



**Executive Summary
of the
Gifted Education Compliance Monitoring Review
of the
Mars Area School District**

**PART I
SUMMARY OF FINDINGS**

A. Review Process

Prior to the Bureau's monitoring the week of March 19, 2012, the Mars Area School District was formally notified of the dates the on-site review would be conducted. The LEA was informed of its responsibility to compile various reports, written policies, and procedures to document compliance with requirements.

While on-site, the monitoring team employed a variety of techniques to gain an in-depth understanding of the LEA's gifted program operations. These techniques included:

- Interviews of LEA administrative and clinical staff.
- Review of policies, notices, plans, gifted education forms, and data reports used and compiled by the LEA (Gifted Facilitated Self-Assessment.)
- Comprehensive case studies (including interviews of gifted education staff, parents and students, and student file reviews).

B. General Findings

In reaching compliance determinations, Bureau of Special Education (BSE) monitoring teams apply criteria contained in state gifted education regulations. Specifically, these are:

- 22 Pa. Code Chapter 16 (State Board of Education Gifted Education Regulations)

This report focuses on compliance with requirements and also contains some descriptive information (such as interview results) which is intended to provide feedback to assist in program planning.

C. Overall Findings of the Three Major Sections of the Compliance Monitoring Instrument

1. GIFTED FACILITATED SELF-ASSESSMENT (GFSA)

The team reviewed the FSA submitted by the LEA and conducted on-site verification activities of the information submitted in the GFSA. The on-site verification activities included review of policies, notices, procedures, and school file reviews.

FSA	In Compliance	Out of Compliance
Strategic Plan and Policy		X
Personnel	X	
Special Education/Dual Exceptionalities	X	
Screening and Evaluation Process	X	
Gifted Education Placement	X	
Gifted Procedural Safeguards	X	
Student Record Review		X

2. FILE REVIEW (Student case studies)

The gifted education records of randomly selected students participating in gifted education programs were studied to determine whether the LEA complied with essential requirements in five areas.

The status of compliance of the LEA is as follows:

Sections of the FILE REVIEW	In Compliance	Out of Compliance	N/A
Essential Student Documents Are Present and Were Prepared Within Timelines	67	8	5
Evaluation/Reevaluation: Process and Content	111	0	9
Gifted Individualized Education Program (GIEP): Process and Content	203	116	1
TOTALS	381	124	15

3. TEACHER, PARENT AND STUDENT INTERVIEWS

Interviews were conducted with parents and teachers of students and students selected by the BSE for the sample group. The goal is to determine if the LEA involves parents, students and professionals in required processes (e.g., Evaluation, GIEP development...), whether programs and services are being provided, and whether the LEA provides training to enhance knowledge. Parent, student and teacher satisfaction with the gifted education program is also generally assessed.

	# Yes Responses	# No Responses	N/A
Program Implementation: Teacher Interviews	199	1	0
Program Implementation: Parent Interviews	127	3	0
Program Implementation: Student Interview	69	1	0
TOTALS	395	5	0

4. COMMENDATIONS

- The school district is commended for coordinating and integrating the gifted program with the regular education program at all levels.

PART II

CORRECTIVE ACTION PROCESS

PART I of this report presented an overall summary of findings in each major area reviewed by the team. In the Appendix to the report, we have provided you with detailed findings for each of the criteria of the 3 major sections of the gifted compliance monitoring instrument, i.e. GFSA, File Review, and Parent, Student and Teacher Interviews. The detailed report of findings in the Appendix includes:

- Criteria Number
- Statements of all requirements
- Whether each requirement was met or was not met
- Statements of corrective action required for those criteria not met

Upon receipt of this report, the LEA should review the corrective actions required. The Report is formatted so that findings from all components of the gifted monitoring are consolidated by topical area. The Report lists the finding, and whether corrective action is required. For certain types of findings, corrective action will be prescribed, and will not vary from LEA to LEA. For example, if the finding is that the LEA lacks a specific required policy, it is reasonable to have the BSE prescribe a standardized remedy and timeline for correcting this deficiency. However, the majority of corrective action activities will be individually designed by the LEA based on their own unique circumstances and goals.

The BSE Adviser will schedule an on-site visit with the LEA within 60 days following issuance of the gifted monitoring report. The Adviser and LEA staff will develop a LEA Compliance and Improvement Plan for corrective action. The LEA will recommend a corrective action or Improvement Plan strategy and timeline. The LEA proposes corrective action activities and the BSE Adviser and LEA mutually agree upon the Plan for Corrective Action. The BSE Adviser will confirm and submit a PDE approved LEA improvement plan.

With respect to the File Review, because students were selected at random, findings are generalized to the entire population of gifted students. During the corrective action review, the BSE Adviser will select students at random and not focus on those students in the original sample. Consequently, the LEA should approach corrective action on a systemic basis. If there has been a finding of non-compliance regarding the appropriateness or implementation of an individual student's program the LEA must take immediate, individual corrective action.

Upon conclusion of the corrective action process, the LEA will be notified of its successful completion of the gifted monitoring process.

While the Bureau of Special Education chairperson was responsible for on-site activities, report preparation, and resolution of any discrepancies in the report, responsibility for the corrective action process is assigned to the Director's Office. Therefore, LEA should direct inquiries and concerns related to corrective action to Dr. Shirley K. Curl at (717) 786-6361.