	<p>IEP accommodations listed were not explained regarding conditions and extent of the accommodation. Phrases like “as needed” and “may need” are not acceptable in describing accommodations. Accommodations cannot be the choice of the teacher or the student.</p> <p>Staff also indicated Accommodations are usually decided upon during the student’s first IEP. Those accommodation are then carried over to the new IEP with no discussion on if these accommodations are beneficial to the student or if newer accommodations need to be added.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction	Must be addressed in CAP
DS-14	Record Review	<p>34 CFR 300.320(a)(4) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e) [Definition of IEP]</p> <p>Five (5) out of five (5), or 100%, applicable IEPs did not identify modifications to enable the child to be involved and make progress in the general education curriculum.</p>	<p><u>Individual Correction</u></p> <p>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.</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding modifications.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Staff reported they look at what the student needs and they try to provide it to the student. "Making tests more friendly" was one type of modification they try. Again, they stated the lack of a licensed Intervention Specialist makes it extremely difficult when it comes to modifications.</p>		
	Concerns Noted	<p>The extent of modifications must be specific and clearly explained. List the use of Ohio's Learning Standards—Extended for students with a modified curriculum.</p>		
DS-15	Record Review	<p>34 CFR 300.320(a)(4) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e) [Definition of IEP]</p> <p>Two (2) out of two (2), or 100%, applicable IEPs did not identify supports for school personnel to enable the child to be involved and make progress in the general education curriculum.</p>	<p><u>Individual Correction</u></p> <p>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.</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding supports for school personnel.</p> <p>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Concerns Noted	<p>One IEP was blank.</p> <p>One IEP was expired.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction	Must be addressed in CAP
DS-16	Record Review	<p><i>OAC 3301-51-07 (H)(1)(h)(ii) [Definition of IEP]</i></p> <p>Two (2) out of two (2), or 100%, applicable student records 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.</p>	<p><u>Individual Correction</u></p> <p>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.</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding the determination of participation in the AASCD.</p> <p>See specific corrections needed below in <u>Summary of Findings and Requirements</u> as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Concerns Noted	<p>One IEP was blank. One IEP was expired.</p>		
DS-17	Record Review	<p><i>OAC 3301-51-07(L)(2) [Development, review and revision of IEP]</i></p> <p>Fifteen (15) out of 16, or 94%, student records did not show evidence of progress reporting data collected and analyzed to monitor performance on each goal.</p>	<p><u>Individual Correction</u></p> <p>None</p> <p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding measurable annual goals and services consistent with progress made.</p> <p>See specific corrections needed below in <u>Summary of Findings and Requirements</u> as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>The intervention specialists are the ones who provide progress reports. They mentioned they would like for the general education teachers to be more involved.</p>		
	Concerns Noted	<p>Fifteen (15) records did not contain progress reports. Progress Reports were requested several times but were never uploaded.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction	Must be addressed in CAP
DS-18	Record Review	<p><i>OAC 3301-51-07(L) [Development, review and revision of IEP]</i></p> <p>Three (2) out of three (2), or 100%, applicable IEPs did not show evidence that revisions were made based on data indicating changes in student needs or abilities.</p>	<p><u>Individual Correction</u> The educational agency must reconvene the teams to review and amend the IEPs to reflect changes made based on current needs or abilities.</p> <p><u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding using data to revise IEPs based on changes in student needs or abilities.</p> <p>See specific corrections needed below in <u>Summary of Findings and Requirements</u> as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Concerns Noted	<p>One IEP was blank. One IEP was expired.</p>		
DS-19	Record Review	<p><i>34 CFR 300.321(5) [IEP team]</i> <i>OAC 3301-51-07(I) [IEP team]</i></p> <p>Fifteen (15) out of 16, or 94%, IEPs did not indicate that the IEP Team included a group of qualified professionals.</p>	<p><u>Individual Correction</u> For the IEPs identified as noncompliant, the educational agency must:</p> <ul style="list-style-type: none"> • 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 attend the IEP meeting, or • Reconvene the IEP team to review the IEP with all required members present. <p><u>Systemic Correction</u> 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.</p> <p>See specific corrections needed below in <u>Summary of Findings and Requirements</u> as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>The educational agency needs to address this finding in a Corrective Action Plan.</p>
	Concerns Noted	<p>Eight IEPs were missing all signatures.</p> <p>Three IEPs were missing parent signatures with no evidence to base why the parent was not in attendance or chose not to attend.</p> <p>Two IEPs only had one attempt provided to get the parent to attend the IEP meeting.</p> <p>One IEP was missing a special education signature.</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	Must be addressed in CAP
LRE-1	Record Review	<p>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]</p> <p>Twelve (12) out of 15, or 80%, applicable IEPs 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"> • Be based on the needs of the child, not the disability. • Reflect that the team has given adequate consideration to meeting the student’s needs in the general classroom with supplementary aids and services. • 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. • Describe potential harmful effects to the child or others, if applicable. <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>See specific corrections needed below in Summary of Findings and Requirements as well as the Directed Corrective Action Plan (DCAP) for detailed requirements.</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>Interviewed staff mentioned the continuum of services could be better at Bridge Gate. They would like to see more placements within the school for those student who exhibit severe behavioral problems.</p>		
	Concerns Noted	<p>Five IEPs’ Least Restrictive Environment statements did not coordinate with the location stated within the Specially Designed Instruction in Section 7.</p>		

Summary of Findings and Required Actions:

Findings of Noncompliance:

Bridge Gate Community School was presented a letter dated May 11, 2021 indicating findings of *Free Appropriate Public Education* (FAPE) violations in the areas of child find, delivery of services and least restrictive environment. The letter indicated required actions that Bridge Gate Community School must complete to address those violations. Those areas of noncompliance related to FAPE as well as additional areas of IDEA Part B implementation are noted here:

1. Special Education Policies, Procedures and Practices:

Requirement:

- OAC 3301-51-02(A) requires that each school district shall adopt and implement written policies and procedures, approved by the Ohio Department of Education, Office for Exceptional Children, ensuring that FAPE is made available to all children with disabilities.

Findings:

- Through the interview process and conversations with administrative staff, teachers and support staff, it was established that Bridge Gate Community School does not have formal, written policies and procedures ensuring FAPE is made available to all children with disabilities. Additionally, documentation received and reviewed by OEC did not contain any evidence of formal, written Special Education Policies and Procedures parental consent, or a pre-referral intervention process.

Corrections:

- Bridge Gate Community School will re-develop and implement written Special Education Policies, Procedures and Practices for all areas related to special education and students with disabilities ages 3 to 21. These written policies and procedures must include but not limited to:
 - Documentation of attempts to obtain, informed, written parental consent for evaluation before proceeding with the ETR process.
 - Ensuring required attendance and signatures at ETR meetings
 - The completion of evaluations and IEPs when parents do not respond to repeated attempts to involve the parents as well as an internal monitoring process of student records, ensuring proper documentation of attempts is also provided.
 - Initial ETRs contain a summary of interventions implemented to include description, intensity, time and results.
 - 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.

These written policies, procedures and practices must be adopted by Bridge Gate Community School's Board of Education. The educational agency will provide training and technical support to all district and contractual staff for the adopted policies and procedures. A system will be developed to ensure that ongoing training and support is available for new hires after initial training.

- The district will re-develop and implement a pre-referral intervention process and provide ongoing training to all staff (district and contractual) on the implementation and tracking of student process. The district will monitor, analyze, and adjust, if necessary, the implementation of interventions to ensure fidelity with the process.
- The district will provide training and technical assistance on the completion of formal paperwork in the ETR process. Additionally, the district will implement internal monitoring to ensure that all evaluations are completed as documented on the planning form.

2. Delivery of Services

Requirement:

The LEA must deliver special education services based on students' individual needs and through the proper IEP team process. Also, is required to develop, review, and revise each student's IEP and ensure its implementation [OAC 3301-51-07(A)].

Findings:

- IEPs are not properly developed and/or implemented. For example, numerous IEPs did not contain present levels of academic achievement with clearly stated present levels of academic achievement and functional performance that directly align with the measurable IEP goals to address the individual needs of the students. Often the present levels of performance did not include a comparison statement to grade level standards/expectation. Additionally, numerous IEPs did not contain annual goals that address the academic and/or functional needs for the students as described in the ETR and/or IEP profile. Numerous annual goals were not measurable of ten excluding the condition, behavior, and mastery criteria related to the present level of performance. The students' present levels of achievement/performance are necessary in setting appropriate IEP goals and IEP goals must be measurable in order to accurately assess student process.
- Many IEPs, for students of transition service age, did not include annually developed transition goals and services aligned to the individual needs, interests, preferences, and strengths of students, and did not utilize an Age-Appropriate Transition Assessment (AATA) to determine those needs, interests, preferences, and strengths.
- There are record keeping concerns as numerous requests for documents did not yield all records requested from the district. Student progress monitoring toward the annual IEP goals were not always documented, particularly with quantitative data aligned to the measurable annual goals, thus district staff would be unable to tailor the delivery of the specially designed instruction (SDI) to achieve goals based on those students' individual needs. Additionally, a significant number of IEPs were missing any indication of formative assessments being conducted to determine the student's academic performance or achievement, as quantitative data related to goals was not provided in progress reports. In some cases, the IEPs and ETRs were either blank and/or expired.

Corrections:

- State Support Team 11, along with Educational Consultants of Ohio, will provide targeted training and technical assistance for all Bridge Gate Community School staff members (both district and contractual staff) in the area of service delivery. This training will address, at a minimum, the following components of service delivery:
 - Development of transition goals and services to meet the individual post-secondary needs of students utilizing Age-Appropriate Transition Assessments (AATAs) and will reasonably enable to meet postsecondary goal(s),
 - Development of clearly stated present levels of academic achievement and functional performance that directly align with the measurable IEP goals and include a comparison statement of grade level standards/expectations,
 - Development of measurable goals that address the academic and functional needs of students and written with a clearly defined condition, behavior, and mastery criteria based upon the individual student's present level of performance,
 - What specially designed instruction (SDI) is and how to develop SDI based upon individualized student's academic and/or functional needs to allow for goal mastery,
 - How to correctly document the provider and location of specially designed instruction.
 - Develop a school wide SDI tracking system to ensure students minutes are being delivered. Staff will also need to be trained on this new SDI tracking system.
 - Development of accommodations and modifications that clarify the condition or extent for each accommodation or modification based on individualized student needs,
 - How to monitor progress for progress reporting with the collection of quantitative data that is aligned to the measurement criteria of the academic and functional annual goals listed in the IEP,

- How to report progress on academic and functional goals and use the progress reports to inform instruction (and any needed revisions of IEPs) in light of progress made, or lack of progress, and
- What composes a qualified IEP team along with the development of procedures on how to ensure all required IEP team members are present at each IEP meeting. If a qualified team member is not present at the IEP meeting, the district will ensure an excusal form is thoroughly and appropriately completed.
- Bridge Gate Community School will develop and implement a formal procedure for monitoring special education staff workloads and caseloads based upon OAC 3301-51-09 in order to ensure that students with disabilities receive the amount of services the IEP team determine is necessary to meet student needs, rather than providing services based upon the amount of time service providers have available in their schedule or other LEA factors.
- Bridge Gate Community School will develop and implement a formal process of tracking specially designed instruction (SDI) to ensure Free Appropriate Education (FAPE) (OAC 3301-51-01(B)(25) and OAC 3301-51-02 (A) and (B). Additionally, the district will develop a system of tracking students who are receiving SDI and related services as they transition into their district so that students will continue to receive services indicated in their Individual Education Program (IEP). Finally, the district will review the records identified in the review as non-compliant and determine the amount of compensatory education and related services that were not provided as written in the IEP.
- The district must take steps to ensure that special education supports and services are delivered as described in the IEP.

3. Least Restrictive Environment Non-Compliance with Continuum of Alternative Placements

Requirement:

- Under IDEA, local educational agencies (LEA) are required to ensure that to the maximum extent appropriate, children who receive special education services are educated with children who do not receive special education services (OAC 3301-51-09 (A)). The LEA is also required to ensure that a continuum of alternative placements is available to meet the needs of children with disabilities for special education and related services based on their least restrictive environment (LRE) and individual learning needs (OAC 3301-51-09 (C)). The continuum that is required must include the following settings: instruction in regular classes, special classes, special schools, home instruction and instruction in hospitals and institutions. The continuum must also make provisions for supplementary services (such as resource room) to be provided in conjunction with regular class placement. Additionally, the LEA will ensure that each individual student's educational placement is determined by a group, which includes the parent and other persons knowledgeable about the student and the student's evaluation data along with placement options (OAC 3301-31-09 (D)(1)(a)).

Findings:

- Based upon multiple interviews and IEP verifications, Bridge Gate Community School is not ensuring least restrictive environment (LRE) is based on individual student needs. In addition, the location of delivery of specially designed instruction (SDI) does not align with the student's LRE (for example (record#16- the location for specially designed instruction is in the resource room, but the LRE indicates that the student receives all special education services with nondisabled peers).

Correction:

- State Support Team 11, along with Educational Consultants of Ohio, will provide targeted training and technical assistance for all Bridge Gate Community School staff members (both district and contractual staff) in the area of Least Restrictive Environment. This training will address the alignment of both the location stated in the student's specially designed instruction (SDI) and the student's LRE statement.