

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

This form is designed to serve both as a planning tool and as verification of completion of corrective action.

School District: Philadelphia Learning Network 6

Superintendent: Dr. Tony Watlington

Special Education Director/Coordinator: \_\_\_\_\_

BSE Special Education Adviser: Karen Newsome

Date of Report: April 05, 2023

Date Final Report Sent to LEA: April 05, 2023

**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: \_\_\_\_\_

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						<b>Topical Area 1: Policies, Practices, and Procedures</b>			
Y						1. <b>FSA-ASSISTIVE TECHNOLOGY AND SERVICES</b>  <b>Standard:</b> The Local Education Agency (LEA) observed the requirement that the provision of assistive technology is reflected in the student's IEP			
Y						1A. <b>FSA-HEARING AIDS</b>  <b>Standard:</b> 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. <b>FSA-POSITIVE BEHAVIOR SUPPORT</b>  <b>Standard:</b> LEA complies with the positive behavior support policy requirements.			
Y						3. <b>FSA-CHILD FIND</b>  <b>Standard:</b> LEA demonstrates compliance with annual public notice requirements.			

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

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					9 2 2 4 14 1	Always Sometimes Rarely Never Don't Know Does not Apply			
					9 4 1 6 11 1	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.  Always Sometimes Rarely Never Don't Know Does not Apply			
Y						18. <b>FSA-SURROGATE PARENTS (STUDENTS REQUIRING)</b>  <b>Standard:</b> The LEA identifies eligible students in need of surrogate parents and recruits, selects, trains, and assigns in a timely manner.			
Y						19. <b>FSA-PERSONNEL TRAINING</b>  <b>Standard:</b> 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.			
						<b>INTERVIEW RESULTS (General &amp; Special Education Teacher)</b>			
39	2	0				GE 88. Do you receive training regarding how to differentiate instruction and modify the curriculum in your classroom?			
37	2	2				GE 89. Do you receive training regarding how to provide positive behavior supports for students with negative behaviors?			
33	3	5				GE 90. If you have a student with a behavioral need, have you been trained how to deescalate negative and aggressive student behavior?			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
30	7	4				GE 91. Do you participate in determining the kinds of training and technical assistance needed to support students with IEPs in regular education classrooms?			
12	7	22				GE 94. If a student has AT included in his/her current IEP, have you received training in AT, and accessing AT resources?			
44	3	1				SE 124. Do you collaborate with general education teachers and administrators to recommend training needs for personnel within the LEA?			
	N					20. <b>FSA-INTENSIVE INTERAGENCY APPROACH</b>  <b>Standard:</b> The LEA identifies, reports, and provides for the provision of Free Appropriate Public Education (FAPE) for all students with disabilities including those students needing intensive interagency approaches.			
Y						21. <b>FSA-SUMMARY OF ACADEMIC AND FUNCTIONAL PERFORMANCE/PROCEDURAL SAFEGUARD REQUIREMENTS FOR GRADUATION</b>  <b>Standard:</b> The LEA provides Summary of Academic Achievement and Functional Performance for children whose eligibility terminates due to graduation or aging out. The LEA provides required prior written notice for graduation			
		X				21A. <b>TRANSITION REQUIREMENTS</b>  <b>Standard:</b> The LEA complies with requirements for transition planning for students.			
						<b>Topical Area 2: Delivery of Service</b>			
Y						9. <b>FSA-FACILITIES USED FOR SPECIAL EDUCATION</b>  <b>Standard:</b> The LEA will be in compliance with the facilities requirements			
						<b>CLASSROOM OBSERVATIONS</b>			
49	0	1		0		CO 8. Is the classroom located within the ebb and flow of school activity?			
49	0	1		0		CO 9. Is the classroom designed for instructional purposes?			

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	N					14. <b>FSA-CASELOAD AND AGE RANGE REQUIREMENTS</b>  <b>Standard:</b> The LEA complies with the caseload and age range requirements	LEA will submit documentation to PDE demonstrating compliance with caseload requirements within 90 days. LEA will reconvene IEP meetings for those students identified in noncompliance with the age range requirements and forward to PDE documentation of the corrective action within 90 days.		
Y						17. <b>FSA-PUBLIC SCHOOL ENROLLMENT</b>  <b>Standard:</b> The LEA's percentage of children with disabilities served in special education is comparable to state data.			
	N					17B. <b>FSA-PUBLIC SCHOOL ENROLLMENT</b>  <b>Standard:</b> Timely provision of FAPE for students who transfer from public agencies within state, and from another state.			
Y						22. <b>FSA-DISPROPORTIONATE REPRESENTATION THAT IS THE RESULT OF INAPPROPRIATE IDENTIFICATION</b>  <b>Standard:</b> LEA does not demonstrate disproportionate representation of racial/ethnic groups receiving special education or by disability group.			
	N					23. <b>FSA-EDUCATIONAL BENEFIT REVIEW</b>  <b>Standard:</b> The IEP meets procedural compliance and is reasonably calculated to enable the child to advance appropriately toward attaining their annual goals.	The LEA has been provided with the names of individual students for whom corrective action is required within 30 days of the date of this report.		
						<b>CLASSROOM OBSERVATIONS</b>			
42	0	0		2		CO 1. Is the instruction provided to the student individualized as required by his/her IEP?			
43	0	0		1		CO 2. Is the instruction being provided in accordance with the goals in the student's IEP?			
16	0	22		6		CO 3. If assistive technology is included in the student's IEP and required for the activity observed, is it being used?			
32	0	12		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?			
32	0	12		0		CO 5. If the student is in a regular education setting, is the student appropriately integrated (physically) in the class?			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
33	0	0		11		CO 6. If the student's IEP contains supplementary aids and/or services, are they being delivered in the classroom setting as required?			
44	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?			
						<b>INTERVIEW RESULTS (Parent, General &amp; Special Education Teacher)</b>			
					15 11 0 2 2 2	P 55. My child does classroom work in a regular classroom with students without disabilities. Always Sometimes Rarely Never Don't Know Does not Apply			
					21 6 0 1 2 2	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. Always Sometimes Rarely Never Don't Know Does not Apply			
					19 5 1 0 3 4	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. Always Sometimes Rarely Never Don't Know Does not Apply			
					26 3 0 0 3 0	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. Always Sometimes Rarely Never Don't Know Does not Apply			

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41	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?			
39	0	2				GE 71. Do you adapt and modify the general education curriculum based on the student's current IEP?			
39	1	1				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?			
39	1	1				GE 73. Are you and the special education personnel working collaboratively to implement this student's program?			
36	0	5				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?			
39	2	0				GE 80. Is the student making progress within the general education curriculum?			
40	1	0				GE 80a. In your opinion, is this student benefiting from participation in your general education classroom?			
0	0	1				GE 80b. If yes, in what ways?			

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						<p>Socially and academically.            Academically advanced.            Improved since start of the year.            Loves physical activity and is very good with specific skills.            Being exposed to grade level material and interactions with their peers.            Being exposed to grade level material and interactions with their peers.            Can do the curriculum and just needs supports.            Participates especially during class and builds confidence.            Has opportunities to be creative. Confidence has increased.            Opportunity to communicate/interact with peers/benefits from grade level conversations.            Working on grade level and meeting goal.            Peer modeling and peer collaboration.            Socially            Socializing and receptive language.            Participating more.            Enjoys being with the peers and working on their goals ..            Responding better to self-regulate.            Confident, works closely with the peers 1:1.            Academic            Getting grade level curriculum, seeing the modeling of peers in the classroom, being able to interact with same age grade peers.            Increased significantly academically and behavior.            Being part of a whole group interaction, challenging prep, working with peers.            Loves physical activity and is very good with the specific skills.            Being part of a whole group instruction, being surrounded by peers which helps.            Rigorous curriculum - social skills with peers.            Socialization with peers.            Socialization and being with peers.            Socialization skills.            Socialization            Academically and socially.            Socialization and exposure to core curriculum.            Exposure to Core curriculum and socialization, promotes challenging skills to be inclusive.            Increased academic advancement and socialization</p>			



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						skills. Increased learning from regular education peers. Participates with peers all day. Increased socialization opportunities with regular education students. Participation with non-disabled peers. Socialization, peer collaboration. All areas including but not limited to: academically, socially, behaviorally. Socialization and using technology.			
0	0	40				GE 80c. If no, what does this student need that he/she is not receiving in your class? Ability to concentrate.			
40	1	0				GE 85. Do you have sufficient time to collaborate with the special education teacher in order to meet this student's needs?			
34	2	5				GE 85a. Have you received sufficient training, technical assistance and other support to teach this student?			
0	0	39				GE 85b. If no, what training or support would assist you? Special Education. Support			
37	1	3				GE 93. Do special education personnel work directly with you to help you reduce negative student behaviors?			
48	0	0				SE 95. Is this student participating in the general education class and curriculum with students without disabilities to the maximum extent possible?			
33	3	12				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?			
26	8	14				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	22				SE 95c. If yes, what reasons were discussed for recommending removal?			

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						Academic supports and interventions. Based on need. Based on need. Based on need. Based on need. For academics support. Struggles with academics. Based on need. Amount of support needed to meet IEP goals. Based on need. Based on need. Based on need. Based on need. Individual needs. Social emotional learning intervention. IEP team decision. Individualized instruction as needed. Academic and social needs of the child. Below grade level. Below grade level. Based on need. To better meet student needs. Based on need. Based on need. Stronger skills, more focus, scores. Related Services.			
0	0	22				SE 95d. If yes, how was the amount of time that this student would be removed from the general education classroom decided?			

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						<p>Based on needs. As needed. Team Based on progress monitoring. Based on progress monitoring. Based on progress monitoring. Academic performance, benchmarks and classroom data, Evaluation Report. Team decision. Amount of support needed to meet IEP goals. Team decision. Need and individual skills. IEP meeting. Based on the student's need and diagnostic assessments. IEP Team decision. Team decision. IEP team decision. IEP team decision. IEP team decision. IEP team decision. IEP team decision. Level of success. IEP team decision. Research based interventions. Determined by student need. IEP IEP team decision.</p>			
32	2	14				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?			
45	0	3				SE 96. Has the student been given the opportunity to participate in non-academic and extracurricular activities with children without disabilities?			
39	0	9				SE 97. Have necessary supports been offered and/or provided to enable that participation?			
41	0	7				SE 99. Are you and related services personnel working together toward meeting the measurable annual goals for this student?			
46	0	2				SE 100. Are you and general education personnel working together toward meeting the measurable annual goals for this student?			

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41	3	4				SE 115. Did the IEP team have available information regarding use of the Supplementary Aids and Services ToolKit?			
45	3	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?			
						<b>Topical Area 3: Performance Indicators</b>			
	N					5A. <b>FSA-EFFECTIVE USE OF DISPUTE RESOLUTION</b>  <b>Standard:</b> The LEA uses dispute resolution processes for program improvement.	The LEA will submit an Improvement Plan to establish a process for oversight of complaints, mediations and hearings within the LEA, including designation of responsible personnel.		
	N					6. <b>FSA-GRADUATION RATES (SPP)</b>  <b>Standard:</b> The graduation rate of the LEA's students with disabilities is comparable to the state graduation rate.	The LEA will submit an improvement plan to address meeting the SPP target for graduation rates.		
	N					7. <b>FSA-DROPOUT RATES (SPP)</b>  <b>Standard:</b> The dropout rate of the LEA's students with disabilities is comparable to the state dropout rate.	The LEA will submit an improvement plan to address meeting the SPP target for dropout rates.		
Y						8A. <b>FSA-SUSPENSION RATES</b>  <b>Standard:</b> The LEA's rate of suspensions and expulsions of students with disabilities is comparable to the rate of other LEAs in the state.			
	N					11. <b>FSA-LEAST RESTRICTIVE ENVIRONMENT (SPP)</b>  <b>Standard:</b> Students with disabilities are provided for in the least restrictive environment	The LEA will submit an improvement plan to address meeting the SPP target for students with disabilities served inside the regular classroom 80% or more of the day, students with disabilities served inside the regular classroom less than 40% of the day and students with disabilities served in other locations.		
	N					16. <b>FSA-PARTICIPATION IN PSSA AND PASA (SPP)</b>  <b>Standard:</b> The LEA's population of students who participate in state assessment is comparable with the state data.	The LEA will submit an improvement plan to address participation in PSSA and PASA of students with disabilities.		
Y						16A. <b>FSA-LOCAL ASSESSMENT</b>			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						<b>Topical Area 4: Evaluation and Reevaluation Process and Content</b>			
						<b>CONSENT AND WAIVER REQUIREMENTS FOR EVALUATION/REEVALUATION</b>			
						<b>PERMISSION TO EVALUATE (File Reviews)</b>			
12	2	36			14%	FR 153. PTE-Consent Form is present in the student file			
10	2	38			17%	FR 154. Demographic data			
12	0	38				FR 155. Reason(s) for referral for evaluation			
12	0	38				FR 156. Proposed types of tests and assessments			
10	2	38			17%	FR 157. Contact person's name and contact information			
12	0	38				FR 158. Parent signature or documentation of reasonable efforts to obtain consent			
12	0	38				FR 159. Parent has selected a consent option			
						<b>PERMISSION TO REEVALUATE (File Reviews)</b>			
31	2	17			6%	FR 194. PTRE-Consent Form is present in the student file			
31	0	19				FR 195. Demographic data			
31	0	19				FR 196. Reason for reevaluation			
31	0	19				FR 197. Types of assessment tools, tests and procedures to be used			
31	0	19				FR 198. Contact person's name and contact information			
25	6	19			19%	FR 199. Parent has selected a consent option			
29	2	19			6%	FR 200. Parent signature or documentation of reasonable efforts to obtain consent			
						<b>AGREEMENT TO WAIVE REEVALUATION (File Reviews)</b>			
0	0	50				FR 201. Agreement to Waive Reevaluation is present in the student file			
0	0	50				FR 202. Waiver was completed within required timelines (3 years (2 years for any ID student or any student placed in an Approved Private School) from date of ER, prior RR, or Agreement to Waive RR)			
0	0	50				FR 203. Reason reevaluation is not necessary at this time is included			
0	0	50				FR 204. Contact person's name and contact information			
0	0	50				FR 205. Parent has selected a consent option			
0	0	50				FR 206. Parent signature			
						<b>EVALUATION REPORT (INITIAL) (File Reviews)</b>			
13	1	36			7%	FR 160. ER is present in the student file			
2	11	37			85%	FR 161. Evaluation was completed within timelines			

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11	2	37			15%	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)			
13	0	37				FR 163. Demographic data			
13	0	37				FR 164. Date report was provided to parent			
13	0	37				FR 165. Reason(s) for referral			
13	0	37				FR 166. Reason(s) for referral reflect the reason(s) listed on the PTE-Consent Form			
13	0	37				FR 167. Evaluations and information provided by the parents of the student (or documentation of LEA's attempts to obtain parent input)			
13	0	37				FR 168. Teacher observations and observations by related service providers, when appropriate			
13	0	37				FR 169. Recommendations by teachers			
13	0	37				FR 170. The student's physical condition (including health, vision, hearing); social or cultural background; and adaptive behavior relevant to the student's suspected disability and potential need for special education			
13	0	37				FR 171. Assessments, including when appropriate, current classroom based assessments, aptitude and achievement tests; local and/or state assessments; behavioral assessments; vocational technical education assessment results; interests, preferences, aptitudes (for secondary transition); etc.			
10	0	40				FR 172. If an assessment is not conducted under standard conditions, description of the extent to which it varied from standard conditions (including if the assessment was given in the student's native language or other mode of communication)			
13	0	37				FR 173. Lack of appropriate instruction in reading			
13	0	37				FR 174. Lack of appropriate instruction in math			
13	0	37				FR 175. Limited English proficiency			
13	0	37				FR 176. Present levels of academic achievement			
13	0	37				FR 177. Present levels of functional performance			
12	1	37			8%	FR 178. Behavioral information			
13	0	37				FR 179. Conclusions			
13	0	37				FR 180. Disability Category			
13	0	37				FR 181. Recommendations for consideration by the IEP team			
11	2	37			15%	FR 182. Evaluation Team Participants documented			

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3	0	47				FR 183. For students evaluated for SLD documentation of Agree/Disagree			
3	0	47				FR 184. Documentation that the student does not achieve adequately for age, etc.			
3	0	47				FR 185. Indication of process(es) used to determine eligibility			
3	0	47				FR 186. Instructional strategies used and student-centered data collected			
3	0	47				FR 187. Educationally relevant medical findings, if any			
3	0	47				FR 188. Effects of the student's environment, culture, or economic background			
3	0	47				FR 189. Data demonstrating that regular education instruction was delivered by qualified personnel, including the ESL program, if applicable			
3	0	47				FR 190. Data based documentation of repeated assessments of achievement at reasonable intervals, which was provided to parents			
3	0	47				FR 191. Observation in the student's learning environment			
2	0	48				FR 192. Other data if needed			
3	0	47				FR 193. Statement for all 6 items indicated to support conclusions of the evaluation team			
						<b>REEVALUATION REPORT (File Reviews)</b>			
35	1	14			3%	FR 207. RR is present in the student file			
25	10	15			29%	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 ID student or any student placed in an Approved Private School) of date of ER, prior RR, or Agreement to Waive RR)			
23	12	15			34%	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)			
35	0	15				FR 210. Demographic data			
35	0	15				FR 211. Date IEP team reviewed existing evaluation data			
35	0	15				FR 212. Physical condition, social, or cultural background and adaptive behavior relevant to the student's need for special education			
33	2	15			6%	FR 213. Evaluations and information provided by the parent (or documentation of LEA's attempts to obtain parent input)			

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35	0	15				FR 214. Aptitude and achievement tests			
34	1	15			3%	FR 215. Current classroom based assessments and local and/or state assessments			
35	0	15				FR 216. Observations by teacher(s) and related service provider(s) when appropriate			
35	0	15				FR 217. Teacher recommendations			
35	0	15				FR 218. Lack of appropriate instruction in reading			
35	0	15				FR 219. Lack of appropriate instruction in math			
35	0	15				FR 220. Limited English proficiency			
34	1	15			3%	FR 221. Conclusion regarding need for additional data is indicated			
14	0	36				FR 222. Reasons additional data are not needed are included			
35	0	15				FR 223. Determination whether the child has a disability and requires special education			
35	0	15				FR 224. Disability category(ies)			
34	1	15			3%	FR 225. Summary of findings includes student's educational strengths and needs			
34	1	15			3%	FR 226. Summary of findings includes present levels of academic achievement and related developmental needs, including transition needs as appropriate			
35	0	15				FR 227. Summary of findings includes recommendations for consideration by the IEP team regarding additions or modifications to the student's programs			
21	0	29				FR 228. Interpretation of additional data			
12	0	38				FR 229. Documentation that the student does not achieve adequately for age, etc.			
12	0	38				FR 230. Indication of process(es) used to determine eligibility			
12	0	38				FR 231. Instructional strategies used and student-centered data collected			
12	0	38				FR 232. Educationally relevant medical findings, if any			
12	0	38				FR 233. Effects of the student's environment, culture, or economic background			
12	0	38				FR 234. Data demonstrating that regular education instruction was delivered by qualified personnel, including the ESL program, if applicable			
12	0	38				FR 235. Data based documentation of repeated assessments of achievement at reasonable intervals, which was provided to parents			
12	0	38				FR 236. Observation in the student's learning environment			



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8	0	42				FR 237. Other data if needed			
12	0	38				FR 238. Statement for all 6 items			
33	2	15			6%	FR 239. Documentation of Evaluation Team Participants			
14	1	35			7%	FR 240. Documentation that team members Agree/Disagree			
						<b>INTERVIEW RESULTS (Parent &amp; Special Education Teacher)</b>			
31	1	0	0			P 24. Have you been asked to provide information for your child's evaluation/reevaluation?			
29	0	1	2			P 25. Were you given the opportunity to provide this information in writing or in another way that worked for you?			
29	0	1	2			P 26. Was the information you provided to the school for your child's evaluation considered in your child's Evaluation Report?			
11	0	15	6			P 27. If your child was not reevaluated when required (every 2 years for children with intellectual disability (consent 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?			
0	26	6	0			P 51. Have you requested an Independent Educational Evaluation (IEE) for your child to be paid for by the school?			
0	0	32	0			P 52. If you have obtained an IEE for your child, were the results of that evaluation considered by the team?			
0	0	32	0			P 53. Were the results of the IEE included in the school's Evaluation Report for your child?			
19	1	28				SE 119. If this student is not making progress, has he/she been reevaluated and/or has the IEP been reviewed?			
						<b>Topical Area 5: IEP Process and Content</b>			
						<b>INVITATION TO PARTICIPATE IN IEP TEAM OR OTHER MEETING (File Reviews)</b>			
45	5	0			10%	FR 241. Invitation is present in the student file			
43	2	5			4%	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)			
45	0	5				FR 243. Demographic data			
45	0	5				FR 244. Purpose(s) of the meeting			
7	0	43				FR 245. Transition planning and services – Invitation to parents is checked (age 14, younger if determined appropriate)			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
4	0	46				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			
6	1	43			14%	FR 247. Transition planning and services – Invitation to student is checked (age 14, or younger if determined appropriate)			
45	0	5				FR 248. Invited IEP team members			
45	0	5				FR 249. Date/time/location of meeting			
41	4	5			9%	FR 250. Parent response, or documentation of parent attendance at the meeting, or documentation of multiple efforts to encourage participation			
						<b>PARENT CONSENT TO EXCUSE MEMBERS FROM ATTENDING IEP TEAM MEETING (File Reviews)</b>			
0	0	50				FR 251. Parent Consent to Excuse Members from Attending the IEP Team Meeting is present in the student file			
0	0	50				FR 252. Demographic data			
0	0	50				FR 253. Form designates required IEP team member(s) for whom attendance is not necessary			
0	0	50				FR 254. Form designates which members will submit written input prior to the meeting			
0	0	50				FR 255. Parent written consent is documented			
					0 0 0	FR 256. The team members excused: a. General Education Teacher b. Special Education Teacher c. Local Education Agency Representative			
						<b>IEP CONTENT (File Reviews)</b>			
50	0	0				FR 257. IEP is present in the student file			
37	13	0			26%	FR 258. IEP was completed within timelines			
50	0	0				FR 259. Demographic data			
50	0	0				FR 260. IEP implementation date			
50	0	0				FR 261. Anticipated duration of services and programs			
11	0	39				FR 262. If appropriate, LEA and parent agreement to make changes to IEP without convening an IEP meeting			
						<b>DOCUMENTATION OF IEP TEAM PARTICIPATION (File Reviews)</b>			
46	4	0			8%	FR 263. Parents			
6	1	43			14%	FR 264. Student			
47	3	0			6%	FR 265. General Education Teacher			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
47	2	1			4%	FR 266. Special Education Teacher			
48	2	0			4%	FR 267. Local Education Agency Representative			
1	0	49				FR 270. Community Agency Representative			
0	0	50				FR 271. Teacher of the Gifted			
0	0	50				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			
47	3	0			6%	FR 273. Copy of Procedural Safeguards Notice was given to parent during the school year			
						<b>SPECIAL CONSIDERATIONS (File Reviews)</b>			
0	0	50				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	50				FR 275. If the student is deaf or hard of hearing, a communication plan			
24	0	26				FR 276. If the student has communication needs, needs must be addressed in the IEP			
4	0	46				FR 277. If the student requires assistive technology devices and/or services, needs must be addressed in the IEP			
2	0	48				FR 278. If the student has limited English proficiency, the IEP team must consider English as Second Language for provision of FAPE			
19	4	27			17%	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			
5	0	45				FR 280. If the student has other special considerations, these are addressed in the IEP			
						<b>PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE (File Reviews)</b>			
50	0	0				FR 281. Student's present levels of academic achievement			
48	2	0			4%	FR 282. Student's present levels of functional performance			
14	2	34			13%	FR 283. Present levels related to current postsecondary transition goals (if student is 14, or younger if determined by IEP team)			
46	3	1			6%	FR 284. Parental concerns for enhancing the education of the student (if provided by parent to the LEA)			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
50	0	0				FR 285. How the student's disability affects involvement and progress in the general education curriculum			
50	0	0				FR 286. Strengths			
50	0	0				FR 287. Academic, developmental, and functional needs related to student's disability			
						<b>TRANSITION SERVICES (File Reviews)</b>			
2	5	43			71%	FR 289. Evidence that the measurable postsecondary goal(s) were based on age appropriate transition assessment			
5	2	43			29%	FR 290. An appropriate measurable postsecondary goal or goals that covers education or training, employment, and, as needed, independent living			
1	3	46			75%	FR 291. Evidence that the postsecondary goal or goals that covers education or training, employment, and, as needed, independent living are updated annually			
3	4	43			57%	FR 292. Location, Frequency, Projected Beginning Date, Anticipated Duration, and Person(s)/Agency Responsible for Activity/Service			
3	4	43			57%	FR 292a. Transition services include courses of study that will reasonably enable the student to meet his/her postsecondary goal(s)			
3	4	43			57%	FR 292b. Transition services in the IEP that will reasonably enable the student to meet his or her postsecondary goal(s)			
4	3	43			43%	FR 292c. Annual goals are related to the student's transition services			
						<b>PARTICIPATION IN STATE AND LOCAL ASSESSMENTS (File Review)</b>			
41	1	8			2%	FR 293. Documentation of IEP team decision regarding participation in statewide assessments (PSSA/Keystone Exams, ACCESS for ELLS, Alternate ACCESS for ELLS or PASA)			
33	0	17				FR 294. If the student will participate in the PSSA/Keystone Exams, documentation of IEP team decision regarding participation with or without accommodations			
8	1	41			11%	FR 295. If the student will participate in the PASA, an explanation of why the student cannot participate in the PSSA/Keystone Exams			
7	1	42			13%	FR 296. If the student will participate in the PASA, explanation of why PASA is appropriate			
5	1	44			17%	FR 297. If the student will participate in the PASA, how student's performance will be documented			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
41	0	9				FR 298. Indication of IEP team decision regarding participation in local assessments (local or alternate local)			
33	0	17				FR 299. If the student will participate in local assessments, indication of IEP team decision regarding participation with or without accommodations			
7	1	42			13%	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			
6	1	43			14%	FR 301. If the student will participate in an alternate local assessment, explanation of why the alternate assessment is appropriate			
						<b>ANNUAL GOALS AND OBJECTIVES (INCLUDING ACADEMIC AND FUNCTIONAL GOALS) (File Reviews)</b>			
48	1	1			2%	FR 302. Measurable Annual Goals			
50	0	0				FR 303. Description of how student progress toward meeting goals will be measured			
50	0	0				FR 304. Description of when periodic reports on progress will be provided to parents			
50	0	0				FR 305. Documentation of progress reporting on Annual Goals			
38	0	12				FR 306. Short Term Objectives			
						<b>SPECIAL EDUCATION/RELATED SERVICES/SUPPLEMENTARY AIDS AND SERVICES/PROGRAMS MODIFICATIONS (File Reviews)</b>			
49	0	1				FR 307. Program Modifications and Specially-Designed Instruction			
45	0	5				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			
49	0	1				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	50				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			
31	0	19				FR 311. If Related Services are included on the IEP, the location, frequency, projected beginning date and anticipated duration of services			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
28	0	22				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			
48	0	2				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			
40	0	10				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	50				FR 315. Support services, if the student is identified as gifted and also is identified as a student with a disability			
50	0	0				FR 316. A conclusion regarding student eligibility for ESY			
40	8	2			17%	FR 317. Information or data reviewed by the IEP team to support the ESY eligibility determination			
25	2	23			7%	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			
14	12	24			46%	FR 319. Where ESY was determined to be appropriate, ESY service to be provided, location, frequency, projected beginning date and anticipated duration of services			
						<b>EDUCATIONAL PLACEMENT (File Reviews)</b>			
50	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			
50	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			
50	0	0				FR 322. Type of support, by amount (itinerant, supplemental, full-time)			
50	0	0				FR 323. Type of special education supports, e.g. autistic support, emotional support, learning support, etc.			
50	0	0				FR 324. Location of student's program (name of LEA where the IEP will be implemented)			
50	0	0				FR 325. Location of student's program (name of School Building where the IEP will be implemented)			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
19	0	31				FR 326. If child will not be attending his/her neighborhood school, reason why not			
						<b>PENNDATA REPORTING FOR EDUCATIONAL ENVIRONMENT (File Reviews)</b>			
50	0	0				FR 327. Completed Section A or Section B			
						<b>IEP DEVELOPMENT</b>			
						<b>INTERVIEW RESULTS (Parent &amp; General Education Teacher)</b>			
32	0	0	0			P 28. Were you invited to participate in your child's most recent IEP team meeting?			
30	0	1	1			P 29. Did you participate in developing the current IEP for your child?			
30	0	2	0			P 30. Was the meeting held at a time and location that was convenient for you?			
8	1	22	1			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?			
27	2	1	2			P 32. Was the input you provided considered in the development of your child's current IEP?			
21	8	0	3			P 32a. Have you received sufficient training, technical assistance and other support to participate as an IEP team member?			
0	0	24	0			P 32b. If no, what training or support would assist you? Getting a better understanding of how to cope with the disability. Don't need any training. To understand what my child really needs and provide the strategies. Anything available. Reading materials. Information for parents. More Special Education background knowledge of what goes into the IEP. Would like training and information on the process.			
30	0	1	1			P 33. Were the services you requested for your child considered by the IEP team in the development of your child's current IEP?			
27	4	0	1			P 35. Was the current IEP developed at the IEP meeting?			
25	1	5	1			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?			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
26	2	1	3			P 37. Were the special education teacher, the general education teacher and the school representative at the IEP meeting?			
0	2	30	0			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	2	30	0			P 39. Was written input from the excused IEP team member(s) available to you before the meeting?			
		31	0		1	P 65. If you did not participate in your child's IEP meeting, what kept you from participating? f. no child-care available			
25	5	11				GE 74. Did you attend the most recent IEP meeting for this student or have the opportunity to provide input?			
17	11	13				GE 75. Did you recommend any needed supports to implement the current IEP for this student?			
17	0	24				GE 76. Were those recommendations considered by the IEP team?			
39	1	1				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?			
36	2	3				GE 87. Do you provide progress monitoring data as part of the IEP development process?			
						<b>IEP CONTENT</b>			
						<b>INTERVIEW RESULTS (Parent, General &amp; Special Education Teacher)</b>			
26	0	0	6			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?			
25	1	1	5			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?			
39	1	1				GE 81. Are this student's goals based on the PA Standards/PA Common Core or, if appropriate, alternate standards?			
40	0	1				GE 82. Is the specially designed instruction in this student's current IEP appropriate to meet his/her educational needs?			



Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
40	0	1				GE 83. Is the current IEP appropriate to meet this student's educational needs?			
47	0	1				SE 98. Unless otherwise specified in the student's IEP, is the length of this student's instructional day the same as nondisabled students?			
48	0	0				SE 102. Is the specially-designed instruction in the current IEP appropriate to meet this student's educational needs?			
48	0	0				SE 103. Are the student's annual goals based on the PA Standards/PA Common Core or, if appropriate, alternate standards?			
43	3	2				SE 104. If appropriate, are the student's annual goals based on functional performance?			
46	0	2				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?			
42	0	6				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?			
45	0	3				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?			
46	0	2				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?			
44	1	3				SE 117. Is this student making progress in meeting the annual goals of his/her current IEP?			
45	0	3				SE 117a. In your opinion, is this student benefiting from participation in the general education classroom?			
0	0	3				SE 117b. If yes, in what ways?			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						<p>Socialization, acceptance into higher education programs.</p> <p>Peer modeling.</p> <p>Making progress.</p> <p>Doing well.</p> <p>Social aspects, exposure to language/conversational skills, and exposure to other activities.</p> <p>Socialization, taking turns.</p> <p>Retains information about topics that interest student and group discussions benefit student.</p> <p>With same age peers, likes being social and has friends.</p> <p>Able to participate with grade level peers for social interactions.</p> <p>Through social interactions.</p> <p>Exposure to the core curriculum and participation and socialization is helping the student to succeed in society.</p> <p>Socialization</p> <p>Exposure to text.</p> <p>Participates in the class as an active participant. Stronger in specific area and this reinforces more encouragement to try harder.</p> <p>Yes, modeling language is important.</p> <p>Working on grade level and was selected for a special admission.</p> <p>Peer modeling and problem solving skills.</p> <p>Peer support and collaboration.</p> <p>Getting modeling for social behavior and typical peer interactions.</p> <p>Based on need.</p> <p>Developing friendship and language modeling growth in expressive language.</p> <p>Social interactions.</p> <p>Social skills and interactions with non-disabled peers.</p> <p>Significant growth in academics.</p> <p>Access to the general education curriculum and same aged peers.</p> <p>Literacy, benefits from grade level instruction, modifications makes the student feel more confident, modeling of peers is benefiting.</p> <p>Benefiting from modeling peers.</p> <p>Progress in the general education curriculum.</p> <p>Loves being with friends.</p> <p>Social interaction, group work and projects.</p> <p>Being around regular peers for instruction levels and participating with teacher.</p>			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						<p>Same aged peers are a positive influence.</p> <p>Socialization and academic skills improvement.</p> <p>Social and communication skills.</p> <p>Exposure to grade level materials.</p> <p>Socialization and on grade level.</p> <p>Exposed to grade level work, with the assistance of teacher. Socialization.</p> <p>Being around peers is helpful.</p> <p>More opportunities to converse and express feelings.</p> <p>On grade level and participating 100%.</p> <p>Enhanced academic progress and socialization opportunities.</p> <p>Improving skills.</p> <p>General education instruction.</p> <p>Socialization, core curriculum exposure.</p> <p>Peer interactions.</p>			
0	0	48				SE 117c. If no, what does this student need that he/she is not receiving?			
47	0	1				SE 118. Is the progress on annual goals recorded and reported to the parent based on objective and measurable data?			
						<b>IEP IMPLEMENTATION</b>			
						<b>INTERVIEW RESULTS (Parent, General &amp; Special Education Teacher)</b>			
24	1	1	6			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?			
28	0	3	1			P 49. Are the special education and related services included in your child's current IEP provided at no cost to you?			
					27 1 0 1 3 0	<p>P 57. When all students in the school receive a report card, I also receive a progress report on my child's IEP goals.</p> <p>Always</p> <p>Sometimes</p> <p>Rarely</p> <p>Never</p> <p>Don't Know</p> <p>Does not Apply</p>			
						P 58. My child's progress is reported to me by the school in a manner that I understand.			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					26 1 0 2 2 1	Always Sometimes Rarely Never Don't Know Does not Apply			
27	3	0	2		10%	P 64. My child is receiving the supports and services agreed upon at the IEP meeting.  1:1 and counseling not provided as stated in the IEP. The amount of time needed for services as indicated in my child's IEP. Teacher shortages prevent fully allotted time as indicated in the IEP. In addition, the student is not receiving reading services to the extent expected from the parent.	PDE provided the LEA with the names of individual students for whom individual corrective action must be implemented. The LEA must submit documentation of required corrective action within 30 days.		
35	0	6				GE 77. If supports for school personnel are included in the student's current IEP, has the LEA provided those supports?			
38	0	3				GE 79. Are the supplementary aids and services, including program modifications and specially designed instruction in the student's current IEP, being provided?			
23	0	18				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?			
17	6	18				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	24				GE 79c. If yes, what reasons were discussed for recommending removal?			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						<p>Only when needed for supports. Based on need. Only when needed. Based on need. Academic support. Interpersonal supports/small group support. Amount of support needed. Academics Based on need. Based on need. Based on needs. Academic and social needs. Smaller learning settings and concentration and developing basic skills. Need for related services. Based on need. Instruction Small group instruction.</p>			
0	0	24				<p>GE 79d. If yes, how was the amount of time that this student would be removed from the general education classroom decided? Team Team decision. Only when needed. Based on individual academic needs. Based on student's needs and progress. The IEP team. Level of need to make progress on IEP goals. IEP team decision. Not sure. Team decision. IEP team decision. IEP team decision. IEP team decision. Service needs determination by team. As needed. Team decision. IEP team decision.</p>			
23	0	18				<p>GE 79e. 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?</p>			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
25	0	16				GE 84. If appropriate, are you implementing the positive behavior support plan for this student as written in the current IEP			
39	0	2				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?			
46	0	2				SE 105. Are the supplementary aids and services, including program modifications and specially designed instruction in the student's current IEP, being provided?			
48	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?			
46	1	1				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?			
45	0	3				SE 111. If supports for school personnel are included in this student's current IEP, has the LEA provided those supports?			
43	0	5				SE 113. If required, were the testing accommodations included in this student's current IEP implemented?			
47	0	1				SE 114. Was the placement decision made by the IEP team after the annual goals, specially designed instruction, and related services were developed?			
47	0	1				SE 120. Is this student receiving the supports and services agreed upon in his/her current IEP, including related services?			
						<b>PROVISION OF ESY AND RELATED SERVICES INTERVIEW RESULTS (Parent &amp; Special Education Teacher)</b>			
10	2	17	3			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?			
22	5	4	1			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?			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
25	3	1	3			P 44. Did you receive an explanation of what would make your child eligible for ESY services?			
23	2	2	5			P 45. Did you agree with the IEP team's conclusion about your child's eligibility for ESY services?			
0	0	31	1			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?			
12	0	16	4			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?			
45	0	3				SE 121. Was the consideration of ESY eligibility discussed during this student's current IEP meeting?			
28	2	18				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	48				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	48				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	48				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	48				SE 122d. Does this student need supplementary aids and services to participate in non-academic and/or extra-curricular activities?			
0	0	48				SE 122e. If yes, are needed supplementary aids and services being provided to this student?			
0	0	48				SE 122f. Are there routine opportunities for this student to interact with non-disabled peers that are planned and/or facilitated by school personnel?			
						<b>SECONDARY TRANSITION (Parent &amp; Special Education Teacher)</b>			
1	0	27	4			P 50. If your child is age 14 or older was he/she invited to participate in the IEP meeting for transition planning?			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
21	3	3	5			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?			
19	8	1	4			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	13	0			P 50c. If yes, what reasons were discussed for recommending removal? Based on needs. Extra help when needed. Based on need. Based on need. Need more support. Based on needs. Needs Educational needs. Academic needs. Academics Needs Based on need. Based on needs. Academic needs. To meet the child's academic needs. Small group instruction. Small group instruction. Related services. Academic needs.			
0	0	13	0			P 50d. If yes, how was the amount of time that your child would be removed from the general education classroom decided?			



Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						Based on needs. Extra details for written work. Don't recall. As needed. Don't know exactly. IEP meeting. IEP meeting. IEP team. IEP team. Based on student needs. IEP Team. IEP team. IEP team decision. IEP team decision. IEP team meeting. IEP team decision. IEP team decision. Team decision. IEP team.			
21	3	2	6			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?			
20	2	5	5			P 50f. In your opinion, is your child benefiting from participation in the general education classroom?			
0	0	12	0			P 50g. If yes, in what ways?			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						<p>Socialization being with peers. Socially and can handle large group instruction. Education wise on the correct level, working in one spot and not smothered, progressing more into a bigger unit. Has improved immensely. Small group sessions in class. Likes to participate with peers . Interaction with peers and exposure to grade level skills. Just being included. Learning to control self and retaining more information. Communication and is learning to share while in general education. Socialization Academically Could do more. People skills, more alert and calming down, academic skills. More opportunities to converse with regular education students. Socialization Participating in core curriculum and socialization. Socialization, significant improvement. Peers' support and encouragement. Socialization interaction. Peer interactions and socialization.</p>			
0	0	30	0			<p>P 50h. If no, what does your child need that he/she is not receiving in the class? Needs to express self more. 1:1 and Counseling.</p>			
					<p>7 Always 1 Sometimes 0 Rarely 0 Never 2 Don't Know 22 Does not Apply</p>	<p>P 59. I am satisfied with the transition services developed for my child.</p>			
						<p>P 60. My child is learning skills that will lead to a high school diploma and further education and/or employment.</p>			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					13 5 0 2 3 9	Always Sometimes Rarely Never Don't Know Does not Apply			
16	0	32				SE 116. Were this student's desired post school outcomes considered when the IEP team developed the annual goals?			
18	0	30				SE 123. Where appropriate, does the LEA invite a representative of a participating agency that is likely to be responsible for providing or paying for transition services to the IEP meeting?			
						<b>Topical Area 6: NOREP/PWN</b>			
						<b>(File Reviews)</b>			
50	0	0				FR 328. NOREP/PWN is present in the student file			
50	0	0				FR 329. Demographic data			
49	1	0			2%	FR 330. Type of action taken			
50	0	0				FR 331. A description of the action proposed or refused by the LEA			
50	0	0				FR 332. An explanation of why the LEA proposed or refused to take the action			
49	1	0			2%	FR 333. A description of the other options the IEP team considered and the reason why those options were rejected			
49	1	0			2%	FR 334. Description of each evaluation procedure, assessment, record or report used as the basis for proposed action or action refused			
44	3	3			6%	FR 335. Description of other factor(s) relevant to LEA's proposal or refusal			
50	0	0				FR 336. Educational placement recommended (including amount and type)			
48	2	0			4%	FR 337. Signature of school district superintendent or charter school CEO or designee			
44	6	0			12%	FR 338. Parent signature or documentation of reasonable efforts to obtain consent (e.g. mailed to parents, certified mail, visit to the parent's home, etc.)			
36	11	3			23%	FR 339. Parent has selected a consent option			
50	0	0				FR 340. NOREP/PWN reflects the educational placement indicated on the student's IEP			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						<b>INTERVIEW RESULTS (Parent)</b>			
5	0	25	2			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?			
					19 5 1 3 3 1	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			
						<b>Topical Area 7: Additional Interview Responses</b>			
						<b>INTERVIEW RESULTS (Parent &amp; Special Education Teacher)</b>			
					22 4 3 0 3 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			
		2	2			P 66. Tell me anything you really like about your child's special education program.			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					8 8 5 15 5 15 8 10 8 12 7 4 7	a. modifications b. progress reports c. staff-aide ratios d. staff's knowledge, training e. instructional materials g. staff open to suggestions, good communication h. follow the IEP i. support services j. student ratios k. staff's understanding and attitude l. more inclusion m. services provided outside neighborhood school n. other			
		11	4		2 3 1 2 4 3 3 2 2 1 3 5 7	P 67. Tell me anything you would like to change about the program. a. modifications b. progress reports c. staff-aide ratios d. staff's knowledge, training e. instructional materials f. less inclusion g. staff open to suggestions, good communication h. follow the IEP i. support services j. student ratios l. more inclusion m. services provided outside neighborhood school n. other			
		5	0			P 68. The school explains what options parents have if the parent disagrees with a decision of the school.			

Y	N	NA	DK	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					10 1 11 2 1 2	a. Very strongly agree b. Strongly agree c. Agree d. Disagree e. Strongly disagree f. Very strongly disagree			
						P 69. Additional comments about your child's program. Don't want to be on same level as everyone else if goals are exceeded or accomplished, must keep attention going, no lag time. Has also requested additional support or strategies that can be used at home to help where needed. Unable to attend meetings. My child needs additional services. School team prioritizes a collaborative problem solving model. There should be parent trainings to gain a better knowledge of the Special Education process, terminology and federal mandates. My child has made good gains with the service. School does good. Teachers are great! They really motivate and support my child. Not sure if child is getting the services needed, not enough consistency.			
47	0	1				SE 101. Do you hold the required certification to implement this student's program?			
48	0	0				SE 101a. Have you received sufficient training, technical assistance and other support to teach this student?			
0	0	48				SE 101b. If no, what training or support would assist you?			
						<b>Topical Area 8: Other Non-compliance Issues</b>			
						SDP is required to determine eligibility COVID COMPENSATORY SERVICES (CCS)			
						<b>Topical Area 9: Other Improvement Plan Issues</b>			
						FSA 15A Parent Survey Results	The LEA will conduct a survey to assist and determine the training needs of parents. The results of this survey will be incorporated into an improvement plan.		
						FSA 19A Teacher Survey Results	The LEA will submit an improvement plan as a result of the teacher survey responses. The improvement plan will include a plan to address training needs.		