

**Summit Academy Secondary School
Middletown
IRN: 00634**

**Ohio Department of Education and Workforce
Office for Exceptional Children
2024-2025 IDEA Monitoring Review Summary Report**

Introduction

The Ohio Department of Education and Workforce, Office for Exceptional Children, would like to extend appreciation to the Summit Academy Secondary School – Middletown staff for their efforts, attention, and time committed to the completion of the review process.

Definition of terms in this document:

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

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

Overview

The following report is a summary of the onsite review conducted by the Department on January 28 and 29, 2025, as part of its general supervision requirements under the Individuals with Disabilities Education Act (IDEA).

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

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

Onsite reviews are targeted to include the following specific areas:

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

Data Sources

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

1. Parent Input

Summit Academy Secondary School-Middletown mailed 61 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 did not receive any comments from parents.

2. Pre-Onsite Data Analysis

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

3. Record Review/IEP Verification

Prior to the onsite visit, the Department staff reviewed 16 records of school-age students with disabilities. The Department staff selected records of students with disabilities from a variety of disability categories and ages. Eight student records were selected for IEP verification in the classroom setting. During the IEP verifications, OEC staff noted that students were very engaged in their learning and that staff had developed a good rapport with their students. It was also noted that teachers were very knowledgeable of the students' goals and other needs outlined in their IEPs.

4. Staff/Administrative Interviews

On January 28, 2025, the Department consultants held three sessions of interviews with eight administrators and 10 teachers, school counselors, related services personnel, school psychologists, and paraprofessionals. Interviews focused on the following review areas: Child Find; Delivery of Services; Least Restrictive Environment (LRE) and IEP alignment and Discipline.

Strengths/Commendations:

Several interviewees noted that they feel a huge culture shift since Kristen Parkes joined the Jr./High School as principal. They are very happy with the continuity between the elementary and high school.

Staff members frequently expressed their appreciation for the new programs Kristen has introduced, such as student helpers, the magic closet, student team leads, advocates, etc.

Throughout staff interview sessions, it was apparent that staff were extremely appreciative of the supportive nature of the administration. They felt that they were both respected and heard, especially in the area of professional development. The abundance of helpful professional development was often mentioned, and it was stated that they felt comfortable requesting further development in any area they might need. Staff also expressed a collaborative working environment where they felt supported by each other.

Summit staff are extremely passionate, caring, and dedicated not only to students with disabilities, but the entire student body. They have developed a great rapport with the students.

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 CAP 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: August 19, 2025

Department Trainings

As part of the Department monitoring process, Summit Academy Secondary School - Middletown personnel, as identified by the Department, are required to complete the OEC Special Education Process Learning Management System (LMS) training modules within **30 school days** from the date of this report. 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: August 19, 2025

Individual Correction

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

Individual Correction Due Date: October 9, 2025

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: February 2, 2026

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

For questions regarding the review, please contact: Heather Malone, the Department’s IDEA Monitoring Contact, at 614-935-3105, toll-free at (877) 644-6338, or by e-mail at 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 and Workforce, Office for Exceptional Children, that ensure all children with disabilities residing within the educational agency, regardless of the severity of their disability, and who are in need of special education and related services are identified, located, and evaluated as required by the Individuals with Disabilities Education Improvement Act of 2004 and Federal Regulations at 34 C.F.R. Part 300 pertaining to child find, including the regulations at 34 C.F.R. 300.111 and 300.646 and Rule 3301-51-03 of the Ohio Operating Standards serving Children with Disabilities.

Record Review Item	Evidence of Findings	Evidence of Corrections/Recommendations	Must be Addressed in CAP
CF-1	<p><u>OAC 3301-51-06 [Evaluations]</u></p> <p>Two out of 16, or 13% of evaluations reviewed did not appropriately document interventions provided to resolve concerns for the child performing below grade-level standards.</p> <p><u>Interviews</u></p> <p>In the interviews, it was communicated that the principal has been working on aligning the Multi-Tiered Systems of Supports (MTSS) process at the secondary school with the one that exists at the elementary school. Each classroom is provided with items such as fidgets for Tier 1 instruction, and all students are able to access these. There are monthly Intervention Assistance Team (IAT) meetings, at which student progress is discussed.</p> <p><u>Concerns Noted</u></p> <p>Some interviewees noted that they felt the written MTSS process needed to be looked at and refined. They would also like more clarity on what the various tiers of the MTSS process entail.</p> <p>One record that was reviewed did not have a distinct explanation of the interventions that were provided.</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>It is recommended that the educational agency review and revise its written procedures and practices regarding documentation of intervention and supports provided prior to completion of the initial and reevaluation team report. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p><u>Opportunities for Improvement</u></p> <p>There is an opportunity for the school to review and revise their written MTSS procedures and provide robust training to all staff.</p>	<p><input checked="" type="checkbox"/> No</p> <p>This finding does <u>not</u> need to be addressed in a Corrective Action Plan.</p>
CF-2	<p><u>34 CFR 300.501(b) [Parent participation in meetings] and OAC 3301-51-06 (E)(2)(a) [Evaluation procedures].</u></p> <p>All student records reviewed show evidence that the parent was afforded the opportunity to participate in the evaluation team planning process.</p>	<p><u>Individual Correction</u></p> <p>N/A</p> <p><u>Systemic Correction</u></p> <p>N/A</p>	<p><input checked="" type="checkbox"/> NA</p>

Record Review Item	Evidence of Findings	Evidence of Corrections/Recommendations	Must be Addressed in CAP
CF-3	<p>34 CFR 300.300 [Parental Consent] Two out of 16, or 19% of student records reviewed did not provide evidence of parental consent obtained prior to evaluation.</p> <p>Interviews Interviewees noted that parents are very involved at the school and staff have great rapport with them. It was conveyed that the IEP Coordinator typically contacts the parents in regard to planning and consent.</p> <p>Concerns Noted Records showed that there were two records in which physical exam/general health information was included in the Part 2 without having it listed on the planning form.</p>	<p>Individual Correction 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>Systemic Correction It is recommended that the educational agency review and revise its written procedures and practices for obtaining informed parental consent. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p>	<p><input checked="" type="checkbox"/> No This finding does <u>not</u> need to be addressed in a Corrective Action Plan.</p>
CF-4	<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] Twelve (12) out of 16, or 75% of evaluations reviewed did not provide evidence that the evaluation addresses all areas related to the suspected disability.</p> <p>Interviews Interview sessions revealed that all staff members, including general education teachers, are typically given a form to provide data and recommendations for their Part 1, and the IEP Coordinator enters the information into SameGoal. It was stated that the IEP Coordinator assists with the appropriate language needed, but there has been no official training on how to complete Part 1s. The IEP Coordinator also tracks all timelines, guides the planning process, completes the Part 2, and serves as the district representative.</p>	<p>Individual Correction The educational agency will convene the ETR teams to conduct a reevaluation and provide evidence that the evaluation addresses all areas related to the suspected disability.</p> <p>Systemic Correction The educational agency must submit evidence to the Department of written procedures and practices to ensure that evaluations address all areas related to the suspected disability. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p>Opportunities for Improvement There is a need to refine the ETR planning and individual evaluator's input process. The school should consider providing professional development to those who may complete a Part 1.</p>	<p><input checked="" type="checkbox"/> Yes This finding needs to be addressed in a Corrective Action Plan.</p>

Record Review Item	Evidence of Findings	Evidence of Corrections/Recommendations	Must be Addressed in CAP
	<p><u>Concerns Noted</u></p> <p>Occasionally, there were discrepancies between who was listed as Person Responsible on the Planning Form and what staff member actually completed the Part 1 (example: the Planning Form only listed one staff member as responsible for an assessment area, but this assessment area was included in two different staff member's Part 1s).</p> <p>Assessment areas were included on the Planning Form but not found within a corresponding Part 1.</p>		
CF-5	<p><i>34 CFR 300.306(c) [Procedures for determining eligibility and educational need]</i></p> <p>Eight out of 16, or 50% of evaluations reviewed did not show evidence of clearly stating the summary of assessment results.</p> <p><u>Interviews</u></p> <p>Staff members noted that they are typically given a school-created form to provide data and recommendations for their Part 1, and the IEP Coordinator enters the information into SameGoal and transfers the information to the Part 2.</p> <p><u>Concerns Noted</u></p> <p>In the records reviewed, the most common reasons for noncompliance in this area were:</p> <ul style="list-style-type: none"> • Assessment areas described in the attached Part 1s were not transferred to the Part 2 Summary of Assessments, resulting in evaluation areas as listed on the Planning Form being unrepresented in the Part 2. • In multiple instances, areas were summarized but lacked specific information that could be used to create meaningful goals and services within the IEP. 	<p><u>Individual Correction</u></p> <p>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></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding summary of data and assessment results. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p><u>Opportunities for Improvement</u></p> <p>The school may want to look at internal monitoring trends in this area and provide additional professional development as needed.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>This finding needs to be addressed in a Corrective Action Plan.</p>

Record Review Item	Evidence of Findings	Evidence of Corrections/Recommendations	Must be Addressed in CAP
CF-6	<p>34 CFR 300.306(c) [Procedures for determining eligibility and educational need]</p> <p>Seven out of 16, or 44% of evaluation team reports reviewed did not contain a clear and succinct description of educational needs.</p> <p><u>Interviews</u></p> <p>Interview sessions revealed that all staff members, including general education teachers, are typically given a form to provide data and recommendations for their Part 1, and the IEP Coordinator enters the information into SameGoal. There has been no official training on how to complete Part 1s.</p> <p><u>Concerns Noted</u></p> <p>In the records that were reviewed, a few records contained needs that were not specific enough to allow for the creation of actionable goals</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. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p><u>Opportunities for Improvement</u></p> <p>It is recommended that the internal monitoring trends in this area and provide additional professional development as needed.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>This finding needs to be addressed in a Corrective Action Plan.</p>
CF-7	<p>34 CFR 300.306(a)(1) [Determination of eligibility] OAC 3301-51-01 (B)(21) [Applicability of requirements and definitions]</p> <p>Four out of 16, or 25% of evaluations reviewed did not show evidence that a group of qualified professionals, as appropriate to the suspected disability, were involved in determining whether the child is a child with a disability as well as the child's educational needs.</p> <p><u>Interviews</u></p> <p>Interviewees stated that they participate in meetings and that the district representative makes sure to invite all required participants. They stated that a substitute staff member fills in at the meeting when someone is unable to attend.</p> <p><u>Concerns Noted</u></p> <p>Records indicated that required personnel for interpreting administered tests were sometimes absent from meetings, calling into question whether testing results were sufficiently explained to parents. Due to this trend, this area will need to be addressed in the CAP.</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 to include all required team members. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p><u>Opportunities for Improvement</u></p> <p>It is recommended that Summit Academy develop a procedure of checks and balances to ensure all required team members of the Planning/ETR team are in attendance for meetings. Training is also recommended to provide the school with the knowledge of legal responsibilities regarding who is required to attend these meetings.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>This finding needs to be addressed in a Corrective Action Plan.</p>

Record Review Item	Evidence of Findings	Evidence of Corrections/Recommendations	Must be Addressed in CAP
CF-8	<p>OAC 3301-51-01 (B)(10) [Definitions] and 3301-51-06 [Evaluations] Six out of 16, or 38% of evaluations reviewed did not provide a justification for the eligibility determination decision.</p> <p><u>Interviews</u> Staff who are involved in the Evaluation Team Report meetings stated that final decisions regarding determining eligibility are made during the ETR meeting. Interviewees explained how they handle parent disagreement with the eligibility determination, stating that they document the incident in a PR-01 and ensure that the parent understands how the evaluation data was used to determine the correct eligibility status. Staff members listen to the concerns of the parent but ultimately ensure the eligibility determination is an accurate reflection of the evaluation data for each individual student.</p> <p><u>Concerns Noted</u> When reviewing records, it was noted that the justification often did not include how the student's disability affects the child's access to and progress in the general education curriculum. Additionally, when two or more disabilities were stated on the planning form, there was no justification for why the student did not meet the eligibility requirements for the category not chosen. One record did not include a complete SLD Section 3, although SLD was one of the suspected disability categories listed on the planning form.</p>	<p><u>Individual Correction</u> The educational agency will reconvene the ETR teams to conduct a reevaluation and provide a clear justification for the eligibility determination.</p> <p><u>Systemic Correction</u> The educational agency must submit evidence to the Department of written procedures and practices regarding the eligibility determination decision. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p><u>Opportunities for Improvement</u> Summit Academy would benefit from professional development by the State Support Team on how to write a compliant justification statement for the disability determination.</p>	<p><input checked="" type="checkbox"/> Yes This finding needs to be addressed 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
<p>DS-1</p>	<p>SPP Indicator 13 34 CFR 300.320(b) [Transition services] OAC 3301-51-07 (H)(2) [Definition of individualized education program]</p> <p>Two out of 14, or 14% of applicable IEPs reviewed did not show evidence that the postsecondary transition plan met all eight required elements of the IDEA for the student:</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>Interviews</p> <p>It was conveyed during the interviews that the performance coach writes all of the transition plans. She attends professional development regularly to ensure compliance.</p> <p>Concerns Noted</p> <p>When reviewing records, the main reason for noncompliance was due to the student not being invited to the meeting.</p>	<p>Individual Correction</p> <p>The educational agency must reconvene the teams to review and correct the postsecondary transition plan for the IEPs identified as noncompliant.</p> <p>Systemic Correction</p> <p>It is recommended that the educational agency review and revise its written procedures and practices regarding transition services. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p>	<p><input checked="" type="checkbox"/> No</p> <p>This finding does <u>not</u> need to be addressed in a Corrective Action Plan.</p>

Record Review Item	Evidence of Findings	Evidence of Correction/Recommendations	Must be Addressed in CAP
DS-2	<p>34 CFR 300.320(a)(1) [Definition of individualized education program] All IEPs reviewed contain Present Levels of Academic Achievement and Functional Performance (PLOP) that addressed the needs of the student.</p>	<p><u>Individual Correction</u> N/A <u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA
DS-3	<p>34 CFR 300.320(a)(2)(i) [Definition of individualized education program] All IEPs reviewed contain measurable annual goals.</p>	<p><u>Individual Correction</u> N/A <u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA
DS-4	<p>34 CFR 300.320(a)(2)(i) [Definition of individualized education program] All IEPs reviewed contain annual goals that address the child's academic area(s) of need.</p>	<p><u>Individual Correction</u> N/A <u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA
DS-5	<p>34 CFR 300.320(a)(2)(i) [Definition of individualized education] All IEPs reviewed contain annual goals that address the child's functional area(s) of need.</p>	<p><u>Individual Correction</u> N/A <u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA
DS-6	<p>34 CFR 300.320(a)(4) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e)(i) [Definition of IEP] Six out of 16, or 38% of IEPs reviewed did not contain a statement of specially designed instruction (SDI) including related services that addresses the individual needs of the child and supports the annual goals.</p> <p><u>Interviews</u> During the interviews, it was noted that the teachers collaborate with the IEP coordinator to decide the priorities for the student. They give her the baseline data, from which she creates the goals and SDI.</p> <p><u>Concerns Noted</u> SDI is most often delivered during the WIN (What I Need) period at the beginning of the day and is delivered by general education teachers. SDI needs to be delivered by the most qualified person, as decided by the IEP team; however, IEP verifications conducted during the onsite showed that teachers with substitute licenses were delivering SDI, as well as teachers who were not licensed in the areas they were observed to be providing SDI.</p>	<p><u>Individual Correction</u> The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend the 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. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p><u>Opportunities for Improvement</u> There is an opportunity to revise the school's internal monitoring and review system to promote compliance in this area.</p>	<input checked="" type="checkbox"/> Yes This finding needs to be addressed in a Corrective Action Plan.

Record Review Item	Evidence of Findings	Evidence of Correction/Recommendations	Must be Addressed in CAP
DS-7	<p>34 CFR 300.320(a)(7) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(i) [Definition of IEP]</p> <p>All IEPs reviewed indicate the specific location where the specially designed instruction will be provided.</p>	<p><u>Individual Correction</u> N/A</p> <p><u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA
DS-8	<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 out of 16, or 19% of IEPs reviewed did not indicate the amount of time and frequency of the specially designed instruction.</p> <p><u>Interviews</u></p> <p>During interviews, it was stated that SDI is most often delivered during the WIN (What I Need) period at the beginning of the day. The behavior specialist pulls small groups at various times to work on behavior goals.</p> <p><u>Concerns Noted</u></p> <p>During record reviews, the main reason for noncompliance was not identifying the frequency of the delivery.</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>It is recommended that the educational agency review and revise its written procedures and practices regarding the IEP process of determining the amount and frequency of specially designed instruction to be provided. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p>	<input checked="" type="checkbox"/> No This finding does <u>not</u> need to be addressed in a Corrective Action Plan.
DS-9	<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 IEPs reviewed identify assistive technology to enable the child to be involved and make progress in the general education curriculum.</p>	<p><u>Individual Correction</u> N/A</p> <p><u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA
DS-10	<p>34 CFR 300.320(a)(6)(i) [Definition of individualized education] OAC 3301-51-07 (H)(1)(g) [Definition of IEP]</p> <p>All IEPs reviewed identify accommodations provided to enable the child to be involved and make progress in the general education curriculum.</p>	<p><u>Individual Correction</u> N/A</p> <p><u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA
DS-11	<p>34 CFR 300.320(a)(4) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e) [Definition of IEP]</p> <p>All IEPs reviewed identify modifications to enable the child to be involved and make progress in the general education curriculum.</p>	<p><u>Individual Correction</u> N/A</p> <p><u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA

Record Review Item	Evidence of Findings	Evidence of Correction/Recommendations	Must be Addressed in CAP
DS-12	<p>34 CFR 300.320(a)(4) [Definition of individualized education program] OAC 3301-51-07 (H)(1)(e) [Definition of IEP]</p> <p>11 out of 16, or 69% of IEPs reviewed did not identify supports for school personnel to enable the child to be involved and make progress in the general education curriculum.</p> <p>Interviews</p> <p>Interviewees stated that most SDI is delivered during the WIN (What I Need) period at the beginning of the day and is most often delivered by general education teachers. Teachers enter progress data through SameGoal. The IEP Coordinator goes through and checks to make sure everything is entered and what is still needed. It was conveyed that accommodations are provided in both the WIN class and in the general education classrooms.</p> <p>Concerns Noted</p> <p>While reviewing records, OEC noted a pattern of the following statement under Support for School Personnel: “Services given by the General Education Teacher/Classroom Staff to be provided under consultation and supervision of the Intervention Specialist.”</p>	<p>Individual Correction</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>Systemic Correction</p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding supports for school personnel. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p>Opportunities for Improvement</p> <p>The school may want to look at internal monitoring trends in this area and provide additional professional development as needed.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>This finding needs to be addressed in a Corrective Action Plan.</p>
DS-13	<p>OAC 3301-51-07 (H)(1)(h)(ii) [Definition of IEP]</p> <p>All student records reviewed 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>Individual Correction</p> <p>N/A</p> <p>Systemic Correction</p> <p>N/A</p>	<p><input checked="" type="checkbox"/> NA</p>
DS-14	<p>OAC 3301-51-07(L)(2) [Development, review and revision of IEP]</p> <p>Three out of 10, or 30% of student records reviewed did not show evidence of progress reporting data collected and analyzed to monitor performance on each goal.</p> <p>Interviews</p>	<p>Individual Correction</p> <p>None</p> <p>Systemic Correction</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. The Department will verify 100%</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>This finding needs to be addressed in a Corrective Action Plan.</p>

Record Review Item	Evidence of Findings	Evidence of Correction/Recommendations	Must be Addressed in CAP
	<p>Although most respondents indicated familiarity with some of the required elements for progress monitoring, there is still a need for further training and technical assistance in this area.</p> <p>Concerns Noted</p> <p>The noncompliant progress reports were missing data for at least one of the student's measurable annual goals.</p> <p>Many of the reviewed progress reports were completed on a modified progress report form. While educational agencies can use modified progress reports, all required components from the Ohio optional form must still be included:</p> <ul style="list-style-type: none"> • Data Sources • Data Points • Comments • On Track Status • Goal Met Status <p>It was frequently noted that Progress Reports did not consistently include the On Track and Goal Met Status criteria. Records were not marked noncompliant for this reason, however the comment forms for these records do note that for compliance, going forward, this must be included in all progress reports.</p>	<p>compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p>Opportunities for Improvement</p> <p>It is recommended that the school's progress report templates be revised to include all five required criteria.</p>	
DS-15	<p><i>OAC 3301-51-07(L) [Development, review and revision of IEP]</i></p> <p>All IEPs reviewed show evidence that revisions were made based on data indicating changes in student needs or abilities.</p>	<p><u>Individual Correction</u> N/A</p> <p><u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA
DS-16	<p><i>34 CFR 300.321(5) [IEP team]</i> <i>OAC 3301-51-07(I) [IEP team]</i></p> <p>All IEPs reviewed indicate that the IEP Team included a group of qualified professionals.</p>	<p><u>Individual Correction</u> N/A</p> <p><u>Systemic Correction</u> N/A</p>	<input checked="" type="checkbox"/> NA

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	<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>Three out of 10, or 30% of 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>Interviews</u></p> <p>It was noted during interviews that there is only one co-taught classroom, which is in math. There was an interest in increasing the co-teaching model.</p> <p><u>Concerns Noted</u></p> <p>Record reviews indicated a pattern of using the phrase “Due to the severity of...” to explain how the student meets the eligibility criteria. This needs to be further explained as to what those specific deficits are that hinder the student from receiving instruction in the general education setting.</p> <p>Through IEP Verifications, it appears that specially designed instruction for academic goals is typically provided by a general education teacher, and these teachers are often not qualified to deliver SDI in the area designated.</p> <p>The continuum of alternative placements under rule 3301-51-09 Delivery of services (C) did not appear to be available across all settings.</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. Additionally, the educational agency must ensure there is a continuum of alternative placements available and submit a description to the Department. The Department will verify 100% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p><u>Opportunities for Improvement</u></p> <p>The school may want to look at internal monitoring trends in this area and provide additional professional development as needed.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>This finding needs to be addressed in a Corrective Action Plan.</p>