

**YouthBuild Columbus  
IRN: 132985****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 YouthBuild Columbus 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 February 4 – 6, 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**

YouthBuild Columbus mailed 270 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 provided contact information and requested 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.

## 2. Pre-Onsite Data Analysis

Department staff conducted a comprehensive review, which included building and grade-level data; Special Education Profile; Ohio School Report Card; Comprehensive Continuous Improvement Plan (CCIP) and/or One Plan information; 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 staff reviewed 15 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 12 IEP verifications in the classroom setting.

## 4. Staff/Administrative Interviews

On February 4, 5, and 6, 2025, the Department staff held seven sessions of interviews with 20 administrators, coaches, and specialists and 19 teachers, 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:**

During interviews, Department team members observed strong collaboration between YouthBuild Columbus staff, as they are very responsive to each other's needs. Educators report a feeling of connection between staff that extends to the students. Staff states that students are fully supported through wraparound services, mentors, and resiliency coaches. They shared that not only students with disabilities, but all students benefit from the individualized services provided by the school.

The school staff shared that the "family feel" in the school makes behavior interventions less of a need. The school does not have to do a lot of formal behavior assessments due to staff being proactive; issues are typically not getting to the point where formal behavior assessments are needed.

The staff shared their positive view of the Jump Start program, which helps incoming students acclimate to the school. This program gives students a chance to meet the YouthBuild Columbus staff one-on-one and helps introduce new students to the culture of the school. The program lowers new students' anxiety and lets them know they are heard. It allows students to make connections and removes the unknowns. Due to this program, relationships between staff and students are improving and align to the student needs.

Additionally, all students have access to the Achieve More & Prosper (AMP) coaches, who follow students for two years regardless of disabilities once enrolled, and to career tech classes, beyond getting support to ensure graduation, a goal all staff work towards. During career tech classes, students have access to authentic learning experiences that directly support career skills. The certification program the school adopted has built an atmosphere of engagement and buy-in across the student body, which benefits both academics as well as the Positive Behavior Interventions and Supports (PBIS) process.

During the IEP verifications, Department staff noticed that teachers and service providers were very knowledgeable of the students' needs documented in their IEPs and were able to talk to SST and Department staff about students' goals and progress. Department staff also noted that students seemed to be appreciative of the support received from the teachers and the service providers and to have a great relationship with them.

### **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 Adriana Golumbeanu, [adriana.golumbeanu@education.ohio.gov](mailto:adriana.golumbeanu@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: Monday, October 13, 2025***

### **Department Trainings**

As part of the Department monitoring process, the educational agency's school personnel, as identified by the Department, are required to complete the OEC Required 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: Monday, October 13, 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: Friday, December 5, 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: Friday, March 20, 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: Adriana Golumbeanu, the Department's IDEA Monitoring Contact, at (614) 965-2422, toll-free at (877) 644-6338, or by e-mail at [adriana.golumbeanu@education.ohio.gov](mailto:adriana.golumbeanu@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><b><u>OAC 3301-51-06 [Evaluations]</u></b></p> <p>Twelve (12) out of 15 or 80% of evaluations reviewed did not appropriately document interventions provided to resolve concerns for the child performing below grade-level standards.</p> <p><b><u>Interviews</u></b></p> <p>Staff indicated that YouthBuild Columbus has an MTSS program and that it serves all students. They have been trained by SST 11 recently, mostly in PBIS. Interventions-both academic and behavioral-are tracked through Dazzle. Branching Minds is used to guide MTSS implementation and students are placed into tiers of service using data collected. Overall, staff were aware of the general implementation and impact of MTSS, but specifics of policies, procedures, and practices were not completely understood.</p> <p>Staff indicated that there is a referral process for teachers to recommend a student for initial interventions or movement to a more supportive level of intervention.</p> <p>Teachers will chronologically record information on their assigned students which provides a progressive snapshot of the student.</p> <p>Staff also stated they have limited experience with initial evaluations due to the age of the students who typically enroll in</p>	<p><b><u>Individual Correction</u></b></p> <p>No individual correction is required for this item.</p> <p><b><u>Systemic Correction</u></b></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. 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><b><u>Opportunities for Improvement</u></b></p> <p>YouthBuild Columbus would benefit from technical assistance from SST 11 on how to accurately document interventions in the ETR.</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
	<p>their school (most are due to an expired ETR when a student enrolls).</p> <p>According to staff, the Student Success Coordinator and the Assistant Director of Special Education have been trained in PBIS, and they follow a “train the trainer” model to train their staff.</p> <p><b><u>Concerns Noted</u></b>  Of the records reviewed, the summary of interventions described in Part 1 (Individual Evaluator’s Assessment) for the ETR and Part 2 are a summary of IEP services or goals. Data from interventions refers to new interventions that have occurred outside of the existing supports and services provided through the current IEP and not IEP services. This area should be marked not applicable for a reevaluation if new interventions (in addition to the IEP services) were not provided for a new area not identified in the current ETR. The agency must indicate that the student is making adequate progress with current special education supports and services provided as part of the IEP in this case.</p>		
CF-2	<p><b><i>34 CFR 300.501(b) [Parent participation in meetings] and OAC 3301-51-06 (E)(2)(a) [Evaluation procedures].</i></b></p> <p>Two out of 15 or 13% of student records reviewed did not show evidence that the parent was afforded the opportunity to participate in the evaluation team planning process.</p> <p><b><u>Interviews</u></b></p> <p>Staff stated that parent involvement is often dependent upon student age as the school serves many 18+ students who do not need a parent present.</p> <p><b><u>Concerns Noted</u></b>  For one of the noncompliant records reviewed there is no evidence that the parent was afforded the opportunity to</p>	<p><b><u>Individual Correction</u></b></p> <p>The educational agency must provide evidence that the parent was involved or provided the opportunity to participate in the evaluation planning process. The evidence may include evaluation planning form, prior written notice, parent invitation, referral form, or communication log.</p> <p><b><u>Systemic Correction</u></b></p> <p>It is recommended that the educational agency review and revise its written procedures and practices that include the parent in the evaluation planning process. The Department will verify 100% compliance in this area through a review of</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 Corrections/Recommendations	Must be Addressed in CAP
	<p>participate in the planning process, as the parent did not sign the planning form and the school did not show evidence of attempts to ensure parental participation in the ETR planning process (PR-01, PR-02, or OP-9).</p> <p>For the second record-the ETR was not submitted. The school mentioned a waiver, but no documentation of a parent waiver was submitted.</p>	<p>new records that have been written after all trainings have been completed.</p> <p><b><u>Opportunities for Improvement</u></b></p> <p>The educational agency’s attempts to involve the parent in the ETR planning meeting before it moves ahead with reevaluations should be thoroughly documented. This process could be strengthened in the documentation phase by instituting a written, school-wide policy.</p>	
CF-3	<p><b><u>34 CFR 300.300 [Parental Consent]</u></b></p> <p>Six out of 15 or 40% of student records reviewed did not provide evidence of parental consent obtained prior to evaluation.</p> <p><b><u>Interviews</u></b></p> <p>Staff stated that parent involvement is often dependent upon age as the school serves many 18+ students who do not need a parent present. Parents are often difficult to reach or to engage.</p> <p><b><u>Concerns Noted</u></b></p> <p>For the noncompliant records, our office noted that, in one case, the PR-05 submitted was blank, in another instance it was completed but not signed by the parent. In four instances, the PR-05 form was not submitted or was missing.</p>	<p><b><u>Individual Correction</u></b></p> <p>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.</p> <p>The evidence may include prior written notice, parent invitation, communication log, or other documented attempts to obtain parental informed, written consent.</p> <p>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><b><u>Systemic Correction</u></b></p> <p>The educational agency must submit evidence to the Department of 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><b><u>Opportunities for Improvement</u></b></p> <p>The educational agency’s attempts to obtain parent consent should be thoroughly documented. This process</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
		could be strengthened in the documentation phase by instituting a written, school-wide policy.	
CF-4	<p><b>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]</b></p> <p>Fifteen (15) out of 15 or 100% of evaluations reviewed did not provide evidence that the evaluation addresses all areas related to the suspected disability.</p> <p><b><u>Interviews</u></b> Staff stated during interviews that the school psychologist and the intervention specialists write the Part 1s. General education teachers fill out a form and the intervention specialist summarizes it into a Part 1.</p> <p><b><u>Concerns Noted</u></b> Common reasons for noncompliance in this area included:</p> <ul style="list-style-type: none"> <li>• Assessment areas are included in the Planning Form but not found within the corresponding Part 1. All areas listed on the Planning Form must be presented in a Part 1 and summarized within the Part 2.</li> <li>• Dates of assessment are missing.</li> <li>• Observations are not completed in the area of need or are not dated or are conducted during assessments/testing. There is no location/classroom indicated.</li> <li>• Vocational/Transition Part 1 has very limited data (just a copy-paste of IEP transition goals).</li> <li>• In some ETRs, Part 2 contains information that was not found in Part 1.</li> <li>• No date of testing was provided for evaluation areas that were marked as “Additional Testing Needed” on the Planning Form.</li> </ul>	<p><b><u>Individual Correction</u></b> The educational agency will reconvene the ETR teams to conduct a reevaluation and provide evidence that the evaluation addresses all areas related to the suspected disability.</p> <p><b><u>Systemic Correction</u></b> 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. 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><b><u>Opportunities for Improvement</u></b> OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>Improvements in CF-4 can be tracked by the newly established Internal Monitoring Team (IMT). It is recommended that the IMT focus on this area when reviewing district records and provide support to staff members when this area is found to be noncompliant during record reviews.</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-5	<p><b>34 CFR 300.306(c) [Procedures for determining eligibility and educational need]</b></p> <p>Twelve (12) out of 15 or 80% of evaluations reviewed did not show evidence of clearly stating the summary of assessment results.</p> <p><b>Concerns Noted</b></p> <p>In the reviewed records, the most common reason for noncompliance in this area was that assessment areas described in the Part 1s were not transferred to the Part 2 Summary of Assessments, resulting in evaluation areas listed on the Planning Form not being represented in Part 2. In some ETRs, Part 2 contains information that was not found in Part 1.</p> <p>Also, testing and assessment data must be synthesized for the IEP team in a way that is understandable to the parent, which was not always done.</p>	<p><b>Individual Correction</b></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><b>Systemic Correction</b></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><b>Opportunities for Improvement</b></p> <p>OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>This finding needs to be addressed in a Corrective Action Plan.</p>
CF-6	<p><b>34 CFR 300.306(c) [Procedures for determining eligibility and educational need]</b></p> <p>Twelve (12) out of 15 or 80% of evaluation team reports reviewed did not contain a clear and succinct description of educational needs.</p> <p><b>Concerns Noted</b></p> <p>For the records that were out of compliance in this area, the most common reason was that the educational needs were generic in nature and not individualized based on the summary of assessment results.</p>	<p><b>Individual Correction</b></p> <p>The educational agency will reconvene the ETR teams to conduct a reevaluation and provide a clear and succinct description of the students' educational needs. The IEP team must consider the results of this reevaluation.</p> <p><b>Systemic Correction</b></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</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
	<p>For one record, the ETR was not submitted. The school mentioned a reevaluation waiver, but no documentation of a waiver was submitted.</p>	<p>records that have been written after all trainings have been completed.</p> <p><b>Opportunities for Improvement</b>            OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	
CF-7	<p><b>34 CFR 300.306(a)(1) [Determination of eligibility] OAC 3301-51-01 (B)(21) [Applicability of requirements and definitions]</b></p> <p>Three out of 15 or 20% 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><b>Interviews</b></p> <p>Staff reported that parent involvement is often dependent upon age as the school serves many 18+ students who do not need a parent present. The parents of younger students are more involved. They also shared that a lot of parents and students are transient.</p> <p>Staff stated that at least three attempts are made to engage parents to participate in the meetings. If a parent did not attend the team holds the meeting without the parent and a PR-01 is sent home to let parents know the meeting took place.</p> <p>Additionally, retention specialists do home visits and update contact information. Houses advisors also reach out to families.</p> <p><b>Concerns Noted</b></p>	<p><b>Individual Correction</b></p> <p>The educational agency must provide evidence that the ETR teams comprised of the parent and qualified professionals, as appropriate, participated in the determination of eligibility and educational needs. If there is no evidence that the ETR teams were comprised of the parent and qualified professionals, as appropriate, the ETR team must reconvene and provide the Department evidence of group participation.</p> <p><b>Systemic Correction</b></p> <p>It is recommended that the educational agency review and revise its 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><b>Opportunities for Improvement</b></p> <p>The educational agency's attempts to involve the parent in the ETR meeting before it moves ahead with reevaluations should be thoroughly documented. This process could be strengthened in the documentation phase by instituting a written, school-wide policy.</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 Corrections/Recommendations	Must be Addressed in CAP
	<p>For two of the noncompliant records, the parent signature was missing and documentation submitted did not show any attempts by the district to discuss the date(s) for the ETR with the parent/ to accommodate the parent.</p> <p>For one record, the ETR was not submitted. The school mentioned a reevaluation waiver, but no documentation of a waiver was submitted.</p>		
CF-8	<p><b><u>OAC 3301-51-01 (B)(10) [Definitions] and 3301-51-06 [Evaluations]</u></b></p> <p>Twelve (12) out of 15 or 80% of evaluations reviewed did not provide a justification for the eligibility determination decision.</p> <p><b><u>Interviews</u></b></p> <p>Staff shared that their students, since they are older, already have an IEP, so initial evaluations are rare (most are due to an expired ETR when a student enrolls). For a reevaluation, the IEP team goes over the data and testing (including MAP) to determine eligibility.</p> <p><b><u>Concerns Noted</u></b></p> <p>In the records reviewed, the instances of noncompliance in this section were due to:</p> <ul style="list-style-type: none"> <li>• The justification does not describe how the student meets the eligibility criteria as defined in OAC 3301-51-01 (B)(10)(Definitions) and OAC 3301-51-06 (Evaluations).</li> <li>• The justification statement fails to include how the disability affects the child’s access and progress in the general education curriculum.</li> </ul>	<p><b><u>Individual Correction</u></b></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><b><u>Systemic Correction</u></b></p> <p>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><b><u>Opportunities for Improvement</u></b></p> <p>OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>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><b>DS-1</b></p>	<p><b>SPP Indicator 13</b>  <b>34 CFR 300.320(b) [Transition services]</b>  <b>OAC 3301-51-07 (H)(2) [Definition of individualized education program]</b></p> <p>Fifteen (15) out of 15 or 100% 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"> <li>1. There are appropriate measurable postsecondary goal(s).</li> <li>2. The postsecondary goals are updated annually.</li> <li>3. The postsecondary goals were based on age-appropriate transition assessment (AATA).</li> <li>4. There are transition services that will reasonably enable the student to meet the postsecondary goal(s).</li> <li>5. The transition services include courses of study that will reasonably enable the student to meet the postsecondary goal(s).</li> <li>6. The annual goal(s) are related to the student’s transition service needs.</li> <li>7. There is evidence that the student was invited to the IEP Team Meeting where transition services were discussed.</li> <li>8. When appropriate, there is evidence that a representative of any participating agency was invited to the IEP Team Meeting.</li> </ol> <p><b>Interviews</b>            Career Tech instructors and AMP coaches stated that, although they work with students with disabilities on what would be considered transition activities, they are not involved in writing transition plans. They do not participate in IEP meetings either. Career Tech instructors are asked via email to share input on students but do not have to fill out their own Part 1.</p>	<p><b>Individual Correction</b>            The educational agency must reconvene the teams to review and correct the postsecondary transition plan for the IEPs identified as noncompliant.</p> <p><b>Systemic Correction</b>            The educational agency must submit evidence to the Department of 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><b>Opportunities for Improvement</b>            OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</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>According to what the intervention specialists were sharing, the AMP coaches administer the AATA but intervention specialists capture PINS in an interest survey students complete with the intervention specialist. They stated that the intervention specialist works closely with the AMP coaches to make sure all services are met.</p> <p><b>Concerns Noted</b> Some common themes noted when reviewing submitted records were:</p> <ul style="list-style-type: none"> <li>• Goals were generic or similar, for example: “student will obtain a competitive integrated employment with supports in the community.” Goals and transition services should be specific, individualized to each student, and target full time employment.</li> <li>• Some goals did not incorporate specific career information that was gained through the age-appropriate transition assessment (AATA). For example, even when the AATA specified a desired career path for a student, the goal did not reference this, instead using phrasing such as “[student] will obtain a career of his choice.”</li> <li>• Some goals were not written in measurable terms (it was unclear how it would be determined if the goal had or had not been achieved).</li> <li>• Some transition services were written in a way that focused more on what the student will do, not what service a staff member will provide. Similarly, some services used language such as “[student] will have the opportunity to...” Phrasing like this does not clearly state what a staff member will be doing to support the student.</li> <li>• Transition services were not individualized based on the students’ needs, for example: student “will be provided with information regarding job postings in the area,” or “will be provided with a career survey” (these are not transition services).</li> </ul>		

Record Review Item	Evidence of Findings	Evidence of Correction/Recommendations	Must be Addressed in CAP
	<ul style="list-style-type: none"> <li>Goals and transition services were the same for two consecutive IEPs.</li> </ul>		
DS-2	<p><b>34 CFR 300.320(a)(1) [Definition of individualized education program]</b></p> <p>Fourteen (14) out of 15 or 93% of IEPs reviewed did not contain Present Levels of Academic Achievement and Functional Performance (PLOP) that addressed the needs of the student.</p> <p><b>Concerns Noted</b></p> <p>Record reviews revealed that, of the records found noncompliant in this area, present levels often lacked clear present baseline data of the student's performance in alignment with the condition, behavior, and performance criteria of the measurable annual goal. Sometimes, a comparison to grade-level standards or to age-appropriate performance expectations is missing.</p>	<p><b>Individual Correction</b></p> <p>The educational agency must reconvene the IEP teams of the IEPs identified as noncompliant to review and amend the PLOP related to each goal to include the following information as it relates to each goal:</p> <ul style="list-style-type: none"> <li>Summary of current daily academic/behavior and/or functional performance compared to expected <b>grade-level</b> standards or to expected age-appropriate performance in order to provide a frame of reference for annual goal development in the specific area of academic and/or functional need.</li> <li>Baseline data provided for developing a measurable goal (for example, ETR results, if current, formative academic assessments, curriculum-based measurements, transition assessments or functional behavior assessments).</li> <li>Current performance measurement <b>directly</b> relates to the goal measurement.</li> </ul> <p><b>Systemic Correction</b></p> <p>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. 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><b>Opportunities for Improvement</b></p> <p>OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</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
		In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.	
DS-3	<p><b>34 CFR 300.320(a)(2)(i) [Definition of individualized education program]</b> Eight out of 15 or 53% of IEPs reviewed did not contain measurable annual goals.</p> <p><b>Interviews</b> Special education teachers seem to be specialized in an area from what was shared (some focus on reading and writing while others focus on math and behavior). Paraprofessionals also shared that they observe students in order to identify specific needs and if they meet their goals.</p> <p><b>Concerns Noted</b> Some common themes noted when reviewing submitted records were:</p> <ul style="list-style-type: none"> <li>• Behavior goals are not measurable or unclear.</li> <li>• The condition is unclear as written or was not provided.</li> <li>• Performance criteria is missing.</li> <li>• More than one skill is represented in the goal.</li> </ul>	<p><b>Individual Correction</b> The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend annual goals to contain the following critical elements:</p> <ol style="list-style-type: none"> <li>1. <u>Clearly defined behavior</u>: the specific action the child will be expected to perform.</li> <li>2. The <u>condition</u> (situation, setting or given material) under which the behavior is to be performed.</li> <li>3. <u>Performance criteria</u> desired: the level the child must demonstrate for mastery <b>and</b> the number of times the child must demonstrate the skill or behavior.</li> </ol> <p><b>Systemic Correction</b> The educational agency must submit evidence to the Department of written procedures and practices regarding the development of measurable annual IEP goals. 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><b>Opportunities for Improvement</b> OEC will deliver targeted training to all staff on August 20, 2025.  SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	<input checked="" type="checkbox"/> Yes This finding needs to be addressed in a Corrective Action Plan.
DS-4	<p><b>34 CFR 300.320(a)(2)(i) [Definition of individualized education program]</b> Eight out of 15 or 53% of IEPs reviewed did not contain annual goals that address the child’s academic area(s) of need.</p>	<p><b>Individual Correction</b> 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</p>	<input checked="" type="checkbox"/> Yes This finding needs to be addressed in a

Record Review Item	Evidence of Findings	Evidence of Correction/Recommendations	Must be Addressed in CAP
	<p><b>Concerns Noted</b></p> <p>Many times, the ETR identifies additional educational needs that are not addressed in the IEP. There should be a statement in the Child's Profile if not addressing through a goal or accommodation.</p>	<p>child unless the team provides evidence that the goals were prioritized based on the severity of the needs of the child.</p> <p><b>Systemic Correction</b></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. 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><b>Opportunities for Improvement</b></p> <p>OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	<p>Corrective Action Plan.</p>
<p><b>DS-5</b></p>	<p><b>34 CFR 300.320(a)(2)(i) [Definition of individualized education]</b></p> <p>Seven out of 13 applicable IEPs or 54% of applicable IEPs reviewed did not contain annual goals that address the child's functional area(s) of need.</p> <p><b>Concerns Noted</b></p> <p>Many times, the ETR identifies additional functional needs that are not addressed in the IEP. There should be a statement in the Child's Profile if not addressing through a goal or accommodation.</p>	<p><b>Individual Correction</b></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><b>Systemic Correction</b></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. 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><b>Opportunities for Improvement</b></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>OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	
<p><b>DS-6</b></p>	<p><b>34 CFR 300.320(a)(4) [Definition of individualized education program]</b>  <b>OAC 3301-51-07 (H)(1)(e)(i) [Definition of IEP]</b></p> <p>Twelve (12) out of 15 or 80% of 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><b><u>Interviews</u></b></p> <p>Staff shared that intervention specialists have transitioned to delivering SDI when students are not in their CTE program, to give them the flexibility needed for the weeks the students are in the program and not available for services.</p> <p><b><u>Concerns Noted</u></b></p> <p>For the records that were found noncompliant for this section, the most common reasons were:</p> <ul style="list-style-type: none"> <li>• The mode of delivery (small group, one-on-one, etc.) was unclear or not specified.</li> <li>• The specially designed instruction was not different from the instruction delivered in the general education classroom and did not indicate instructional level(s) and specific skills. In several records, what was described was generic in nature and not specific to the unique learning style of the student.</li> </ul>	<p><b><u>Individual Correction</u></b></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><b><u>Systemic Correction</u></b></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. 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><b><u>Opportunities for Improvement</u></b></p> <p>OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</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
	Also, any type of embedded instruction into an online curriculum is not considered specially designed instruction.		
DS-7	<p><b>34 CFR 300.320(a)(7) [Definition of individualized education program]</b>  <b>OAC 3301-51-07 (H)(1)(i) [Definition of IEP]</b></p> <p>Three out of 15 or 20% of IEPs reviewed did not indicate the specific location where the specially designed instruction will be provided.</p> <p><b>Concerns Noted</b>  For the records that were found noncompliant for this section, the reasons were:</p> <ul style="list-style-type: none"> <li>Multiple locations for services were mentioned.</li> <li>For one record, the location was indicated for the first goal/SDI but not for the other ones (it was left blank).</li> </ul>	<p><b>Individual Correction</b>  The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and amend the location where the specially designed instruction will be provided.</p> <p><b>Systemic Correction</b>  It is recommended that the educational agency review and revise its written procedures and practices regarding the IEP process of determining the location where specially designed instruction will occur. 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><b>Opportunities for Improvement</b>  OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	<input checked="" type="checkbox"/> No This finding does <u>not</u> need to be addressed in a Corrective Action Plan.
DS-8	<p><b>34 CFR 300.320(a)(7) [Definition of individualized education program]</b>  <b>OAC 3301-51-07 (H)(1)(i) [Definition of IEP]</b></p> <p>All IEPs reviewed indicated the amount of time and frequency of the specially designed instruction.</p>	<p><b>Individual Correction</b>  N/A</p> <p><b>Systemic Correction</b>  N/A</p>	<input checked="" type="checkbox"/> NA
DS-9	<p><b>34 CFR 300.324(a)(2)(v) [Development of IEP] OAC 3301-51-01(B)(3) [Applicability of requirements and definitions]</b></p>	<p><b>Individual Correction</b>  N/A</p>	<input checked="" type="checkbox"/> NA

Record Review Item	Evidence of Findings	Evidence of Correction/Recommendations	Must be Addressed in CAP
	This area was not applicable for the records reviewed.	<u><b>Systemic Correction</b></u> N/A	
DS-10	<p><b>34 CFR 300.320(a)(6)(i) [Definition of individualized education]</b>  <b>OAC 3301-51-07 (H)(1)(g) [Definition of IEP]</b></p> <p>Seven out of 15 or 47% of 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><b>Interviews</b></u></p> <p>Staff stated that student needs are shared with all teachers so that accommodations are provided consistently within small groups as needed. Communication between general and special education teachers regarding needs of students is ongoing.</p> <p><u><b>Concerns Noted</b></u></p> <p>For the records that were found noncompliant for this section, the most common reasons were:</p> <ul style="list-style-type: none"> <li>• The ETR and/or Section 3 Child’s Profile in the IEP identify more accommodations, which need to be addressed in the IEP.</li> <li>• Section 12 mentions different accommodations than section seven (ensure section seven includes all the accommodations listed in section 12).</li> </ul>	<p><u><b>Individual Correction</b></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><b>Systemic Correction</b></u></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding accommodations. 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><b>Opportunities for Improvement</b></u></p> <p>OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	<input checked="" type="checkbox"/> Yes This finding needs to be addressed in a Corrective Action Plan.
DS-11	<p><b>34 CFR 300.320(a)(4) [Definition of individualized education program]</b>  <b>OAC 3301-51-07 (H)(1)(e) [Definition of IEP]</b></p> <p>Two out of 5 or 40% of applicable IEPs reviewed did not identify modifications to enable the child to be involved and make progress in the general education curriculum.</p>	<p><u><b>Individual Correction</b></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</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
	<p><b><u>Concerns Noted</u></b></p> <p>Two records were found noncompliant for this section, as what was presented in the modification box was not an actual modification.</p>	<p>make progress in the general education curriculum and include them in the IEP</p> <p><b><u>Systemic Correction</u></b></p> <p>The educational agency must submit evidence to the Department of written procedures and practices regarding modifications. 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><b><u>Opportunities for Improvement</u></b></p> <p>OEC will deliver targeted training to all staff on August 20, 2025.</p> <p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	
DS-12	<p><b><i>34 CFR 300.320(a)(4) [Definition of individualized education program]</i></b>  <b><i>OAC 3301-51-07 (H)(1)(e) [Definition of IEP]</i></b></p> <p>One out of one or 100% of applicable IEPs reviewed did not identify supports for school personnel to enable the child to be involved and make progress in the general education curriculum.</p> <p><b><u>Interviews</u></b></p> <p>Interviewed staff consistently expressed a culture of collaboration at the school. Team members appear always willing to consult with their peers when assistance or clarification is needed.</p> <p><b><u>Concerns Noted</u></b></p> <p>The one record that was noncompliant in this area contained a Support for School Personnel statement that was no longer applicable (IEP was developed by another school and accepted</p>	<p><b><u>Individual Correction</u></b></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><b><u>Systemic Correction</u></b></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><b><u>Opportunities for Improvement</u></b></p> <p>OEC will deliver targeted training to all staff on August 20, 2025.</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>“as is”). The IEP must be amended to reflect the change of placement, as the student is no longer in a residential facility.</p>	<p>SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section.</p> <p>In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	
DS-13	<p><b><i>OAC 3301-51-07 (H)(1)(h)(ii) [Definition of IEP]</i></b>            This area was not applicable to the records reviewed.</p>	<p><b><u>Individual Correction</u></b>            N/A</p> <p><b><u>Systemic Correction</u></b>            N/A</p>	<input checked="" type="checkbox"/> NA
DS-14	<p><b><i>OAC 3301-51-07(L)(2) [Development, review and revision of IEP]</i></b>            Eight out of eight or 100% of applicable student records reviewed did not show evidence of progress reporting data collected and analyzed to monitor performance on each goal.</p> <p><b><u>Interviews</u></b>            Teachers shared the following information:</p> <ul style="list-style-type: none"> <li>• They use the DASL system to keep track of student progress. The system holds information such as name, address, notes, and grades. They can add positive notes about what students are doing well here.</li> <li>• Teachers record information on their assigned students chronologically, which provides a progressive snapshot of the student.</li> <li>• For progress monitoring they use SameGoal across the board, even if they have their own systems such as handwritten notes. They add information daily with an explanation of what was done.</li> </ul> <p>Paraprofessionals shared that they collect data as well and they provide the data to the intervention specialist. One para works with students in-person with a virtual IS to help keep the students</p>	<p><b><u>Individual Correction</u></b>            None</p> <p><b><u>Systemic Correction</u></b>            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% compliance in this area through a review of new records that have been written after all trainings have been completed.</p> <p><b><u>Opportunities for Improvement</u></b>            SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section. In addition, consider how the Internal Monitoring Team can be used to track improvements 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
	<p>on task throughout the lesson, and communicates with students via email, phone, text, etc.</p> <p><b>Concerns Noted</b></p> <p>For the records that were found noncompliant for this section, the reasons were:</p> <ul style="list-style-type: none"> <li>Quantitative data that was in alignment with the content, condition, and mastery criteria for at least one of the student's measurable annual goals was missing (only STAR results were listed).</li> <li>Progress reported did not align to measurement(s) used in the annual goal statement.</li> </ul>		
DS-15	<p><b>OAC 3301-51-07(L) [Development, review and revision of IEP]</b></p> <p>This area was not applicable to the records reviewed.</p>	<p><b>Individual Correction</b> N/A</p> <p><b>Systemic Correction</b> N/A</p>	<input checked="" type="checkbox"/> NA
DS-16	<p><b>34 CFR 300.321(5) [IEP team]</b> <b>OAC 3301-51-07(I) [IEP team]</b></p> <p>Two out of 15 or 13% of IEPs reviewed did not indicate that the IEP Team included a group of qualified professionals.</p> <p><b>Interviews</b></p> <p>Staff reported that parent involvement is often dependent upon age as the school serves many 18+ students who do not need a parent present. The parents of younger students are more involved. They also shared that a lot of parents and students are transient.</p> <p>At least three attempts are made to engage parents to participate in meetings. If a parent did not attend, the team holds the meeting without the parent and a PR-01 is sent home to let parents know the meeting took place.</p>	<p><b>Individual Correction</b></p> <p>For the IEPs identified as noncompliant, the educational agency must</p> <ul style="list-style-type: none"> <li>Provide evidence that the IEP team, including the parent, participated in the IEP meeting; or</li> <li>Provide evidence that the educational agency made reasonable attempts to include the parent in the IEP meeting; and/or</li> <li>Provide documentation that the parent and the educational agency consent, in writing, to excuse the required member prior to the IEP meeting; or</li> <li>Reconvene the IEP team to review the IEP with all required members present.</li> </ul>	<input checked="" type="checkbox"/> No This finding does <u>not</u> need to be addressed in a Corrective Action Plan.

Record Review Item	Evidence of Findings	Evidence of Correction/Recommendations	Must be Addressed in CAP
	<p>The retention specialists do home visits and update contact information. Houses advisors also reach out to families.</p> <p><b><u>Concerns Noted</u></b></p> <p>For the records that were found noncompliant for this section, the reasons were:</p> <ul style="list-style-type: none"> <li>• Missing signature of district representative who is a required IEP team member (IEP was developed by another school and accepted “as is”).</li> <li>• Adult student was not present. Only one phone call was attempted by the school to involve the student.</li> </ul>	<p><b><u>Systemic Correction</u></b></p> <p>It is recommended that the educational agency review and revise its written procedures and practices regarding the involvement of all required team members, including the parent, in IEP meetings. 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><b><u>Opportunities for Improvement</u></b></p> <p>This process could be strengthened in the documentation phase by instituting a written, school-wide policy.</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	<p><b>34 CFR 300.114 [LRE requirements] and 300.320(a)(5) [Definition of individualized education program]</b>  <b>OAC 3301-51-07 (H)(1)(f) [Definition of individualized education program]</b></p> <p>Nine out of 15 or 60% 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><b><u>Interviews</u></b>            According to staff, school has a Monday/Wednesday/Friday push-in system when they have push-in intervention to academic classes. They also push-in to help the teacher with instructional needs and provide accommodations. Tuesdays and Thursdays, intervention specialists pull students out for SDI specific to their goals.</p> <p>Some of the students are on home instruction, as needed, and have a virtual intervention specialist.</p> <p>According to staff, there are wrap around services available for the multiple needs of their students: academic, behavioral, mental health, resources, etc. The CTE programs are shared with students to make them aware of programming and the requirements for each program beginning with the day of enrollment. The Jump Start system helps set the stage for students to lower anxiety so students know the plan for implementation.</p> <p><b><u>Concerns Noted</u></b>            For the records that were found noncompliant for this section, the most common reasons were:</p>	<p><b><u>Individual Correction</u></b>            The educational agency must reconvene the teams of the IEPs identified as noncompliant to review and include a justification as to why the child was removed from the general education classroom.</p> <p>The justification should:</p> <ul style="list-style-type: none"> <li>• Be based on the needs of the child, not the disability.</li> <li>• Reflect that the team has given adequate consideration to meeting the student’s needs in the general classroom with supplementary aids and services.</li> <li>• Document that the nature or severity of the disability is such that education in general education classes, even with the use of supplementary aids and services, cannot be achieved satisfactorily.</li> <li>• Describe potential harmful effects to the child or others, if applicable.</li> </ul> <p><b><u>Systemic Correction</u></b>            It is recommended that the educational agency review and revise its written procedures and practices regarding the least restrictive environment placement decision process. 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><b><u>Opportunities for Improvement</u></b>            SST 11 will offer technical assistance to the school, which will provide clarity on the compliance criteria of this section. In addition, consider how the Internal Monitoring Team can be used to track improvements in this area.</p>	<p><input checked="" type="checkbox"/> Yes</p> <p>This finding needs to be addressed in a Corrective Action Plan.</p>

	<ul style="list-style-type: none"><li>• The justification did not describe why the student cannot be served in the general education classroom.</li><li>• The justification did not reflect the consideration of services that had been tried in the general education classroom that were not successful.</li></ul>		
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**Additional Considerations and Opportunities for Improvement:**

1. The school must either create or review its policies and procedures regarding the process of reviewing transfer special education documents (ETRs, IEPs, PR-05s, etc.).
2. General education teachers, AMP coaches, and CTE instructors should be trained in how to write a Part 1 (Individual Evaluator's Assessment) for the ETR and should be involved in the planning process.
3. The AMP coaches and the CTE instructors should be involved in IEP meetings and transition activities.
4. If AMP coaches and CTE instructors are working with students on a specific program, that program should be reflected in the IEP.
5. For contracted services, including related services/psychological services, the school should have an onboarding and training process to ensure that they are up to date with special education processes (a procedural IEP/ETR guide should be provided to contractors).