

**East Guernsey Local School District
IRN: 069682****Ohio the Department of Education, Office for Exceptional Children
2022-2023 IDEA Monitoring Review Summary Report****Introduction**

The Ohio the Department of Education's Office for Exceptional Children would like to extend appreciation to the East Guernsey 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 the Individuals with Disabilities Education Act (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 during the week of December 5, 2022, as part of its general supervision requirements under the IDEA and Am. Sub. H.B.1.

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

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

Onsite reviews are targeted to include the following specific areas:

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

Data Sources

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

1. Parent Input

East Guernsey Local Schools mailed 171 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 no comments.

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 One Plan; and Education Management Information System (EMIS) data. The data analysis assisted the Department in determining potential areas for improvement and educational agency strengths.

3. Record Review/IEP Verification

Prior to the onsite visit, the Department consultants reviewed 29 records of school age students with disabilities. The Department consultants selected records of students with disabilities from a variety of disability categories and ages. Nine student records were selected for IEP verification in the classroom setting. During the IEP verifications, OEC staff noticed that teachers were very knowledgeable of the students' goals and other needs outlined in the IEPs. Students and staff appeared to have built good rapport with each other.

4. Staff/Administrative Interviews

On December 6, the Department consultants held 11 sessions of interviews with 9 administrators and 60 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:

Many members of the staff mentioned that the Special Education Director has been a positive addition to East Guernsey's administration. Her willingness to answer questions, review and her open-door policy have been a huge relief and comfort to all special education staff as well as other members of the faculty. They noted many of the positive changes that have occurred since she joined the district.

East Guernsey staff has laid the foundation for setting high expectations for all students to thrive no matter their age or grade level. Their dedication to student achievement will allow the district to be successful with their implementation of OEC's Monitoring Process and recommendations.

During record reviews, it was noted that the observations were very detailed in regard to being done in the child's learning environment (including the general classroom setting) and documenting the child's academic performance and behavior in the areas of difficulty.

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 heather.malone@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: April 19, 2023

Department Trainings

As part of the Department monitoring process, East Guernsey 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: April 19, 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 are provided in a separate report.

Individual Correction Due Date: August 29, 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: December 18, 2023

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: Heather Malone, the Department's IDEA Monitoring Contact, at 614-935-3105, toll-free at (877) 644-6338, or by e-mail: heather.malone@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	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] Preschool records were not reviewed.</p>	<p><u>Individual Correction</u> NA <u>Systemic Correction</u> NA</p>	<p><input checked="" type="checkbox"/> NA</p>
CF-2	Record Review	<p>OAC 3301-51-06 [Evaluations] Ten (10) out of 28, or 36%, 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. <u>Systemic Correction</u></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 interviews, it was noted that the RTI process has been undergoing changes. It was noted that staff are familiar with the Intervention Assistance Team (IAT) process, but they still need to expand and improve it in order to better provide interventions to students who are struggling. It was noted that informal conversations take place regarding intervention strategies and that intervention resources are received from the SST and school psychologist. Interview participants stated that goals are written, and interventions are provided only by teachers rather than including other staff across the educational agency.</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. <u>Opportunities for Improvement</u> It is recommended East Guernsey Local develop a procedure of checks and balances to ensure interventions that are being provided to students are correctly documented within Part 1s of the ETR as well as in Part 2s Summary of Interventions. The district would benefit from revising the district wide IAT process to include other staff across the educational agency.</p>	
	Concerns Noted	<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 noting that the team agreed the current IEP supports and services are suitable to meet the student's needs will suffice.</p>		

Record Review Item	Evidence of Findings		Evidence of Corrections/Recommendations	Must be addressed in CAP
CF-3	Record Review	<p>34 CFR 300.501(b) [Parent participation in meetings] and OAC 3301-51-06 (E)(2)(a) [Evaluation procedures]. Two out of 28, or 7%, 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> 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> 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"/> No The educational agency does <u>not</u> need to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	<p>Administration noted during interviews that the district has implemented new efforts to ensure documentation of three attempts for parent involvement.</p>		
CF-4	Record Review	<p>34 CFR 300.300 [Parental Consent] Three out of 28, or 11%, student records reviewed 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 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><input checked="" type="checkbox"/> No The educational agency does <u>not</u> need to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	<p>It was noted in more than one interview that staff attempts to get parent signatures in multiple ways (e.g., send paperwork home, go to car rider line, etc.) Staff have been instructed that they are not to write in that parent attended virtually or was absent from meeting.</p>		

Record Review Item	Evidence of Findings		Evidence of Corrections/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 for obtaining parental consent obtained prior to new testing or policies and practices for moving forward when parents will not participate.</p> <p><u>Opportunities for Improvement</u> Administration stated that they have tried to have phone calls and to electronically sign, but that the internet isn't conducive to this. It is recommended that East Guernsey Local develop a process for collecting digital signatures.</p>	
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>Twenty-three (23) out of 28, or 82%, 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><u>Opportunities for Improvement</u> East Guernsey Local must develop an internal monitoring process which contains procedures to ensure:</p> <ul style="list-style-type: none"> • 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. <p>There is a need to refine the ETR planning and individual evaluator's input process.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	<p>Through interviews, staff shared that the ETR process is moving toward a "team approach" (i.e., school psychologists lead the process, but each team member is responsible for their assigned individual evaluations (Part 1s), as well as summarizing the information in the Team Summary, or Part 2.</p> <p>Some staff revealed that they would like a more collaborative process when creating goals for students.</p>		
	Concerns Noted	<p>Record reviews revealed that, in some cases, assessments included on the planning form were not all addressed in part 1 of the ETR.</p> <p>Checklists are not an appropriate form of evaluation, since these checklists are on modified</p>		

Record Review Item	Evidence of Findings	Evidence of Corrections/Recommendations	Must be addressed in CAP
	forms and are missing the three required components (summary of assessment result, educational needs and implications). Through interviews, it appeared that teachers have not had any professional development in writing Part 1s. They stated that it would be beneficial to have training regarding what specific information is needed.		
CF-6	Record Review	34 CFR 300.306(c) [Procedures for determining eligibility and educational need] Twenty-one (21) out of 28, or 75%, evaluations reviewed did not show evidence of clearly stating the summary of assessment results.	<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 that the ETR process is moving towards a “team approach” (i.e., school psychologists lead the process, but “everyone” is responsible for their assigned individual evaluations (Part 1s) as well as summarizing the information in the Team Summary, or Part 2.	
	Concerns Noted	Record reviews revealed that in some cases, the results from Part 1 assessments were not summarized in Part 2, leaving out important information for the parent and IEP team. In multiple instances, all areas were not summarized and/or information was not included that could be used to create meaningful goals and services within the IEP.	
CF-7	Record Review	34 CFR 300.306(c) [Procedures for determining eligibility and educational need] Twelve (12) out of 28, or 43%, evaluation team reports reviewed did not contain a clear and succinct description of educational needs.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	Through interviews, it appeared that teachers have not had any professional development in writing Part 1s. They stated that it would be beneficial to	

Record Review Item	Evidence of Findings		Evidence of Corrections/Recommendations	Must be addressed in CAP
		have training in regard to what specific information is needed.	<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> East Guernsey Local has an opportunity to develop an internal practice that will monitor the completion of the Part 2 Summary of the Evaluation Team Report so that all areas assessed in a Part 1 Individual Evaluator's Assessment are summarized in the Part 2 summary. This is an opportunity for professional development and/or targeted technical assistance from SST staff.	
	Concerns Noted	Educational needs were sometimes generic in nature and did not address the child's individualized needs. Sometimes educational needs were stated in Part 1 but were not included in the Part 2 summary.		
CF-8	Record Review	<i>34 CFR 300.306(c) [Procedures for determining eligibility and educational need]</i> Nine out of 28, or 32%, evaluation team reports reviewed did not contain specific implications for instruction.	<u>Individual Correction</u> 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.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	Through interviews, it appeared that teachers have not had any professional development in writing Part 1s. They stated that it would be beneficial to have training in regard to what specific information is needed.	<u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding implications for instruction.	
	Concerns Noted	Sometimes implications for instruction were stated in Part 1 but were not included in the Part 2 summary.	<u>Opportunities for Improvement</u> East Guernsey Local has an opportunity to develop an internal practice that will monitor the completion of the Part 2 Summary of the Evaluation Team Report so that all areas assessed in a Part 1 Individual Evaluator's Assessment are summarized in the Part 2 summary. This is an opportunity for professional development and/or targeted technical assistance from SST staff.	

Record Review Item	Evidence of Findings		Evidence of Corrections/Recommendations	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>Five out of 28, or 18%, 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><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><input checked="" type="checkbox"/> No</p> <p>The educational agency does <u>not</u> need to address this finding in a Corrective Action Plan.</p>
	Interviews/Public Comments	<p>Interviewees stated that if a member of the team was unable to attend, they typically ask someone in the same position to attend.</p>		
CF-10	Record Review	<p>OAC 3301-51-01 (B)(10) [Definitions] and 3301-51-06 [Evaluations]</p> <p>Eight out of 28, or 29%, evaluations reviewed did not provide a justification for the eligibility determination decision.</p>	<p><u>Individual Correction</u></p> <p>The educational agency will reconvene the ETR teams to conduct a reevaluation and provide a clear justification for the eligibility determination.</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 decision.</p> <p><u>Opportunities for Improvement</u></p> <p>East Guernsey Local has the opportunity to participate in professional development and/or targeted technical assistance in determining special education eligibility. This training should include documentation of how the disability affects the student and their progress in the general education curriculum.</p>	<p><input checked="" type="checkbox"/> No</p> <p>The educational agency does <u>not</u> need to address this finding in a Corrective Action Plan.</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/Recommendations	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>All 16, out of 16 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"> 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><u>Opportunities for Improvement</u></p> <p>There is an opportunity to strengthen the transition services area by conducting thorough, relevant, and comprehensive Age-Appropriate Transition Assessments so that services are individualized based upon each student's needs, strengths, interests and preferences.</p> <p>Training must be provided to all ETR and IEP members responsible for assessing and writing transition plans to ensure they are compliant and beneficial to the student.</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	Interviews revealed a lack of understanding of the secondary transition process and responsibilities, indicating a need for training and technical assistance in this area.		
	Concerns Noted	<p>Transition services were often generic in nature and not developed to address individual student needs as identified in the AATA.</p> <p>Reviewers noted instances where the student seemed to be responsible for his or her own transition services, which is not appropriate.</p> <p>Several Transition Plans contained the student's Preferences, Interests, Needs and Strengths (PINS) that were gathered from AATAs; however, they appeared to be very generic and were the same for all three postsecondary goals. There is an opportunity for East Guernsey Local to improve their transition planning by better connecting student's PINS to student's Postsecondary Education, Competitive Employment and Independent Living goals.</p> <p>In addition, several records did not address Independent Living at all.</p>		
DS-2	Record Review	<p><i>34 CFR 300.320(a)(1) [Definition of individualized education program]</i></p> <p>Twenty-seven (27) out of 28, or 96%, 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:</p> <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. 	<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	Several staff members indicated they use common assessment data in order to create a current baseline for the Present Levels of Performance. However, these data points are not specific to the deficits described in the goals.		

Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
	Concerns Noted	Most of the IEPs reviewed did not contain baseline data in the PLOP that aligned to the measurable goals. The PLOP must also include a comparison statement to grade-level expectations, which was missing in many of the reviewed IEPs.	<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. <u>Opportunities for Improvement</u> This is an opportunity for professional development and/or targeted technical assistance in developing Present Levels of Academic Achievement and Functional Performance (PLOP) that clearly address the needs of the student.	
DS-3	Record Review	34 CFR 300.320(a)(2)(i) [Definition of individualized education program] Twenty-three (23) out of 28, or 82%, IEPs reviewed did not contain measurable annual goals.	<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: <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. <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. <u>Opportunities for Improvement</u> There is an opportunity for professional development and targeted technical assistance in writing compliant measurable annual goals.	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	General education teachers would like to have more input in developing measurable annual goals for students within their classroom. With this in place, present levels of performance could be compliantly obtained from staff when they are requested.		
	Concerns Noted	Goals often did not contain all four elements required or were worded in a confusing manner with too many measurements or skills in one goal. At times, the IEP goals lacked clarity of behaviors expected and of the specific measurements for achievement and mastery of the goals.		

Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
DS-4	Record Review	<p>34 CFR 300.320(a)(2)(i) [Definition of individualized education program]</p> <p>Six out of 28, or 21%, IEPs reviewed 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><u>Opportunities for Improvement</u></p> <p>There is an opportunity for professional development and targeted technical assistance in documenting academic needs mentioned in the ETR. If academic needs were listed in the ETR or IEP profile as being an area of concern, they must be addressed in the IEP in some capacity. The academic need can either be addressed through services and/or supports or a statement that indicates the team has prioritized needs or found that it is not an area of concern at this time.</p>	<p><input checked="" type="checkbox"/> No</p> <p>The educational agency does <u>not</u> need to address this finding in a Corrective Action Plan.</p>
DS-5	Record Review	<p>34 CFR 300.320(a)(2)(i) [Definition of individualized education]</p> <p>Eight out of 20, or 40%, applicable IEPs reviewed 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><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 during interviews staff shared that the ETR process is moving towards a "team approach" regarding ETR/IEP development, there is still a need for further training and technical assistance in this area.</p>		
	Concerns Noted	<p>Functional needs were addressed in several ETRs as being an area of concern but were not addressed in the IEP in some capacity.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
			<p><u>Opportunities for Improvement</u></p> <p>There is an opportunity for professional development and targeted technical assistance in documenting academic needs mentioned in the ETR. If 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>	
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]</p> <p>Twenty-three (23) out of 28, or 82%, 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></p> <p>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></p> <p>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></p> <p>An internal monitoring and review system would be very helpful to 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/Public Comments	<p>Although most respondents indicated familiarity with the required elements for SDI components, there is still a need for further training and technical assistance in this area.</p> <p>Some interviewees stated that having one IS per grade level has been helpful.</p>		
	Concerns Noted	<p>The nature of instruction must align with the student's individual needs and skills. In many instances, the specially designed instruction was very broad and not specific to the student. In some instances, the SDI was either undefined completely or did not convey how it differs from instruction consistently delivered in the general education setting. In some records, SDI was the same across all goals.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
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]</p> <p>Nine out of 28, or 32%, IEPs reviewed did not indicate the specific location where the specially designed instruction 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 location where the specially designed instruction will be provided.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	<p>Although most respondents indicated familiarity with the required elements for SDI components, there is still a need for further training and technical assistance in this area.</p> <p>Many interviewees mentioned that scheduling is affecting the delivery of students' SDIs.</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 specially designed instruction will occur.</p> <p><u>Opportunities for Improvement</u></p> <p>An internal monitoring and review system would be very helpful to promote compliance in this area.</p>	
	Concerns Noted	<p>Locations must be separated for amount of time and frequency in each, or for multiple individuals providing instruction (intervention specialists or related service providers).</p> <p>During IEP verifications, it was noted that scheduling is negatively affecting delivery of SDIs.</p>	<p><u>Opportunities for Improvement</u></p> <p>There is an opportunity to create a universal SDI tracking system that would be very helpful to promote compliance.</p>	
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>Seven out of 28, or 25%, IEPs reviewed 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><u>Opportunities for Improvement</u></p> <p>An internal monitoring and review system would be very helpful to promote compliance in this area.</p>	<input checked="" type="checkbox"/> No The educational agency does <u>not</u> need to address this finding in a Corrective Action Plan.

Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
DS-9	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>All five applicable IEPs reviewed identified assistive technology to enable the child to be involved and make progress in the general education curriculum.</p>	<p><u>Individual Correction</u></p> <p>NA</p> <p><u>Systemic Correction</u></p> <p>NA</p>	<input checked="" type="checkbox"/> NA
DS-10	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>Twenty-two (22) out of 26, or 85%, IEPs reviewed 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></p> <p>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></p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Concerns Noted	<p>The condition(s) and/or extent were not clearly explained (who provided the services and when and where those services were provided).</p> <p>In several records, there were accommodations listed in the profile or in the ETR which needed to be addressed in the IEP but were not.</p>	<p><u>Systemic Correction</u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding accommodations.</p> <p><u>Opportunities for Improvement</u></p> <p>Training from SSTs as well as internal monitoring review system would be very helpful to promote compliance in the areas of accommodations.</p>	
DS-11	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>Six out of eight applicable IEPs review, or 75%, 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>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.
	Concerns Noted	<p>During record reviews, it was noted that the statement “modifications may include...” was often used. Modifications listed in this box must be utilized in all classes unless otherwise specified. The word “may” implies that some of the modifications are optional.</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>	

Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
			<u>Opportunities for Improvement</u> The extent of modifications must be specific and clearly explained. Training from SSTs as well as an internal monitoring review system would be very helpful to promote compliance in the areas of modifications.	
DS-12	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>Four out of 14 applicable IEPs reviewed, or 29%, 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> 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> The educational agency must submit evidence to the Department of written procedures and practices regarding supports for school personnel.</p> <p><u>Opportunities for Improvement</u> Training from SST staff as well as an internal monitoring review system would be very helpful to promote compliance in the area of support for school personnel.</p>	<input checked="" type="checkbox"/> No The educational agency does <u>not</u> need to address this finding in a Corrective Action Plan.
	Interviews/Public Comments	Some interviewees noted that having one aide per grade level has been helpful.		
DS-13	Record Review	<p>OAC 3301-51-07 (H)(1)(h)(ii) [Definition of IEP]</p> <p>All applicable student records reviewed had a justification statement explaining why the student cannot participate in the regular assessment and why the alternate assessment is appropriate for the student.</p>	<p><u>Individual Correction</u> NA</p> <p><u>Systemic Correction</u> NA</p>	<input checked="" type="checkbox"/> NA
DS-14	Record Review	<p>OAC 3301-51-07(L)(2) [Development, review and revision of IEP]</p> <p>Twenty-one (21) out of 27, or 78%, student records reviewed did not show evidence of progress reporting data collected and analyzed to monitor performance on each goal.</p>	<p><u>Individual Correction</u> None</p> <p><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.</p>	<input checked="" type="checkbox"/> Yes The educational agency needs to address this finding in a Corrective Action Plan.

Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
	Interviews/Public Comments	<p>One group of interviewees stated that they would like professional development regarding progress monitoring.</p> <p>Although most respondents indicated familiarity with the required elements for progress monitoring, there is still a need for further training and technical assistance in this area.</p>	<p><u>Opportunities for Improvement</u></p> <p>Training from SSTs as well as internal monitoring review system would be very helpful to promote compliance in the areas of progress monitoring.</p>	
	Concerns Noted	<p>Without clearly documented progress monitoring on both goals, reflecting the specific goal measurement, student progress cannot be accurately assessed. Progress should include both qualitative and quantitative data.</p>		
DS-15	Record Review	<p><i>OAC 3301-51-07(L) [Development, review and revision of IEP]</i></p> <p>One applicable IEP reviewed, or 100%, did not show evidence that revisions were made based on data indicating changes in student needs or abilities.</p>	<p><u>Individual Correction</u></p> <p>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></p> <p>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><u>Opportunities for Improvement</u></p> <p>The district can address this issue by providing additional training through the SSTs.</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 some interviewees appeared to understand the impact of chronic absenteeism, special education staff did not appear to be familiar with the appropriate usage of the IEP amendment process.</p>		
	Concerns Noted	<p>On the one applicable record, data indicated need for possible revision, but no revision or meeting to discuss instructional strategies is evident in the student's records. The IEP team should have reconvened to address the issue of chronic absenteeism.</p>		

Record Review Item	Evidence of Findings		Evidence of Correction/Recommendations	Must be addressed in CAP
DS-16	Record Review	<p>34 CFR 300.321(5) [IEP team] OAC 3301-51-07(I) [IEP team]</p> <p>Two out of 28, or 7%, 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"> • Provide documentation that the parent was informed prior to the IEP meeting that the person qualified to interpret the instructional implications of evaluation results would not participate in the meeting, and • Provide a written excuse signed by the parents and the educational agency that allowed the person qualified to interpret the instructional implications of evaluation results not to be in attendance at the IEP meeting, or • Reconvene the IEP team to review the IEP with all required members present. <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 people qualified to interpret the instructional implications of evaluation results in the IEP process</p> <p><u>Opportunities for Improvement</u></p> <p>An internal monitoring and review system would be very helpful to promote compliance.</p>	<p><input checked="" type="checkbox"/> No</p> <p>The educational agency does <u>not</u> need to address this finding in a Corrective Action Plan.</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>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 20, or 60%, 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"> • 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><u>Opportunities for Improvement</u></p> <p>An internal monitoring and review system would be very helpful to promote compliance.</p> <p>There is an opportunity to improve upon the continuum of services offered at East Guernsey Local.</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>In several records, the LRE states that some accommodations will be received outside the general education curriculum, however, the Location of SDIs state General education setting.</p> <p>In other cases, the LRE did not align with the SDI location.</p> <p>The need to deliver related services outside the general education classroom based on individualized student need was not clearly described in the reviewed records.</p>		

Additional Considerations and Opportunities for Improvement:

- Arena scheduling is affecting delivery of SDI. Due to student choice of class, time and teacher, (which are often not co-taught classes) many students are not receiving SDIs appropriately.
- Arena scheduling is negatively affecting completion of graduation requirements. It is recommended that students in 8th grade meet with a counselor to develop a 4-year plan in order to meet the required courses for their graduation path. Students with disabilities, along with the intervention specialists in 8th grade, should map out a 4-year plan so that coursework relates to the goals and SDI location stated in IEP.
- East Guernsey Local would benefit from implementing a checks and balances system regarding checking the graduation plan yearly to make sure that students with disabilities are on the correct path.
- The continuum of alternative placements did not appear to be available across all grade levels and settings. East Guernsey Local will need to revise and add to their continuum of alternative placements, under rule 3301-51-09 Delivery of Services (C), to ensure that a continuum of alternative placements is available to meet the needs of children with disabilities for special education and related services.
- The district should consider rearrangement of how SDIs are being delivered for students. Having two intervention specialists trying to provide SDI to their caseloads in the same room at the same time is not working. Morning homeroom SDI delivery is not happening effectively due to limited time constraints. It is also recommended to move away from ability grouping and to consider having the intervention specialists move with students instead.
- Based upon interviews with staff members, the district should highly consider revising the Trail Mix program. While it is admirable to allow students with disabilities the option of two specials if they are caught up with assignments, it would benefit those students to receive additional SDI delivery, as many are still not on grade level.
- East Guernsey Local would benefit from developing a new teacher onboarding process geared toward any new staff member hired regarding their Special Education Policies, Procedures and Practices.
- Based upon interviews with staff members, there seems to be conflicting information regarding TBT, BLT and DLT meetings. It is recommended that the entire district have dedicated meeting times where everyone is required to attend. Each meeting should include an agenda and be guided by data.