

**MEMORANDUM**

**To:** Board of Regents

**From:** Board Office

**Subject:** Iowa Department of Education Compliance Review at the Iowa Braille and Sight Saving School

**Date:** April 10, 2000

**Recommended Actions:**

1. Receive the report on the Iowa Department of Education Compliance Review of the Iowa Braille and Sight Saving School.
2. Request the School to report any changes in compliance and provide copies of any subsequent reports to the Board Office regarding actions on recommendations.

**Executive Summary:**

The Bureau of Children, Family and Consumer Services of the Iowa Department of Education conducts compliance reviews every three to five years at the Regent special schools. A long-time agreement between the Board of Regents and the Iowa Department of Education provides for these periodic visits to (1) ascertain that the Regent special schools are in compliance with state and federal statutes, such as the *Individuals with Disabilities Education Act (IDEA)*, and regulations regarding special education and (2) assure the Board of Regents and the public that the special schools have met the necessary requirements regarding special education.

During the 1998-99 academic year, the Iowa Braille and Sight Saving School requested the Bureau of Children, Family and Consumer Services of the Iowa Department of Education to conduct a special education compliance review. The School had implemented a new Individualized Education Plan (IEP) process and wanted to receive feedback from the Department of Education about the changes. The review was conducted on two separate occasions (April 29, 1999 and June 21, 1999). The Department of Education issued a report which identified the School's strengths, opportunities for improvement, and citations. The opportunities for improvement are *suggestions* which the School can choose to implement or not; the 18 citations included in the report are indications to the School that there has been a violation of either the federal or the state code

related to providing services to visually impaired students. Although numerous, the citations were not considered "major" by the Department.

The School responded to the corrective action plans corresponding to the citations included in the Special Education Monitoring Report by specifying a lead person and a date for completion. After reviewing the documents and the progress report submitted by the School, the Department of Education has determined that all activities within the plan have been accomplished and that there are no further violations. The Bureau of Children, Family, and Consumer Services considers the Iowa Braille and Sight Saving School's special education compliance monitoring to be complete. The next site visit will likely occur in the next three to five years.

This report addresses the following Key Result Area (KRA) and Objective in the Board's Strategic Plan:

KRA 1.0.0.0 Become the best public education enterprise in the United States.

Objective 1.1.0.0 Improve the quality of existing and newly created educational programs.

### **Background:**

A review team of the Iowa Department of Education visited the Iowa Braille and Sight Saving School on April 29, 1999 and June 21, 1999.

The strengths of the School noted by the Visiting Team included the following:

- \* The School is committed to trying to involve parents, e.g., ICN planning sessions are held prior to IEP meetings and annual reviews, notebooks are sent home every weekend.
- \* The staff is very caring about the students at the School; every student has an IEP advocate assigned.
- \* The framework of the organization of student files is to be commended.
- \* The format used for notice prior to IEP meetings is very comprehensive.

The opportunities for improvement noted by the Visiting Team included the following:

1. Consider obtaining additional IEP training for staff. Some suggested topics include:
  - \* Identify linkages between present levels of educational performance (PLEP), services, and evaluations.
  - \* Define broader IEP goals for better utilization of benchmarks.

- \* Provide resources and training in dealing with least restrictive environment (LRE) questions.
  - \* Provide staff with necessary tools to answer adequately the special school questions.
2. Consider examining what is meant by general education involvement.
    - \* How are general education teachers involved?
    - \* Does the PLEP affect the child's involvement and progress in the general curriculum?
    - \* Where is the evidence that the IEP team revises the IEP as appropriate to address any lack of progress toward annual goals or in the general curriculum, results of reevaluation, or information about the child provided to or by the parents?
  3. Consider examining the reevaluation process and who is ultimately responsible for it. Identify the role of the AEA.
  4. Consider the implications of verbatim statements in the IEPs.
  5. Consider examining the staff evaluation procedures. Interviewees reported wanting good work to be recognized and/or to include recommendations for improvement.
  6. Consider ways to increase communication between the Vinton-Shellsburg Community School District and IBSSS.
  7. Consider improving the timeliness of progress reports.
  8. Consider whether school social work services should be provided while attending IBSSS.
  9. Consider identifying the person on the IEP according to the role each person plays, e.g., special education teacher, general education teacher, and representative of AEA.
  10. Consider eliminating the form titled "Release of Information to Iowa Braille and Sight Saving School" because an educational agency or institution may disclose an education record of a student in attendance to another educational agency or institution if the student is enrolled in or receives services from the other agency or institution.
  11. The legal reference at the bottom of the form titled "Request for Medication to be Given at School" is not clear.

The citations noted by the Visiting Team included the following:

- \* There was not always documentation that a three-year reevaluation occurred within the required timeline. Related to reevaluation, there was no evidence that these requirements were fulfilled - prior written notice, consent, and reevaluation team review.

Corrective Action Plan: IBSSS needs to develop a procedure so that all three-year evaluations occur within the required timeline. IBSSS will need to make certain that it adheres to the related components of prior written notice, consent, and reevaluation team review. *Completed.*

- \* The list of participants in the IEP meeting notice did not always match with who actually attended the IEP meetings. The number of participants was sometimes greater at the IEP meeting.

Corrective Action Plan: IBSSS must develop a procedure so that the notice participants match with those actually attending the IEP meeting. *Completed.*

- \* The purpose of the IEP meeting notice was not always identified.

Corrective Action Plan: IBSSS must develop a procedure for including the purpose of the IEP meeting in the notice. *Completed.*

- \* A general education teacher was never present, according to records reviewed and confirmed by interviewees.

Corrective Action Plan: IBSSS must develop a procedure for including a general education teacher, as appropriate, in IEP meetings. *Completed.*

- \* There was no evidence that the IEP team revised the IEP when there was a lack of progress towards annual goals.

Corrective Action Plan: IBSSS must develop a procedure for showing evidence that IEPs are revised when there is a lack of progress towards annual goals. *Completed.*

- \* There was no evidence written on an IEP of program modification or supports needed for school personnel working with IBSSS students in the Vinton-Shellsburg Community School District.

Corrective Action Plan: IBSSS must develop a procedure so that statements of the program modifications or supports for school personnel that will be provided to the child, if appropriate, are included on the IEP. *Completed.*

- \* Several PLEP statements talked about the benefits of socialization in a general education setting; however, these students received 100% special education services.

Corrective Action Plan: IBSSS needs to develop a procedure for linkages to occur between PLEP statements and where special education services are provided. *Completed.*

- \* There was not always written documentation on the IEPs indicating that the four questions, relating to reasons, support needed, integrated setting, and continuum of services available, required for students attending special schools were answered.

Corrective Action Plan: IBSSS needs to develop a procedure for making certain written documentation is provided that shows the four questions required for students attending special schools are answered. *Completed.*

- \* The IEP was not always in effect at the beginning of the year.

Corrective Action Plan: IBSSS must develop a procedure so that each IEP is in effect at the beginning of the year. *Completed.*

- \* Not all objectives or benchmarks listed a schedule for evaluation.

Corrective Action Plan: IBSSS must develop a procedure to include a schedule for evaluation for all objectives or benchmarks. *Completed.*

- \* Not all IEPs included the child's progress toward the annual goals.

Corrective Action Plan: IBSSS must develop a procedure to make certain all IEPs include the child's progress toward the annual goals. *Completed.*

- \* Not all IEPs included the extent to which that progress is sufficient to enable the child to achieve the goals by the end of the year.

Corrective Action Plan: IBSSS must develop a procedure to make certain all IEPs include the extent to which that progress is sufficient to enable the child to achieve the goals by the end of the year. *Completed.*

- \* Not all IEPs gave evidence that the IEP team considered the questions regarding the provision of special education and related services.

Corrective Action Plan: IBSSS will need to develop a procedure so that IEP teams consider the four questions found at IAC 281-41.70(2)<sup>1</sup> regarding the provision of special education and related services. *Completed.*

- \* The two students of transition plan age did not participate in the IEP meeting. There was no documentation of efforts taken to ensure that the students' preferences and interests were considered.

Corrective Action Plan: IBSSS will need a procedure for providing documentation of efforts taken to ensure that the student's preferences and interests were considered if the student is not able to participate in the IEP meeting. *Completed.*

- \* The speech-language pathology (SLP) goals were missing in a student's IEP. It did not appear that the goals and objectives for SLP were written in the most recent IEP meeting.

Corrective Action Plan: IBSSS needs to reconvene the IEP team if the student is receiving SLP services. *Completed.*

- \* The IEP for one student did not have a clear answer as to why the student will not participate in the assessment and how the student will be assessed.

Corrective Action Plan: IBSSS needs to reconvene the IEP team to provide a clear answer as to why the student will not participate in the assessment and how the student will be assessed. *Completed.*

- \* The IEP for one student did not provide the extent of time the student will participate in general education.

Corrective Action Plan: IBSSS needs to reconvene the IEP team to provide an explanation of the extent, if any, to which the student will not participate with nondisabled students in the regular class. *Completed.*

- \* Numerous procedural violations were found when reviewing a particular student's IEP.

Corrective Action Plan: IBSSS needs to reconvene the IEP team and write an entire new IEP for the student. *Completed.*

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<sup>1</sup> What are the reasons that the eligible individual cannot be provided an educational program in an integrated school setting? What supplementary aids and services are needed to support the eligible individual in the special education program? Why can't these aids and services be provided in an integrated setting? What is the continuum of services available for the eligible individual?

- \* The date and title of person administering medication were not found on the medication reporting sheet form.

Corrective Action Plan: IBSSS needs to revise the form to include the date and title of person administering the medication. *Completed.*

- \* A medication administration policy was not available.

Corrective Action Plan: IBSSS needs to establish a medication administration policy. *Completed.*

**Analysis:**

The Iowa Braille and Sight Saving School has responded to the citations made by the Iowa Department of Education's Compliance Report by submitting an expected completion date and lead staff member for each corrective action plan specified in the citations. Upon reviewing the progress report submitted by the School, the Department of Education has determined that all activities within the plan have been accomplished. On March 7, 2000, the Bureau of Children, Family and Consumer Services communicated to the School that it considers the Iowa Braille and Sight Saving School's special education compliance monitoring to be complete.

A full copy of the Compliance Report is included in the Regent Exhibit Book.

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Diana Gonzalez

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Approved: \_\_\_\_\_

Frank J. Stork