Charter School Corrective Action Verification/Compliance and Improvement Plan - Bureau of Special Education

This	form	is d	esigned	to s	erve 1	both	as a	pla	nning	too	l and	as	verif	icatio	on of	f co	mpl	etion	of	correc	ctive a	action.	

Charter School:	Academy CS	
Chief Executive Off	ficer: Mr. V	Villiam Styche
Special Education D	Director/Coordin	nator: Ms. Amy Abraham
BSE Special Educat	ion Adviser:	Marie Held

Date of Report: January 28, 2014

Date Final Report Sent to LEA: December 23, 2013 Reminder: The timelines for corrective action of all non-compliance items may not exceed ONE YEAR from the

Date Final Report Sent to LEA

First Visit Date: January 28, 2014

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						Topical Area 1: Policies, Practices, and Procedures			
Y						1. FSA-ASSISTIVE TECHNOLOGY AND SERVICES			
						Standard: The Local Education Agency (LEA) observed the requirement that the provision of assistive technology is reflected in the student's IEP			
Y						1A. FSA-HEARING AIDS			
						Standard: Each public agency shall ensure that the hearing aids worn in school by children with hearing impairments, including deafness, are functioning properly. Each public agency must ensure that the external components of surgically implanted medical devices are functioning properly			
Y						2. FSA-POSITIVE BEHAVIOR SUPPORT Standard: LEA complies with the positive behavior			
						support policy requirements.			
Y						3. FSA-CHILD FIND			
						Standard: LEA demonstrates compliance with annual public notice requirements.			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
Y						4. FSA-CONFIDENTIALITY			
						Standard The LEA is in compliance with			
						confidentiality requirements.			
		X				5. FSA-DISPUTE RESOLUTION (DUE PROCESS HEARING DECISION IMPLEMENTATION)			
						Standard: The LEA uses dispute resolution processes for program improvement.			
Y						8. FSA-PROCEDURAL REQUIREMENTS FOR SUSPENSION			
						Standard: The LEA adheres to procedural requirements in suspending students with disabilities.			
Y						10. FSA-INDEPENDENT EDUCATIONAL EVALUATION			
						Standard: The LEA documents a procedure for responding to requests made by parents for an independent educational evaluation at public expense.			
Y						11A. FSA-LEAST RESTRICTIVE ENVIRONMENT			
						Standard: The LEA's continuum of special education services supports the availability of LRE under 34 CFR Part 300.			
Y						12. FSA-EXTENDED SCHOOL YEAR SERVICES			
Y						13. FSA-RELATED SERVICE INCLUDING PSYCHOLOGICAL COUNSELING			
Y						15. FSA-PARENT TRAINING Standard: Parent opportunities for training and information sharing address the special knowledge, skills and abilities needed to serve the unique needs of children with disabilities.			
						P 62. My school district/charter school makes available training related to the needs of students with disabilities that I could attend.			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					1	Always			
					1	Sometimes			
					0	Rarely			
					0	Never Don't Know			
					$\begin{bmatrix} 4 \\ 0 \end{bmatrix}$	Does not Apply			
					0	P 63. My school district/charter school invites parents to			
						trainings that are available to school staff regarding			
						research based best practices, supplementary aids and			
						services, differentiating instruction and modifying the			
						general education curriculum.			
					2	Always			
					1	Sometimes			
					0	Rarely			
					0	Never Don't Know			
					3	Does not Apply			
Y					Ŭ	18. FSA-SURROGATE PARENTS (STUDENTS			
1						REQUIRING)			
						Standard: The LEA identifies eligible students in need			
						of surrogate parents and recruits, selects, trains, and			
						assigns in a timely manner.			
Y						19. FSA-PERSONNEL TRAINING			
						Standard: In-service training appropriately and			
						adequately prepares and trains personnel to address the special knowledge, skills, and abilities to serve the			
						unique needs of children with disabilities, including			
						those with low incidence disabilities, when applicable.			
						INTERVIEW RESULTS (General & Special Education			
						Teacher)			
10	0	0				GE 88. Do you receive training regarding how to differentiate			
						instruction and modify the curriculum in your			
						classroom?			
10	0	0				GE 89. Do you receive training regarding how to provide			
						positive behavior supports for students with negative			
						behaviors?			
10	0	0				GE 90. If you have a student with a behavioral need, have you			
						been trained how to deescalate negative and aggressive			
						student behavior?			
7	1	2				GE 91. Do you participate in determining the kinds of training			
						and technical assistance needed to support students			
						with IEPs in regular education classrooms?			

Y	N	NA	DK Not % Obs #		Citation	Required Corrective Action Evidence of Change	Timelines and Closed Resources Date
5	0	5			is AT included in his/her current IEP, ived training in AT, and accessing AT		
10	0	0			orate with general education teachers and s to recommend training needs for hin the LEA?		
Y				Standard: The for the provision (FAPE) for all	LEA identifies, reports, and provides on of Free Appropriate Public Education students with disabilities including those		
Y				21. FSA-SUMMA FUNCTIONA SAFEGUARE GRADUATIO			
				Achievement a whose eligibili	e LEA provides Summary of Academic and Functional Performance for children ity terminates due to graduation or aging provides required prior written notice for		
				Topical Area 2: Deliver	ry of Service		
Y				Standard: The	e LEA's percentage of children with rved in special education is comparable to		
Y				Standard: Tin	mely provision of FAPE for students who agencies within state, and from another		
Y				THAT IS THI IDENTIFICA Standard: LE.	EA does not demonstrate disproportionate		
					of racial/ethnic groups receiving special by disability group.		

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
Y						23. FSA-EDUCATIONAL BENEFIT REVIEW			
						Standard: The IEP meets procedural compliance and			
						is reasonably calculated to enable the child to advance			
						appropriately toward attaining their annual goals.			
						CLASSROOM OBSERVATIONS			
14	0	0		1		CO 1. Is the instruction provided to the student individualized as required by his/her IEP?			
14	0	0		1		CO 2. Is the instruction being provided in accordance with the goals in the student's IEP?			
0	0	15		0		CO 3. If assistive technology is included in the student's IEP and required for the activity observed, is it being used?			
8	0	7		0		CO 4. If the student is in a regular education setting, is he/she participating in the lesson taught by the general education teacher or a co-teacher?			
8	0	7		0		CO 5. If the student is in a regular education setting, is the student appropriately integrated (physically) in the class?			
14	0	1		0		CO 6. If the student's IEP contains supplementary aids and/or services, are they being delivered in the classroom setting as required?			
15	0	0		0		CO 7. Does this setting coincide with the student's IEP with regard to the extent to which the student is educated with non-disabled peers?			
						INTERVIEW RESULTS (Parent, General & Special Education Teacher)			
						P 55. My child does classroom work in a regular classroom with students without disabilities.			
	İ				2	Always			
					3	Sometimes			
					0	Rarely			
					0	Never			
					1	Don't Know			
	<u> </u>	<u> </u>			0	Does not Apply			
						P 56. My child participates or has the opportunity to			
						participate in school activities other than classroom			
						work, including extra-curricular activities, with			
						students without disabilities.			

				5 1 0 0 0	Always Sometimes Rarely Never Don't Know Does not Apply P 56a. My child goes on field trips, attends school functions		
				0	Rarely Never Don't Know Does not Apply		
				0	Never Don't Know Does not Apply		
				0	Don't Know Does not Apply		
					Does not Apply		
				0			
					P 56a. My child goes on field trips, attends school functions		
					and/or participates in extracurricular activities with their same age/grade peers who are non-disabled.		
			- 1	5			
				0	Always Sometimes		
				0	Rarely		
				0	Never		
				1	Don't Know		
				0	Does not Apply		
					P 56b. There are routine opportunities for my child to interact		
					with peers who are non-disabled that are planned		
					and/or facilitated by school personnel.		
l i i			ŀ	5	Always		
				0	Sometimes		
				0	Rarely		
				0	Never		
				1	Don't Know		
				0	Does not Apply		
10 0	0				GE 70. Are you familiar with the content of this student's		
					current IEP, including accommodations, supplementary		
					aids and services, and annual goals?		
10 0	0				GE 71. Do you adapt and modify the general education		
					curriculum based on the student's current IEP?		
10 0	0				GE 72. Do you have support from special education personnel		
					to help you modify curriculum, instruction and		
					assessment as required in the student's current IEP?		
10 0	0				GE 73. Are you and the special education personnel working		
					collaboratively to implement this student's program?		
10 0	0				GE 78. Are all the supplementary aids and services necessary		
					for the student's progress in the general education class		
					included in his/her current IEP?		
10 0	0				GE 80. Is the student making progress within the general		
					education curriculum?		
10 0		 					
10 0	0				GE 80a. In your opinion, is this student benefiting from participation in your general education classroom?		
		\vdash	-		·		
	0				GE 80b. If yes, in what ways?		

Y	N	NA	D K	Not % Obs #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					Socially Writing improved as well as writing skills. Academically, does the work. Socially & encouraging. The student is very academic & is successful. Enjoys interaction. Adds to the discussion. Much writing - thinking skills. Developing social skills, seeing other students, participates, which boosts confidence. Better relationships with teachers. Following directions. Likes math. Keeps asking to do more math. Student feels successful.			
0	0	10			GE 80c. If no, what does this student need that he/she is not receiving in your class?			
9	1	0			GE 85. Do you have sufficient time to collaborate with the special education teacher in order to meet this student's needs?			
10	0	0			GE 85a. Have you received sufficient training, technical assistance and other support to teach this student?			
0	0	10			GE 85b. If no, what training or support would assist you?			
9	1	0			GE 93. Do special education personnel work directly with you to help you reduce negative student behaviors?			
10	0	0			SE 95. Is this student participating in the general education class and curriculum with students without disabilities to the maximum extent possible?			
6	0	4			SE 95a. In the most recent IEP meeting for this student, did you discuss whether he/she could be educated in a general education classroom for the entire school day?			
1	5	4			SE 95b. In the most recent IEP meeting, did the IEP team recommend removal of this student from the general education classroom for any part of the school day?			
0	0	9			SE 95c. If yes, what reasons were discussed for recommending removal? Has a learning disability in math, reading & writing.			
0	0	9			SE 95d. If yes, how was the amount of time that this student would be removed from the general education classroom decided? Past IEPs. Teacher observations & recommendations.			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
6	0	4			SE 95e.	In the most recent IEP meeting, did the IEP team discuss whether this student could be educated satisfactorily in a general education classroom for the entire school day with supplementary aids and services?			
10	0	0			SE 96.	Has the student been given the opportunity to participate in non-academic and extracurricular activities with children without disabilities?			
10	0	0			SE 97.	Have necessary supports been offered and/or provided to enable that participation?			
10	0	0			SE 99.	Are you and related services personnel working together toward meeting the measurable annual goals for this student?			
10	0	0			SE 100.	Are you and general education personnel working together toward meeting the measurable annual goals for this student?			
10	0	0			SE 115.	Did the IEP team have available information regarding use of the Supplementary Aids and Services ToolKit?			
10	0	0			SE 125.	Do you collaborate with general education teachers to identify training needs related to the provision of supplementary aids and services to students with IEPs in the general education classroom?			
					Topical	Area 3: Performance Indicators			
		X			5A.	FSA-EFFECTIVE USE OF DISPUTE RESOLUTION			
						Standard: The LEA uses dispute resolution processes for program improvement.			
Y					6.	FSA-GRADUATION RATES (SPP) Standard: The graduation rate of the LEA's students			
						with disabilities is comparable to the state graduation rate.			
Y					7.	FSA-DROPOUT RATES (SPP)			
						Standard: The dropout rate of the LEA's students with disabilities is comparable to the state dropout rate.			
Y					8A.	FSA-SUSPENSION RATES			
						Standard: The LEA's rate of suspensions and expulsions of students with disabilities is comparable to the rate of other LEAs in the state.			

Y	N	NA	D K	Not % Obs #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
	N				11. FSA-LEAST RESTRICTIVE ENVIRONMENT (SPP) Standard: Students with disabilities are provided for in the least restrictive environment	Academy Charter will write an improvement plan to address the 80% or more category.	12/23/2014 Charter School Administration;Pa TTAN consultant;BSE Adviser	01/28/2014
	N				16. FSA-PARTICIPATION IN PSSA AND PASA (SPP) Standard: The LEA's population of students who participate in state assessment is comparable with the state data.	Academy Charter will write an improvement plan to address participation rate for PSSA.	12/23/2014 Charter School Administration;Pa TTAN consultant;BSE Adviser	01/28/2014
Y					16A. FSA-DISTRICT-WIDE ASSESSMENT			
					Topical Area 4: Evaluation and Reevaluation Process and Content			
					CONSENT AND WAIVER REQUIREMENTS FOR EVALUATION/REEVALUATION			
					PERMISSION TO EVALUATE (File Reviews)			
0	0	10			FR 153. PTE-Consent Form is present in the student file			
0	0	10			FR 154. Demographic data			
0	0	10			FR 155. Reason(s) for referral for evaluation			
0	0	10			FR 156. Proposed types of tests and assessments			
0	0	10			FR 157. Contact person's name and contact information			
0	0	10			FR 158. Parent signature or documentation of reasonable efforts to obtain consent			
0	0	10			FR 159. Parent has selected a consent option			
0	0	10			FR 159a. NOREP/Prior Written Notice was issued			
					PERMISSION TO REEVALUATE (File Reviews)			
8	0	2			FR 194. PTRE-Consent Form is present in the student file			
8	0	2			FR 195. Demographic data			
8	0	2			FR 196. Reason for reevaluation			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
8	0	2			F	FR 197. Types of assessment tools, tests and procedures to be used			
8	0	2			F	FR 198. Contact person's name and contact information			
3	0	7			F	FR 199. Parent has selected a consent option			
8	0	2			F	FR 200. Parent signature or documentation of reasonable efforts to obtain consent			
5	0	5			F	FR 200a. NOREP/Prior Written Notice was issued			
					A	AGREEMENT TO WAIVE REEVALUATION (File Reviews)			
0	0	10			F	FR 201. Agreement to Waive Reevaluation is present in the student file			
0	0	10			I	FR 202. Waiver was completed within required timelines (3 years (2 years for any MR student or any student placed in an Approved Private School) from date of ER, prior RR, or Agreement to Waive RR)			
0	0	10			F	FR 203. Reason reevaluation is not necessary at this time is included			
0	0	10			F	FR 204. Contact person's name and contact information			
0	0	10			F	FR 205. Parent has selected a consent option			
0	0	10			F	FR 206. Parent signature			
					F	EVALUATION REPORT (INITIAL) (File Reviews)			
0	0	10			F	FR 160. ER is present in the student file			
0	0	10			F	FR 161. Evaluation was completed within timelines			
0	0	10			F	FR 162. A copy of the ER was disseminated to parents at least 10 school days prior to meeting of the IEP team (unless this requirement is waived by parent in writing)			
0	0	10			F	FR 163. Demographic data			
0	0	10			I	FR 164. Date report was provided to parent			
0	0	10			F	FR 165. Reason(s) for referral			
0	0	10			F	FR 166. Reason(s) for referral reflect the reason(s) listed on the PTE-Consent Form			

Y	N	NA	D K	Not Obs	% #		Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	0	10				the	aluations and information provided by the parents of student (or documentation of LEA's attempts to ain parent input)			
0	0	10				1	acher observations and observations by related vice providers, when appropriate			
0	0	10				FR 169. Red	commendations by teachers			
0	0	10				visi ada	e student's physical condition (including health, ion, hearing); social or cultural background; and ptive behavior relevant to the student's suspected ability and potential need for special education			
0	0	10				clas ach beh ass	sessments, including when appropriate, current ssroom based assessments, aptitude and ievement tests; local and/or state assessments; navioral assessments; vocational technical education essment results; interests, preferences, aptitudes (for ondary transition); etc.			
0	0	10				con froi was	n assessment is not conducted under standard ditions, description of the extent to which it varied m standard conditions (including if the assessment s given in the student's native language or other de of communication)			
0	0	10				FR 173. Lac	ck of appropriate instruction in reading			
0	0	10				FR 174. Lac	ck of appropriate instruction in math			
0	0	10				FR 175. Lin	nited English proficiency			
0	0	10				FR 176. Pre	sent levels of academic achievement			
0	0	10				FR 177. Pre	sent levels of functional performance			
0	0	10				FR 178. Bel	navioral information			
0	0	10				FR 179. Con	nclusions			
0	0	10				FR 180. Dis	ability Category			
0	0	10				FR 181. Rec	commendations for consideration by the IEP team			
0	0	10				FR 182. Eva	aluation Team Participants documented			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	0	10			FR 183.	For students evaluated for SLD documentation of Agree/Disagree			
0	0	10			FR 184.	Documentation that the student does not achieve adequately for age, etc.			
0	0	10			FR 185.	Indication of process(es) used to determine eligibility			
0	0	10			FR 186.	Instructional strategies used and student-centered data collected			
0	0	10			FR 187.	Educationally relevant medical findings, if any			
0	0	10			FR 188.	Effects of the student's environment, culture, or economic background			
0	0	10			FR 189.	Data demonstrating that regular education instruction was delivered by qualified personnel, including the ESL program, if applicable			
0	0	10			FR 190.	Data based documentation of repeated assessments of achievement at reasonable intervals, which was provided to parents			
0	0	10			FR 191.	Observation in the student's learning environment			
0	0	10			FR 192.	Other data if needed			
0	0	10			FR 193.	Statement for all 6 items indicated to support conclusions of the evaluation team			
					REEVA	LUATION REPORT (File Reviews)			
10	0	0			FR 207.	RR is present in the student file			
10	0	0			FR 208.	Reevaluation was completed within timelines (either 60 calendar days from the date of LEA receipt of signed PTRE-Consent Form, excluding summer break, or within 3 years (2 years for any MR student or any student placed in an Approved Private School) of date of ER, prior RR, or Agreement to Waive RR)			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
8	1	1			11%	FR 209. A copy of the RR was disseminated to parents at least 10 school days prior to the meeting of the IEP team (unless this requirement was waived by a parent in writing)	Academy Charter School Administration will provide training regarding the special education process for staff responsible for IEP development. Evidence of Change: The school district will provide the BSE Adviser with documentation of training and list of participants. The BSE adviser will conduct a file review during the onsite visit	12/23/2014 Charter School Administration;Pa TTAN consultant;BSE Adviser	01/28/2014
10	0	0				FR 210. Demographic data			
10	0	0				FR 211. Date IEP team reviewed existing evaluation data			
10	0	0				FR 212. Physical condition, social, or cultural background and adaptive behavior relevant to the student's need for special education			
10	0	0				FR 213. Evaluations and information provided by the parent (or documentation of LEA's attempts to obtain parent input)			
10	0	0				FR 214. Aptitude and achievement tests			
10	0	0				FR 215. Current classroom based assessments and local and/or state assessments			
10	0	0				FR 216. Observations by teacher(s) and related service provider(s) when appropriate			
10	0	0				FR 217. Teacher recommendations			
9	0	1				FR 218. Lack of appropriate instruction in reading			
9	0	1				FR 219. Lack of appropriate instruction in math			
9	0	1				FR 220. Limited English proficiency			
10	0	0				FR 221. Conclusion regarding need for additional data is indicated			
2	0	8				FR 222. Reasons additional data are not needed are included			
10	0	0				FR 223. Determination whether the child has a disability and requires special education			
10	0	0				FR 224. Disability category(ies)			

Y	N	NA	DK Not % Obs #		Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0		FR 225.	Summary of findings includes student's educational strengths and needs			
10	0	0		FR 226.	Summary of findings includes present levels of academic achievement and related developmental needs, including transition needs as appropriate			
10	0	0		FR 227.	Summary of findings includes recommendations for consideration by the IEP team regarding additions or modifications to the student's programs			
8	0	2		FR 228.	Interpretation of additional data			
6	0	4		FR 229.	Documentation that the student does not achieve adequately for age, etc.			
6	0	4		FR 230.	Indication of process(es) used to determine eligibility			
6	0	4		FR 231.	Instructional strategies used and student-centered data collected			
5	0	5		FR 232.	Educationally relevant medical findings, if any			
6	0	4		FR 233.	Effects of the student's environment, culture, or economic background			
6	0	4		FR 234.	Data demonstrating that regular education instruction was delivered by qualified personnel, including the ESL program, if applicable			
6	0	4		FR 235.	Data based documentation of repeated assessments of achievement at reasonable intervals, which was provided to parents			
6	0	4		FR 236.	Observation in the student's learning environment			
6	0	4		FR 237.	Other data if needed			
6	0	4		FR 238.	Statement for all 6 items			
10	0	0		FR 239.	Documentation of Evaluation Team Participants			
7	0	3	_	FR 240.	Documentation that team members Agree/Disagree			
				INTERVI Teacher)	EW RESULTS (Parent & Special Education			
6	0	0	0	P 24.	Have you been asked to provide information for your child's evaluation/reevaluation?			

Y	N	NA	D K	Not % Obs #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
6	0	0	0		P 25. Were you given the opportunity to provide this information in writing or in another way that worked for you?			
6	0	0	0		P 26. Was the information you provided to the school for your child's evaluation considered in your child's Evaluation Report?			
2	0	4	0		P 27. If your child was not reevaluated when required (every 2 years for children with mental retardation, or any child placed in an Approved Private School, and every 3 years for children with other disabilities) did you agree in writing to waive the reevaluation?			
1	2	1	2		P 51. Have you requested an Independent Educational Evaluation (IEE) for your child to be paid for by the school?			
0	1	3	2		P 52. If you have obtained an IEE for your child, were the results of that evaluation considered by the team?			
0	1	3	2		P 53. Were the results of the IEE included in the school's Evaluation Report for your child?			
4	0	6			SE 119. If this student is not making progress, has he/she been reevaluated and/or has the IEP been reviewed?			
					Topical Area 5: IEP Process and Content			
					INVITATION TO PARTICIPATE IN IEP TEAM OR OTHER MEETING (File Reviews)			
10	0	0			FR 241. Invitation is present in the student file			
10	0	0			FR 242. Invitation to Participate in the IEP Meeting was issued prior to the meeting (or documentation that parent signed waiver to move directly to IEP meeting)			
10	0	0			FR 243. Demographic data			
10	0	0			FR 244. Purpose(s) of the meeting			
10	0	0			FR 245. Transition planning and services – Invitation to parents is checked (age 14, younger if determined appropriate)			
2	0	8			FR 246. Transition planning and services - if appropriate, evidence that a representative of any participating agency was invited to the IEP team meeting with the prior consent of the parent or student			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
9	1	0			10%	FR 247. Transition planning and services – Invitation to student is checked (age 14, or younger if determined appropriate)	Academy Charter School Administration will provide training regarding the special education process for staff responsible for IEP development. Evidence of Change: The school district will provide the BSE Adviser with documentation of training and list of participants. The BSE adviser will conduct a file review during the onsite visit	12/23/2014 Charter School Administration;Pa TTAN consultant;BSE Adviser	01/28/2014
10	0	0				FR 248. Invited IEP team members			
10	0	0				FR 249. Date/time/location of meeting			
10	0	0				FR 250. Parent response, or documentation of parent attendance at the meeting, or documentation of multiple efforts to encourage participation			
						PARENT CONSENT TO EXCUSE MEMBERS FROM ATTENDING IEP TEAM MEETING (File Reviews)			
0	0	10				FR 251. Parent Consent to Excuse Members from Attending the IEP Team Meeting is present in the student file			
0	0	10				FR 252. Demographic data			
0	0	10				FR 253. Form designates IEP team member(s) for whom attendance is not necessary			
0	0	10				FR 254. Form designates which members will submit written input prior to the meeting			
0	0	10				FR 255. Parent written consent is documented			
						FR 256. The team members excused:			
					0 0 0	a. General Education Teacher b. Special Education Teacher c. Local Education Agency Representative			
						IEP CONTENT (File Reviews)			
10	0	0				FR 257. IEP is present in the student file			
10	0	0				FR 258. IEP was completed within timelines			
10	0	0				FR 259. Demographic data			
10	0	0				FR 260. IEP implementation date			

Y	N	NA	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
9	0	1			FR 261. Anticipated duration of services and programs			
3	0	7			FR 262. If appropriate, LEA and parent agreement to make changes to IEP without convening an IEP meeting DOCUMENTATION OF IEP TEAM PARTICIPATION (File			
					Reviews)			
10	0	0			FR 263. Parents			
10	0	0			FR 264. Student			
10	0	0]	FR 265. General Education Teacher			
10	0	0			FR 266. Special Education Teacher			
10	0	0			FR 267. Local Education Agency Representative			
2	0	8]	FR 270. Community Agency Representative			
0	0	10			FR 271. Teacher of the Gifted			
0	0	10			FR 272. Written input provided by IEP team member(s) excused from participating in the IEP meeting if the invitation stated they were to provide written input			
10	0	0			FR 273. Copy of Procedural Safeguards Notice was given to parent during the school year			
					SPECIAL CONSIDERATIONS (File Reviews)			
0	0	10			FR 274. If the student is blind or visually impaired, a description of the instruction in Braille and the use of Braille, unless the IEP team determines that such instruction is not appropriate			
0	0	10			FR 275. If the student is deaf or hard of hearing, a communication plan			
1	0	9			FR 276. If the student has communication needs, needs must be addressed in the IEP			
0	0	10			FR 277. If the student requires assistive technology devices and/or services, needs must be addressed in the IEP			
0	0	10			FR 278. If the student has limited English proficiency, the IEP team must consider English as Second Language for provision of FAPE			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
6	0	4			FR 279.	If the student has behaviors that impede his/her learning or that of others, the IEP includes a Positive Behavior Support Plan based on a functional assessment of behavior utilizing positive behavior techniques			
0	0	10			FR 280.	If the student has other special considerations, these are addressed in the IEP			
					l l	T LEVELS OF ACADEMIC ACHIEVEMENT AND ONAL PERFORMANCE (File Reviews)			
10	0	0			FR 281.	Student's present levels of academic achievement			
10	0	0			FR 282.	Student's present levels of functional performance			
10	0	0			FR 283.	Present levels related to current postsecondary transition goals (if student is 14, or younger if determined by IEP team)			
7	0	3			FR 284.	Parental concerns for enhancing the education of the student (if provided by parent to the LEA)			
10	0	0			FR 285.	How the student's disability affects involvement and progress in the general education curriculum			
10	0	0			FR 286.	Strengths			
10	0	0			FR 287.	Academic, developmental, and functional needs related to student's disability			
					TRANSI	TION SERVICES (File Reviews)			
10	0	0			FR 289.	Evidence that the measurable postsecondary goal(s) were based on age appropriate transition assessment			
10	0	0			FR 290.	An appropriate measurable postsecondary goal or goals that covers education or training, employment, and, as needed, independent living			
10	0	0			FR 291.	Evidence that the postsecondary goal or goals that covers education or training, employment, and, as needed, independent living are updated annually			
10	0	0			FR 292.	Location, Frequency, Projected Beginning Date, Anticipated Duration, and Person(s)/Agency Responsible for Activity/Service			
10	0	0			FR 292a	Transition services include courses of study that will reasonably enable the student to meet his/her postsecondary goal(s)			
10	0	0			FR 292b	Transition services in the IEP that will reasonably enable the student to meet his/her postsecondary goal(s)			

Y	N	NA	D K	Not % Obs #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0			FR 292c. Annual goals are related to the student's transition services PARTICIPATION IN STATE AND LOCAL ASSESSMENTS (File Review)			
10	0	0			FR 293. Documentation of IEP team decision regarding participation in statewide assessments (PSSA/Keystone Exams or PASA)			
9	0	1			FR 294. If the student will participate in the PSSA, documentation of IEP team decision regarding participation with or without accommodations			
0	0	10			FR 295. If the student will participate in the PASA, an explanation of why the student cannot participate in the PSSA/Keystone Exams			
0	0	10			FR 296. If the student will participate in the PASA, explanation of why PASA is appropriate			
0	0	10			FR 297. If the student will participate in the PASA, how student's performance will be documented (videotape or written narrative)			
10	0	0			FR 298. Indication of IEP team decision regarding participation in local assessments (local or alternate local)			
10	0	0			FR 299. If the student will participate in local assessments, indication of IEP team decision regarding participation with or without accommodations			
0	0	10			FR 300. If the IEP indicates the student will participate in an alternate local assessment, explanation of why the student cannot participate in the regular assessment			
0	0	10			FR 301. If the student will participate in an alternate local assessment, explanation of why the alternate assessment is appropriate			
					ANNUAL GOALS AND OBJECTIVES (INCLUDING ACADEMIC AND FUNCTIONAL GOALS) (File Reviews)			
10	0	0			FR 302. Measurable Annual Goals			
10	0	0			FR 303. Description of how student progress toward meeting goals will be measured			
10	0	0			FR 304. Description of when periodic reports on progress will be provided to parents			
10	0	0			FR 305. Documentation of progress reporting on Annual Goals			
1	0	9			FR 306. Short Term Objectives			

Y	N	NA	DK I	Not % Obs #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					SPECIAL EDUCATION/RELATED SERVICES/SUPPLEMENTARY AIDS AND SERVICES/PROGRAMS MODIFICATIONS (File Reviews)			
10	0	0			FR 307. Program Modifications and Specially-Designed Instruction			
10	0	0			FR 308. If the student's most recent Evaluation Report contained recommendations for modifications and accommodations, did the IEP team address those recommendations in development of this IEP			
10	0	0			FR 309. If Program Modifications and Specially Designed Instruction are included on the IEP, the location, frequency, projected beginning date and anticipated duration of services			
0	0	10			FR 310. If a student attends a Career or Vocational Technical School, evidence that the specially designed instruction addresses the student's needs in Career and Vocational Technical School			
10	0	0			FR 311. If Related Services are included on the IEP, the location, frequency, projected beginning date and anticipated duration of services			
10	0	0			FR 312. If the student's most recent Evaluation Report contained recommendations for the provision of related services, including psychological counseling, did the IEP team address those recommendations in development of this IEP			
10	0	0			FR 313. If Supports for school personnel are included on the IEP, the personnel to receive support, support, location, frequency, projected beginning date and anticipated duration of services			
7	0	3			FR 314. If the student's most recent Evaluation Report contained recommendations for program modifications or supports for school personnel provided for the student, did the IEP team address those recommendations in development of this IEP			
0	0	10			FR 315. Support services, if the student is identified as gifted and also is identified as a student with a disability			
10	0	0			FR 316. A conclusion regarding student eligibility for ESY			
10	0	0			FR 317. Information or data reviewed by the IEP team to support the ESY eligibility determination			
0	0	10			FR 318. Where ESY services were deemed appropriate, annual goals and when appropriate, short term objectives that are to be addressed in the child's ESY program			

Y	N	NA	DK N	Not % Obs #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	0	10			FR 319. Where ESY was determined to be appropriate, ESY service to be provided, location, frequency, projected beginning date and anticipated duration of services EDUCATIONAL PLACEMENT (File Reviews)			
10	0	0			FR 320. Explanation of the extent, if any, to which the student will not participate with students without disabilities in the regular education class			
10	0	0			FR 321. Explanation of the extent, if any, to which the student will not participate with students without disabilities in the general education curriculum			
10	0	0			FR 322. Type of support, by amount (itinerant, supplemental, full-time)			
10	0	0			FR 323. Type of special education supports, e.g. autistic support, emotional support, learning support, etc.			
10	0	0			FR 324. Location of student's program (name of LEA where the IEP will be implemented)			
10	0	0			FR 325. Location of student's program (name of School Building where the IEP will be implemented)			
2	0	8			FR 326. If child will not be attending his/her neighborhood school, reason why not			
					PENNDATA REPORTING FOR EDUCATIONAL ENVIRONMENT (File Reviews)			
10	0	0			FR 327. Completed Section A or Section B			
					IEP DEVELOPMENT			
					INTERVIEW RESULTS (Parent & General Education Teacher)			
6	0	0	0		P 28. Were you invited to participate in your child's most recent IEP team meeting?			
0	6	0	0		P 29. Did you participate in developing the current IEP for your child?			
3	2	1	0		P 30. Was the meeting held at a time and location that was convenient for you?			
4	0	2	0		P 31. If you were unable to participate in person, did the school offer other arrangements for you to participate by phone or through other methods?			
3	0	2	1		P 32. Was the input you provided considered in the development of your child's current IEP?			
4	0	1	1		P 32a. Have you received sufficient training, technical assistance and other support to participate as an IEP team member?			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	0	6	0			P 32b. If no, what training or support would assist you?			
5	0	1	0			P 33. Were the services you requested for your child considered by the IEP team in the development of your child's current IEP?			
2	0	2	2			P 35. Was the current IEP developed at the IEP meeting?			
0	2	2	2			P 36. If there was a draft IEP developed prior to the IEP meeting were you provided a copy of the draft either before or at the meeting?			
1	0	2	3			P 37. Were the special education teacher, the general education teacher and the school representative at the IEP meeting?			
0	0	3	3			P 38. If required IEP team members (special education teacher, general education teacher, or LEA) did not attend the meeting, did you agree in writing to them not being there?			
0	0	3	3			P 39. Was written input from the excused IEP team member(s) available to you before the meeting?			
		0	2		1 1 1 1	P 65. If you did not participate in your child's IEP meeting, what kept you from participating? a. transportation issues b. held at an inconvenient time f. no child-care available g. other Sick			
3	2	5				GE 74. Did you attend the most recent IEP meeting for this student or have the opportunity to provide input?			
2	1	7				GE 75. Did you recommend any needed supports to implement the current IEP for this student?			
2	0	8				GE 76. Were those recommendations considered by the IEP team?			
10	0	0				GE 86. When a student with a disability is included in your class do you have the opportunity to provide information to the IEP team?			
8	0	2				GE 87. Do you provide progress monitoring data as part of the IEP development process?			
						IEP CONTENT			
						INTERVIEW RESULTS (Parent, General & Special Education Teacher)			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
3	0	1	2		F	P 40. Did the IEP team consider the recommendations that were made in your child's most recent evaluation, including all recommendations that were made by the evaluation team for special education, related services, and supports for school personnel?			
3	0	0	2		F	P 41. Did the IEP team accept or reject the evaluation team's recommendations for special education, related services, and supports for school personnel for appropriate educational reasons.			
10	0	0				GE 81. Are this student's goals based on the PA Standards/PA Common Core or, if appropriate, alternate standards?			
10	0	0			(GE 82. Is the specially designed instruction in this student's current IEP appropriate to meet his/her educational needs?			
10	0	0			(GE 83. Is the current IEP appropriate to meet this student's educational needs?			
10	0	0			S	SE 98. Unless otherwise specified in the student's IEP, is the length of this student's instructional day the same as nondisabled students?			
10	0	0			S	SE 102. Is the specially-designed instruction in the current IEP appropriate to meet this student's educational needs?			
10	0	0			S	SE 103. Are the student's annual goals based on the PA Standards/PA Common Core or, if appropriate, alternate standards?			
10	0	0			S	SE 104. If appropriate, are the student's annual goals based on functional performance?			
10	0	0			S	SE 106. If the student's most recent Evaluation Report contained recommendations for modifications and accommodations did the IEP team address those recommendations in development of the student's current IEP and accept or reject the ER recommendations for appropriate educational reasons?			
10	0	0			S	SE 107. If the student's most recent Evaluation Report contained recommendations for provision of related services, including psychological counseling, did the IEP team address those recommendations in development of the student's current IEP and accept or reject the ER recommendations for appropriate educational reasons?			

Y	N	NA	D K	% Citation #	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0		SE 108. If the student's most recent Evaluation Report contained recommendations for program modifications or supports for school personnel that will be provided for the student, did the IEP team address those recommendations in development of the student's current IEP and accept or reject the ER recommendations for appropriate educational reasons?			
10	0	0		SE 112. Was it an IEP team decision as to whether this student would participate in the PSSA/Keystone Exams, PASA, and other district-wide/charter school-wide assessments?			
10	0	0		SE 117. Is this student making progress in meeting the annual goals of his/her current IEP?			
10	0	0		SE 117a. In your opinion, is this student benefiting from participation in the general education classroom?			
0	0	0		SE 117b. If yes, in what ways? Socially, behaviorally. Actively participates & socially. Socially, peer modeling. Socially, academically. Being with peers. Has done well with curriculum. Peer modeling. Student wants to work to their level. Be with peers. Can keep up with curriculum. Student is with peers, appropriate curriculum to use, & is feeling successful which is a good challenge. Exposure for social skills/social needs. Being around peers without disabilities.			
0	0	10		SE 117c. If no, what does this student need that he/she is not receiving?			
10	0	0		SE 118. Is the progress on annual goals recorded and reported to the parent based on objective and measurable data? IEP IMPLEMENTATION			
				INTERVIEW RESULTS (Parent, General & Special Education Teacher)			
6	0	0	0	P 48. Were the special education and related services in your child's current IEP provided within 10 school days of the completion of the IEP?			
6	0	0	0	P 49. Are the special education and related services included in your child's current IEP provided at no cost to you?			
				P 57. When all students in the school receive a report card, I also receive a progress report on my child's IEP goals.			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					6	Always			
					0	Sometimes			
					0	Rarely			
					0	Never			
					0	Don't Know			
					0	Does not Apply			
						P 58. My child's progress is reported to me by the school in			
						a manner that I understand.			
					6	Always			
					0	Sometimes			
					0	Rarely			
					0	Never			
					0	Don't Know			
		-			0	Does not Apply			
6	0	0	0			P 64. My child is receiving the supports and services agreed upon at the IEP meeting.			
10	0	0				GE 77. If supports for school personnel are included in the			
						student's current IEP, has the LEA provided those			
						supports?			
9	0	1				GE 79. Are the supplementary aids and services, including			
						program modifications and specially designed			
						instruction in the student's current IEP, being			
						provided?			
2	0	8				GE 79a. In the most recent IEP meeting for this student, did you			
						discuss whether the student could be educated in a			
						general education classroom for the entire school day?			
0	2	8				GE 79b. In the most recent IEP meeting, did the IEP team			
						recommend removal of this student from the general			
						education classroom for any part of the school day?			
0	0	10				GE 79c. If yes, what reasons were discussed for recommending			
						removal?			
0	0	10				GE 79d. If yes, how was the amount of time that this student			
		'				would be removed from the general education			
						classroom decided?			
4	0	6			İ	GE 79e. In the most recent IEP meeting, did the IEP team			
	`	<u> </u>				discuss whether this student could be educated			
						satisfactorily in a general education classroom for the			
						entire school day with supplementary aids and			
						services?			
10	0	0				GE 84. If appropriate, are you implementing the positive			
		`				behavior support plan for this student as written in the			
						current IEP			

Y	N	NA	D K	6 Citation #	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0		GE 92. If a student with an IEP is having behavioral difficulties in your classroom, do you address the behavior in your classroom rather than sending him/her back to the special education classroom to address the behavior issue unless indicated otherwise in the student's IEP?			
10	0	0		SE 105. Are the supplementary aids and services, including program modifications and specially designed instruction in the student's current IEP, being provided?			
10	0	0		SE 109. Is this student receiving the type and amount of special education instruction and related services specified in his/her current IEP?			
10	0	0		SE 110. Was this student's current IEP implemented no later than 10 school days after its completion or no later than the IEP implementation date?			
10	0	0		SE 111. If supports for school personnel are included in this student's current IEP, has the LEA provided those supports?			
10	0	0		SE 113. If required, were the testing accommodations included in this student's current IEP implemented?			
10	0	0		SE 114. Was the placement decision made by the IEP team after the annual goals, specially designed instruction, and related services were developed?			
10	0	0		SE 120. Is this student receiving the supports and services agreed upon in his/her current IEP, including related services?			
				PROVISION OF ESY AND RELATED SERVICES INTERVIEW RESULTS (Parent & Special Education Teacher)			
3	0	1	1	P 42. If your child's current IEP includes psychological counseling as a related service, and he/she receives these services, including transportation, are they provided at no cost to you?			
3	0	0	3	P 43. Was your child's need for extended school year (ESY) – which means services over the summer or during breaks from the regular school calendar - discussed at an IEP meeting?			
4	1	0	1	P 44. Did you receive an explanation of what would make your child eligible for ESY services?			
6	0	0	0	P 45. Did you agree with the IEP team's conclusion about your child's eligibility for ESY services?			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
1	0	3	2			P 46. If you did not agree with the decision on ESY eligibility, were you given a written notice (NOREP/PWN) explaining that you could ask for a due process hearing?			
1	0	4	1			P 47. If your child was determined to be eligible for ESY services, did the IEP team decide upon the goals and services needed for the ESY program?			
10	0	0				SE 121. Was the consideration of ESY eligibility discussed during this student's current IEP meeting?			
0	0	10				SE 122. If this student was determined to be ESY eligible, did the IEP team determine what goals and services were needed and include them in the IEP?			
0	0	10				SE 122a. At the most recent IEP meeting, did the IEP team discuss the development of a plan to transition this student back into the school district (or charter school if student is enrolled in a charter school) with supplementary aids and services?			
0	0	10				SE 122b. Are staff from the home district (or charter school if student is enrolled in a charter school) involved with the planning and implementation of this student program?			
0	0	10				SE 122c. Does this student go on field trips, attend school functions or participate in extracurricular activities with his/her same age/grade peers who are non-disabled?			
0	0	10				SE 122d. Does this student need supplementary aids and services to participate in non-academic and/or extra-curricular activities?			
0	0	10				SE 122e. If yes, are needed supplementary aids and services being provided to this student?			
0	0	10				SE 122f. Are there routine opportunities for this student to interact with non-disabled peers that are planned and/or facilitated by school personnel?			
						SECONDARY TRANSITION (Parent & Special Education Teacher)			
6	0	0	0			P 50. If your child is age 14 or older was he/she invited to participate in the IEP meeting for transition planning?			
1	0	3	2			P 50a. In the most recent IEP meeting for your child, did you discuss whether your child could be educated in a general education classroom for the entire school day?			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	1	2	3			P 50b. In the most recent IEP meeting, did the IEP team recommend removal of your child from the general education classroom for any part of the school day?			
0	0	6	0			P 50c. If yes, what reasons were discussed for recommending removal?			
0	0	6	0			P 50d. If yes, how was the amount of time that your child would be removed from the general education classroom decided?			
2	0	2	2			P 50e. In the most recent IEP meeting, did the IEP team discuss whether your child could be educated satisfactorily in a general education classroom for the entire school day with supplementary aids and services?			
5	0	0	1			P 50f. In your opinion, is your child benefiting from participation in the general education classroom?			
0	0	1	0			P 50g. If yes, in what ways? Other kids are there. Just is. See improvement. My child is a hard worker. Academics are coming along.			
0	0	6	0			P 50h. If no, what does your child need that he/she is not receiving in the class?			
					6 0 0 0 0 0	P 59. I am satisfied with the transition services developed for my child. Always Sometimes Rarely Never Don't Know Does not Apply			
					6 0 0 0 0	P 60. My child is learning skills that will lead to a high school diploma and further education and/or employment. Always Sometimes Rarely Never Don't Know Does not Apply			

Y	N	NA	D K	Not Obs	% #	Citation	Re	quired Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0				SE 116. Were this student's desired post school considered when the IEP team develop goals?				
10	0	0				SE 123. Where appropriate, does the LEA invitor representative of a participating agency be responsible for providing or paying services to the IEP meeting?	that is likely to			
						Горісаl Area 6: NOREP/PWN				
						File Reviews)				
10	0	0				FR 328. NOREP/PWN is present in the student	file			
10	0	0				FR 329. Demographic data				
10	0	0				FR 330. Type of action taken				
10	0	0				FR 331. A description of the action proposed or LEA	refused by the			
10	0	0				FR 332. An explanation of why the LEA propostake the action	ed or refused to			
10	0	0				FR 333. A description of the other options the II considered and the reason why those oprejected				
10	0	0				FR 334. Description of each evaluation procedurecord or report used as the basis for proraction refused				
10	0	0				FR 335. Description of other factor(s) relevant t proposal or refusal	o LEA's			
10	0	0				FR 336. Educational placement recommended (amount and type)	including			
10	0	0				FR 337. Signature of school district superintend school CEO or designee	ent or charter			
10	0	0				FR 338. Parent signature or documentation of re to obtain consent (e.g. mailed to parent visit to the parent's home, etc.)				

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
4	1	5			20%	FR 339. Parent has selected a consent option	Academy Charter School Administration will provide training regarding the special education process for staff responsible for IEP development. Evidence of Change: The school district will provide the BSE Adviser with documentation of training and list of participants. The BSE adviser will conduct a file review during the onsite visit	12/23/2014 Charter School Administration;Pa TTAN consultant;BSE Adviser	01/28/2014
10	0	0				FR 340. NOREP/PWN reflects the educational placement indicated on the student's IEP			
						INTERVIEW RESULTS (Parent)			
0	0	5	1			P 34. If services that you requested for your child were rejected by the school, did you receive a written notice (NOREP/PWN) explaining why the request was rejected?			
					3 0 0 0 3 0	P 61. If I don't understand my child's educational rights, and I inquire about them, someone from the school takes the time to explain them to me. Always Sometimes Rarely Never Don't Know Does not Apply			
						Topical Area 7: Additional Interview Responses			
						INTERVIEW RESULTS (Parent & Special Education Teacher)			
					5 1 0 0 0	P 54. I am a partner with school personnel when we plan my child's education program. Always Sometimes Rarely Never Don't Know Does not Apply			
		1	1			P 66. Tell me anything you really like about your child's special education program.			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					1	e. instructional materials			
					1	g. staff open to suggestions, good communication			
					1	k. staff's understanding and attitude			
					2	n. other			
						They keep me informed.			
						My child is going to graduate.			
		5	1			P 67. Tell me anything you would like to change about the			
						program.			
		1	0			P 68. The school explains what options parents have if the			
		<u> </u>				parent disagrees with a decision of the school.			
					1	a. Very strongly agree			
					4	c. Agree			
						P 69. Additional comments about your child's program.			
						It helps my child's self-esteem.			
10	0	0				SE 101. Do you hold the required certification to implement			
						this student's program?			
10	0	0				SE 101a. Have you received sufficient training, technical			
						assistance and other support to teach this student?			
0	0	10				SE 101b. If no, what training or support would assist you?			
						Topical Area 8: Student Interview Results			
			0			S 126. What kind of support are you currently receiving?			
					6	a. Learning Support			
					1	k. Don't Know			
7	0	0	0			S 127. Is this support enough to help you be successful in your			
'	· ·					school program?			
						S 128. How satisfied are you with your high school			
						educational program?			
					6	Very			
					0	Somewhat			
					1	A Little			
					0	Not at All			
					0	Don't Know			
						S 129. What do you like best about the program?			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						A couple of teachers.			
						Nothing			
						Teachers			
						Helps me.			
						Give time to do work.			
						Easy work - no problems.			
						It is easier.			
						S 130. What do you like least about the program?			
						Discipline staff.			
						Nothing			
						Lunch			
						Don't know.			
						Big classes.			
						Uniforms			
						Other kids in class.			
						S 131. How satisfied are you with your special education			
					_	supports/services?			
					7	Very			
					0	Somewhat A Little			
					0	Not at All			
					0	Don't Know			
						S 132. What do you like best about the special education			
						supports/services?			
						Extra help.			
						They take their time & give me extra help.			
						Breaks stuff down.			
						Don't know.			
						Working in little groups. Gives me help.			
						Helps you a lot.			
						Teachers come to me to help.			
						S 133. What do you like least about the special education			
						supports/services?			
						Sometimes I don't need it.			
						Nothing Nothing			
						Don't know.			
						Nothing Nothing			
						Nothing			
						Nothing			
						S 134. How much time do you spend with students who do not			
						have disabilities?			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					0	Too Much			
					7	Enough			
					0	A Little			
					$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$	Not Enough Don't Know			
2	5	0	0		Ů	S 135. Do you participate in any extra-curricular activities?			
						S 136. If yes, which ones			
						Sports Voying Leadors Crown			
		<u> </u>				Young Leaders Group S 137. If no, why not			
						S 137. If no, why not			
						Don't want to.			
						Don't know.			
						None here.			
						No reason.			
<u> </u>	_					I work.			
4	0		3			S 138. Were you invited to participate in the last IEP meeting?			
						Other			
4	1		2			S 139. Did you participate in the last IEP meeting?			
						Other			
4	0		3			S 140. Do you have a post secondary transition program?			
						Other			
5	0		2			S 141. Do you have an employment transition program?			
						2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
						Other			
2	0		5			S 142. Do you have a community living transition program?			
						Othor			
4	0		3			Other S 143. Did you assist in the development of the transition			
						program?			
		L				Other			
3	0		4			S 144. Is that transition plan being followed?			
						Other			
7	0		0			S 145. Did you discuss what you would do after graduation or			
						finishing high school? Other			
			0			S 146. Which of the following agencies participate in your			
						IEP development?			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					1 1 1 1	a. Office of Vocational Rehabilitation b. County of Mental Health/Retardation Service e. None f. Other Agencies g. Don't Know			
0	0		6		1 +	S 147. If any agency participated in your IEP did they assist you or provide services? Other S 148. Comments			
1	6	0	0			S 149. Do you participate in any activities in the community?			
						S 150. If yes, which ones? Bingo			
						S 151. If no, why not? House arrest. Don't want to. Don't know. No reason. I work. Too busy at home.			
						S 152. Are there any other agencies that could help you within the community? Nothing No No Don't know. A recreation program. No I don't know.			
						Topical Area 9: Other Non-compliance Issues			
						Topical Area 10: Other Improvement Plan Issues			

Y	N	NA I	OK Not Obs	Citation	Required Corrective Action Evidence of Change	Timelines and Closed Resources Date
				FSA 11 LRE 2013-14	Academy Charter School Administrators will create a focus team made up of administrators, special education and	07/01/2014 Charter School
					regular education teachers to meet monthly to review and discuss training models for	Administrators, PaTTAN
					co-teaching. In addition the administrators	consultants, IU 2 TaC and BSE
					plan to implement co teaching classes in 2014-15 school year.	advisers
					Evidence of change: The BSE adviser will review the focus team monthly meetings notes and logs. The LRE data will also be reviewed.	
				FSA 11 LRE 2014-15	Academy Charter Administrators will continue with their Focus team meetings	07/01/2015
					and plan to add additional co-teaching classes and training in the 2015-16 school year.	Charter School Administrators, PaTTAN consultants, IU 2
					Evidence of change: The BSE adviser will review the focus team monthly meetings notes and logs. The LRE data will also be reviewed.	TaC and BSE advisers
				FSA 11 LRE 2015-16	Academy Charter Administrators will continue with their Focus team meetings	07/01/2016
					and plan to add additional co-teaching classes and training in the 2016-17 school	Charter School Administrators,
					year.	PaTTAN consultants, IU 2
					Evidence of change: The BSE adviser will	TaC and BSE
					review the focus team monthly meetings notes and logs. The LRE data will also be reviewed.	advisers