

# QUALITY STANDARDS

**For CDE Approved Schools  
In Eligible Facilities  
March, 2008**



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## INTRODUCTION

### Background

A committee of experienced eligible facility educators worked during the 1996-97 school year to develop the original *Quality Standards*. There was general consensus at the spring, 1997 Eligible Facilities' Special Education Directors' meeting that the *Quality Standards* should eventually be made "mandatory." The use of the *Quality Standards* to guide monitoring visits was piloted.

The original intent of the development of the *Quality Standards* was to:

- Identify and define key factors in an educational program which are instrumental for quality instruction.
- Serve as a guide for educational program development of eligible facilities' schools.
- Provide a tool for the consistent evaluation of school programs.
- Ultimately, improve the instructional services provided to students in out-of-district placements.

The pilot project was conducted over a three-year period during which information was gathered and the plan for implementation revised. At the Eligible Facilities' Education Coordinators' meeting in the spring of 2000, there was consensus that the self-assessment and school improvement planning process, based on the quality standards, would be required; however, they would not be used as part of the monitoring process.

*ECEA Rules* state that in order to maintain approval of its school program, each facility must "complete an annual self-assessment based on the Quality Standards for Eligible Facilities and develop a school improvement plan," 3.02(1)(c)(i)(B). The *School Improvement Plan* is submitted to the Colorado Department of Education as part of the December Count.

### Revision

The Eligible Facilities' School Approval Task Force met 03/10/06, 04/11/06, and 06/14/06. Eligible facilities, public schools, the State Board of Education, the Colorado Department of Education, the Department of Human Services, and the Division of Youth Corrections were all represented. There was unanimous consent that the *Quality Standards* represented an excellent description of a good program. It was felt that they should be updated to be in alignment with the

reauthorization of *IDEA, No Child Left Behind*, and any changes to the approval process, but they should continue to be utilized.

With input from facilities' special education directors and teachers, as well as school district out-of-district placement coordinators, the *Quality Standards* have been revised to reflect the most recent changes in the law and highlight best practices. Furthermore, every effort has been made to make each individual quality standard concrete and discrete, as well as to eliminate redundancy.

### Current Implementation

The revised *Quality Standards* will be utilized in several ways:

- To allow the facility school to complete an annual self-assessment (internal review).
- To guide the development of the *School Improvement Plan*.
- To focus monitoring visits.
- To document eligibility for "exemplary" approval by earning a score of 39-42 on the rubric, with no 1s or 2s.
- To ultimately lead to better outcomes for students

**Effective at the beginning of the 2008-09 school year, each CDE approved school in an eligible facility will be required to keep on file documentation/verification of its implementation of the *Quality Standards*. It is to be current and up-to-date at all times. A school may choose to use either a large binder to create a portfolio or a file drawer or file box to organize materials.**

However materials are organized, these guidelines should be followed:

- Organize documentation by quality standard.
- Preface each section with a copy of the *Quality Standards* rubric.
- Use the rubric as a self-assessment evaluation tool to develop the *School Improvement Plan* (due annually as part of December Count) and update the self-assessment, if necessary, prior to any monitoring visit.
- Label materials to clearly indicate what they are documenting.
- Use samples.
  - For example, to illustrate your communication with school districts, you could include a copy of the form you use to track the request, receipt, and review of school records, and an email that you sent for this purpose (but do not file every phone log/email with every school district).
  - Include a copy of the form you use to track school attendance (but do not file daily attendance logs here).

- Provide a sample of the IEP form you use (but do not store all IEPs here).
  - Represent how your school is meeting (or exceeding) the quality standards. Be creative in documenting what's working well in your unique setting.
- Include a page in your *Quality Standards* notebook/box/portfolio that references where supporting documentation is found; i.e., "All IEPs and Personal Learning Plans are kept in the second drawer of the locked file cabinet in the school office."
  - Date all materials. When new items are added, older examples should be purged.
  - For each piece of documentation, select the one quality standard for which the sample seems most appropriate; do not put the same information under multiple quality standards.
  - Incorporate *Policies & Procedures*, as appropriate.
  - Use clear plastic inserts as an option to provide ready access to forms to be copied without having to punch holes, which may also remove text.

### Scoring

For each quality standard, there is a rubric with scores 1-4. In some situations, a facility may wish to utilize .5 scoring.

A score of "3" indicates full approval. It is the norm, the standard, the expected score. This is a good program. There may be minor compliance issues, but the school is willing to correct them in a timely fashion and fully cooperates with CDE to do so.

A score of "4" is exemplary or distinguished; the norm is exceeded. A school earning a score of "4" may be asked to host visits as a model site and share information with others by making conference presentations, hosting trainings, serving as a mentor to another facility, etc. Data is gathered and analyzed to inform decisions. Either the special education director and/or the educational coordinator/administrator is actively involved in regional/statewide networking and attends relevant CDE trainings. Please note, however, that not every quality standard has a score of "4" as an option. In two instances, maintaining DHS licensure and offering the required number of student contact hours per year, the standard is either met or it isn't; there is no realistic way to achieve an "exemplary" performance. (The fact that two of the quality standards have a "3" as the highest possible score has been taken into account in defining the "exemplary" standard.)

A score of "2" indicates that there are serious concerns. Most likely, the school will be asked to develop a *Corrective Action Plan*, CDE will offer technical support and assistance, and improvement will be closely monitored. Probationary approval status may be warranted, especially if the school is resistant to making required changes.

A score of "1" indicates significant deficiencies that must be corrected within specified timelines or a request may be made to the State Board of Education to revoke approval. The school is resistant to change and has not taken advantage of technical support and assistance.

It is expected that each school year, typically in the fall, the facility school will complete an internal review or self-assessment using the rubric scores from the *Quality Standards*. This process, along with any recommendations from previous monitoring visits, should guide development of the *School Improvement Plan*, which is submitted to CDE as part of the December Count process.

When a facility is monitored, a review of the *Quality Standards* documentation will be included. When the *Quality Standards* are well organized and thoroughly documented, that part of the monitoring visit will go quickly, leaving more time for classroom observations and teacher/student interviews. Discrepancies between the self-assessment score and the score given by the monitor(s) will be thoroughly discussed.

Should there be a discrepancy between the facility's self-assessment score and CDE's score, all efforts will be made to resolve the difference to the satisfaction of both parties. Should that not be possible, it is the score of the CDE staff that will stand. The facility has the option of ***appealing that decision to the State Board of Education (ECEA Rules 7.07(1))***.

Each individual quality standard also lists specific examples of documentation that can be used to verify scores, but these are suggestions only and not intended to be all inclusive. Each facility is encouraged to include additional materials which further illustrate the school's attainment of that quality standard.

Below, please find each of the quality standards, the rating indicators, and suggested documentation options.

## **QUALITY STANDARDS FOR ELIGIBLE FACILITIES**

- 1. The Facility Maintains DHS Licensure and CDE School Approval**
- 2. The Schedule for the Educational Program Is Comparable to a Public School**
- 3. The Facility Employs Appropriately Qualified Teachers**
- 4. The Facility Purposefully Employs Paraprofessionals**
- 5. The Facility Employs (or Contracts with) a Special Education Director**
- 6. Educational Staff Participates in Ongoing Professional Development**
- 7. The School Complies with Special Education Requirements**
- 8. The Facility Has a Schoolwide Positive Behavior Management/Support System in Place**
- 9. The Facility Implements Transition Planning for Next Steps and Post-School Outcomes**
- 10. The Facility Provides a Comprehensive Academic Curriculum**
- 11. The Facility Encourages Input From and Communication With Parents/Guardians/Educational Surrogate Parents**

## 1. The Facility Maintains DHS Licensure and CDE School Approval

### Rating Indicators:

- 3 The agency fully complies with applicable regulatory requirements. The facility is cooperative with on-site audits and other monitoring requirements:
  - maintenance of a *Quality Standards* portfolio
  - display of appropriate licenses
  - timely submission of PPOR billing, *Excess Cost Application* (if applicable), and December Count data, which includes the *School Improvement Plan*
  - use the previous year's *School Improvement Plan* to guide the current year's
  - notification to CDE of major program changes, change in location, and/or loss of special education director
  - clear educational mission statement and/or philosophy which addresses the types of students with whom the school works
- 2 There are deficiencies, but the agency is working closely with DHS and/or CDE to correct any areas of concern. A *Corrective Action Plan* is in place and is being closely monitored.
- 1 The facility is in danger of losing its DHS license and/or its CDE approval. The program operates with little or no regard for regulatory requirements. If DHS licensure is revoked, CDE school approval is no longer applicable.

### Notes:

## 1. The Facility Maintains DHS Licensure and CDE School Approval

### Examples of Documentation to Verify Rating:

- DHS license is publicly displayed (copy in *Quality Standards* portfolio)
- CDE approval certificate is publicly displayed in the school (copy in *Quality Standards* portfolio)
- Copies of most recent monitoring reports from CDE, DHS, DYC, North Central Commission on Accreditation and School Improvement, other agencies, as appropriate
- Record of timely submission of required documents/forms
- Utilization of the *Out-of-District Placement Manual* and compliance with the *ECEA Rules* to guide practice
- *School Improvement Plan* (in this instance, keep previous *School Improvement Plans* to document implementation and growth)
- Educational mission/philosophy statement
- Copy of the completed *Excess Cost Application*
- Self-assessment utilizing the quality standards (may be the first page of each section of the *Quality Standards* portfolio)
- *Corrective Action Plan* (if applicable)
- Correspondence with DHS (if applicable)
- During monitoring, staff may be asked their role in development of the *School Improvement Plan*

### Notes:

## 2. The Schedule for the Educational Program Is Comparable to a Public School

### Rating Indicators:

3

- Nine month calendar running from approximately mid-August to mid-June
- Mandatory secondary 1080 hours – typically 180 days times 6 hours per day, excluding lunch
- Mandatory elementary 990 hours – typically 180 days times 5.5 hours per day, excluding lunch
- Students are typically available for the daily schedule and are typically on time to all classes
- Classroom interruptions are kept to a minimum
- Minimum of 20 hours per week of core academic content
- Daily school attendance is documented, including sign in/sign out logs
- Educational services are provided for students who are not in school due to safety/security concerns
- Group and goal-setting classes held during the school day follow a general affective curriculum and are taught by a CDE licensed professional
- Individual and/or group therapy is not typically allowed during school hours. If individual and/or group therapy is held during the day, the length of the school day is increased to assure six hours of instructional time.
- Individual exceptions must be documented on the IEP

2 The education program, although regularly scheduled, operates on a sporadic basis and/or consistent student participation is not required.

1 The education program consistently falls below the required standards and/or students are regularly and routinely pulled/excluded from school.

### Notes:

## 2. The Schedule for the Educational Program Is Comparable to a Public School

### Examples of Documentation to Verify Rating:

- Eligible Facility's school calendar, which should be the same as submitted for *Excess Cost Application* (with days counted) and December Count
- School calendar of the district in which the facility is located
- Daily school schedule (with hours counted, excluding lunch)
- Teacher schedules that indicate specific classes being taught
- Description of any non-traditional schedules; i.e., community or service based learning, outdoor and/or experiential education, with clear linkages to content standards
- Reference to location of daily school attendance record (not the same as the facility's enrollment required for PPOR).
- Sample of sign in/out logs for students who leave school for any reason, including a reference to the reason; i.e., sick, med appointment, court, therapy, and reference to location of current logs
- Clearly defined procedures are in place for the provision of educational services for students unable to attend school due to safety/security concerns
- Documentation that educational services are provided for students unable to attend school due to safety/security concerns, completed by the teacher and/or service provider.
- Behavior Plans, IEPs or Personal Learning Plans (for general education) to document exceptions to the "comparable school day" standard
- During monitoring, staff and/or students may be asked to describe classroom interruptions

### Notes:

### 3. The Facility Employs Appropriately Qualified Teachers

#### Rating Indicators:

- 4 All the criteria of #3 are met, plus the facility is able to document retention of teachers so that there is never a completely new staff. The facility has programs in place to support teacher recruitment and enhance teacher retention. There is a clearly defined orientation for new educational personnel.
- 3 The teachers (or their replacements) identified on the *Excess Cost Application* and on December Count are present in the school setting. All special education teachers are CDE licensed with appropriate endorsements for the students served (a generalist license is appropriate for all populations except deaf/hard of hearing and blind/vision impaired). There must be sufficient special education teachers to meet the needs identified on IEPs, administer assessments, and consult with other teachers/service providers in the program. If a special education teacher is the sole deliverer of core content, that person must also meet highly qualified criteria. General education content area teachers must be CDE licensed and meet highly qualified criteria. Vacancies are filled in a timely fashion. Staff filling in for absent teachers are also CDE licensed.
- 2 There are teachers who are making attempts to obtain appropriate CDE licensure, but they do not currently meet CDE requirements; attempts to fill vacancies have failed. Substitute teachers do not hold CDE licensure.
- 1 The agency employs unlicensed, unqualified personnel to serve as teachers. Despite time and opportunity, teachers are not moving toward meeting CDE licensure requirements. Teachers are used to supervise in the residential setting and/or have responsibilities that extend beyond the school day/school setting.

#### Notes:

### 3. The Facility Employs Appropriately Qualified Teachers

#### Examples of Documentation to Verify Rating:

- Copies of teacher licenses
- SEE/TTE documentation
- Teacher job descriptions
- Policies/procedures for new teacher orientation
- Policies/procedures for substitute teachers
- Documentation of retention
- Policies/procedures for recruitment, hiring, training, and retention of new staff

#### Notes:

## 4. The Facility Purposefully Employs Paraprofessionals

### Rating Indicators:

- 4 If the facility chooses to staff its school with all teachers and use no paraprofessionals, this standard is met.
- All the criteria of #3 are met, plus teachers have received specific guidance/training on how to maximize the paraprofessional's contribution. If/when paraprofessionals indicate an interest in becoming a licensed teacher, the facility supports and encourages their development.
- 3 Paraprofessionals (also referred to as paraeducators, teacher's aides, youth treatment counselors, teacher's assistants, etc.) or their replacements, identified on the *Excess Cost Application* and on December Count, are present in the school setting. They are utilized to enhance student learning, either to support positive behavior management (which may include crisis intervention) and/or work as classroom aides. When in the classroom, the paraprofessional is actively engaged with students and/or involved in activities that ultimately support student learning. The paraprofessional does not work in the residential unit, i.e., waking students, monitoring chores, but may serve in a "fill-in" capacity to enhance communication between the residence and the school. The paraprofessional is typically listed on the facility's excess cost application as a full-time school employee. Paraprofessionals who also serve as substitute teachers have CDE licensure. Professional development for the paraprofessional is supported by the facility. The ratio of paraprofessionals to teachers is no more than 2:1, unless there is written documentation to explain the increased ratio.
- 2 A paraprofessional may be in the classroom with the teacher and students, but is frequently disengaged from what's happening. The paraprofessional(s) may be primarily in a "waiting" mode, waiting to respond to a crisis rather than working in a positive, proactive manner to decrease the odds of a crisis occurring in the first place. The paraprofessional may be working as a classroom teacher without CDE licensure. The paraprofessional is seldom included in professional development.
- 1 Despite the fact that paraprofessionals are included on the facility's excess cost application, they aren't actually working in the school on a full-time basis, but are instead working in the residential setting.

### Notes:

## 4. The Facility Purposefully Employs Paraprofessionals

### Examples of Documentation to Verify Rating:

- Paraprofessional job description(s)
- Paraprofessional(s) daily schedule
- Copies of CDE licensure, if applicable
- Ratio of paraprofessionals to teachers is reviewed as part of the *Excess Cost Application*, the December Count, and classroom observations.
- Paraprofessionals are encouraged and supported to obtain CDE licensure
- Evidence of teacher training to maximize the paraprofessional's role

### Notes:

## 5. The Facility Employs (or Contracts with) a Special Education Director

### Rating Indicators:

- 4 All the criteria for #3 are met, plus the special education director and/or his/her designee is an educational advocate and an instructional leader for the facility. He/she regularly attends CDE sponsored trainings/meetings at the local, regional, and/or state level. This individual coordinates with the facility to establish the value of the school program and to procure resources. The program has a well-defined process of instructional staff supervision. Supervision is developmental in nature; supervisors assist education staff in setting clear goals, observe teacher performance, provide technical assistance, and complete constructive evaluations of teacher performance/progress. If an improvement plan is necessary, supervisor and teacher work together to develop and continuously monitor the plan and teacher progress.
- 3 Each facility must employ a CDE licensed special education director. The special education director is responsible for signing the *Excess Cost Application*, the December Count assurances, and other formal documents. The special education director and/or his/her designee is responsible for ensuring that the facility is in compliance with special education rules and regulations, for instructional staff supervision (in coordination with facility policies), and development of the *School Improvement Plan*. Should the special education director leave for any reason, CDE must be notified immediately, and there is a clear plan to hire a new special education director.
- 2 The special education director has little involvement with the facility and/or there is an inconsistent program of instructional staff supervision. There is no one to serve as an instructional leader and/or educational advocate for the facility school.
- 1 The special education director has no involvement with the facility other than to sign his/her name to documents. The facility has no plan in place for supervision of instructional staff or supervision is arbitrary, inconsistent, or ineffective. There is rarely a representative from the facility in attendance at any CDE sponsored trainings/meetings at the local, regional, and/or state level. School may be viewed as a “daycare” for students between therapeutic interventions.

### Notes:

## 5. The Facility Employs (or Contracts with) a Special Education Director

### Examples of Documentation to Verify Rating:

- Special Education Director's license
- Special Education Director's job description
- Contract for the Special Education Director if the individual is not a full time employee of the facility
- Procedure to designate someone at the facility to oversee special education compliance, supervision, leadership, etc.
- Description of process for personnel evaluations
- Sample personnel evaluations
- Agency policies which describe the role of the special education director/designee in facility-wide decisions, planning
- Evidence that the special education director/designee is actively involved in facility wide decisions and planning

### Notes:

## 6. Educational Staff Participates in Ongoing Professional Development

### Rating Indicators:

- 4 Professional development (workshops, conferences, inservice) is fully supported through the provision of release time, funding (when appropriate), and dissemination of information regarding available trainings. Opportunities are designed or selected to meet existing needs and build capacity. The facility takes a lead role in organizing and hosting trainings. A systemic plan exists for education personnel attending training to share new skills and knowledge with other teachers and/or the facility when they return from training. Either the special education director, educational coordinator, and/or school administrator is actively involved in CDE sponsored meetings/trainings and is knowledgeable about current CDE requirements.
- 3 Educational personnel are encouraged to attend workshops, conferences, and inservice activities and receive release time. A listing of opportunities is maintained and disseminated. Educational personnel receiving support usually share new skills and knowledge learned with other teachers and/or the facility.
- 2 Little or no support (i.e., release time) is provided and/or funding is not available for school staff to attend CDE, Regional Professional Development Council, school district, or private professional development trainings or conferences.
- 1 No one from the facility has attended educational training during the school year.

### Notes:

## 6. Educational Staff Participates in Ongoing Professional Development

### Examples of Documentation to Verify Rating:

- Certificates of attendance at professional development training/conferences for teachers and/or paraprofessionals
- Rosters of attendees at internal trainings for teachers and/or paraprofessionals
- Description of staff's professional involvement outside the facility
- Narrative describing the relationship of professional development to the *School Improvement Plan*
- Policies/procedures that support staff training; i.e., school schedule adaptations to support inservice training, procedures to request professional development
- Policies/procedures around substitute teachers and provision of release time
- Policies/procedures around tuition reimbursement and/or conference funding
- Examples/evidence of staff sharing information

### Notes:

## 7. The School Complies with Special Education Requirements

### Rating Indicators:

- 4 All the criteria of #3 are met, plus the facility school staff works to establish and maintain communication with school districts. An effort is made to work collaboratively with school district personnel to schedule IEP meetings, discuss ongoing concerns, find solutions to problems, and provide the best services for students. School district representatives are invited to visit the facility school. Facility personnel attend, as needed, IEP staffings held at the public school. The school utilizes an internal quality assurance procedure to assure compliance with special education laws. IEP forms/procedures, whether the state suggested forms or forms from a specific district, are computerized and not hand written.
  
- 3 Although ultimately it is the administrative unit of residence which has responsibility for IEPs, the facility has someone on site who is knowledgeable about special education requirements, is familiar with and consistently applies the *ECEA Rules* and the *Federal Rules and Regulations, 34 CFR Parts 300 and 301*, and is committed to working closely with the administrative unit of residence to ensure that IEPs meet all rules and regulations and services are implemented as written. At a minimum, the facility school has policies and procedures in place to ensure the following:
  - A system which is not personnel dependent to document when school records are requested, received, and reviewed.
  - A system to schedule and track IEP meetings, which must include consultation with the administrative unit of residence.
  - A “record of access” form in the front of each educational file to maintain confidentiality of student records.
  - Documentation that IEP meeting notification was sent to the parent/educational surrogate parent, the school district of residence, and the student (if of transition age, see definition in QS 9), as well as other interested parties. (This is also discussed in QS 11, *The Facility Encourages Input from and Communication with Parents/Guardians/Educational Surrogate Parents*, but the compliance piece will be evaluated here.)
  - Verification that the most current IEP is being implemented as written, with a focus on instructional and related services. (Facilities must always follow the policies and procedures of the district of residence around IEP reviews/meetings. Different districts have different requirements around transfers and changes-of-placement.)
  - If a special education student enters a facility with an out-of-date IEP, an IEP staffing, in coordination with the administrative unit of residence, must be held as soon as possible.
  - Under no circumstances may a facility hold an eligibility meeting (any meeting to determine eligibility--initial, triennial, or reevaluation) without full participation from the administrative unit of responsibility. (The administrative unit of attendance, where the facility is located, is responsible for any initials. The administrative unit of residence, based on where the student’s parents reside, is responsible for all other IEPs, *ECEA Rules* 8.06(1)(c)).

- If the facility believes a general education student should be referred for special education evaluation, it must notify the administrative unit of attendance (responsible for Child Find) and the administrative unit of residence.
- IEP goals/objectives clearly inform classroom instruction.
- Please see transition requirements discussed in detail in QS 9, *The Facility Implements Transition Planning for Next Steps and Post-School Outcomes*. The compliance components will be evaluated here (to include appropriate, measurable postsecondary goals based upon age appropriate transition assessments related to education/training, employment, and, where appropriate, independent living skills; the transition services (including courses of study) needed to assist the child in reaching those goals; and annual goals/objectives designed to move the student toward the postsecondary goals); in QS 9, the service delivery and coordination with the school district will be evaluated.
- A process must be designed and implemented to provide “periodic reports on the progress the child is making toward meeting the annual goals, such as through the use of quarterly or other periodic reports, concurrent with the issuance of report cards,” 34 CFR § 300.320(a)(3)(ii).
- The *Recommended Placement in the Least Restrictive Environment* page for each IEP must provide an individualized rationale for the educational placement of the student.
- The facility needs to document the provision of related services as described on the IEP. (Unless the provision of related services is specifically accounted for on the *Excess Cost Application*, it is the responsibility of the administrative unit of residence to provide related services either directly or through contract).
- A *Summary of Performance* is completed, in coordination with the administrative unit of residence, for all special education students who exit with a regular diploma or age out.
- Although not a special education requirement, each facility is required to create and implement a *Personal Learning Plan (PLP)* for all general education students that, at a minimum, lists individualized learning goals and objectives and is shared with the district of residence.

Should there be compliance issues, the facility works closely with CDE to correct them in a timely fashion (and in all cases within one year from the date compliance was cited). The facility embraces opportunities to attend trainings around special education compliance to stay current and up-to-date.

- 2 Compliance with special education rules and regulations is “hit or miss” and tends to depend on an individual rather than systemic policies and procedures. Even if effective policies are in place, they are not consistently followed. The facility may not even be aware of whether a student is eligible for special education. Goals/objectives may be standardized, rather than individualized. However, the facility works cooperatively with CDE to develop a *Corrective Action Plan*, which is closely monitored, and accepts technical support and assistance.
- 1 The facility is not acting in a timely manner to address compliance issues. Special education students are not being identified and/or IEPs are not current and/or not being implemented.

#### Notes:

## 7. The School Complies with Special Education Requirements

### Examples of Documentation to Verify Rating:

- Policies/procedures around special education compliance
- Actual IEPs and PLPs for review (reference as to where they are located in the facility)
- Documentation from the administrative unit(s) of residence that the facility is authorized to initiate and conduct IEP reviews, including the annual review, 34 CFR §300.325(b). (Please note that the administrative unit of residence must still be involved in any eligibility meetings.)
- Internal quality assurance procedures to determine that facility produced IEPs meet compliance criteria
- Samples of procedures; i.e., tracking system to document records request, receipt, review; IEP meeting schedules; how classroom teachers are informed of IEP goals/objectives and how they provide feedback; how progress toward IEP goals/objectives is reported, etc.
- Description of computerized systems and opportunity to review
- Efforts; i.e., phone logs, correspondence, emails, to communicate/collaborate with school districts
- Feedback/examples of correspondence (email is acceptable) from school districts
- Policies/templates/model forms for routine communication to placing agencies, school districts, parents (treatment plan updates, school progress)
- *Corrective Action Plan*, if appropriate

### Notes:

## 8. The Facility Has a Schoolwide Positive Behavior Management/ Support System in Place

### Rating Indicators:

- 4 All the criteria of #3 are met, plus the facility school staff works in collaboration with the therapeutic and milieu staff (if applicable) to assure that there is a facility wide behavior management/support system in place which is carefully coordinated between the treatment, education, and residential (if applicable) components. There is a system in place to support ongoing communication between the therapeutic and educational staff around student behaviors. There is a consistent and regular system in place to recognize the positive contributions of students and staff.
- 3 Although the school does not have to be an “official” Positive Behavior Support (PBS) site, the major components of PBS should inform the school wide and classroom behavior systems:
  - Schoolwide expectations are clearly defined
  - Expectations are positively stated for all students and staff
  - Expectations are consistently taught by all teachers and staff
  - Procedures to teach expectations to students, staff, and families include opportunities to explain, model, practice, and process
  - Acknowledge and recognize appropriate behavior
  - Monitor and correct behavioral errors
  - Schoolwide approach to discipline for deliberate student misbehavior
  - A continuum of supports and interventions for increasingly challenging behavior
  - Procedures for monitoring and evaluating the effectiveness of behavioral interventions, using clear data, on a regular and frequent basis

Both students and staff can accurately describe, in their own words, the behavior system.

All school staff participates in some type of formal crisis intervention training.

There is a specific process in place to develop individual behavior support plans, as needed, and those plans are systematically implemented, coordinated, and evaluated. This must include a process to inform all facility staff of individual behavior support plans.
- 2 The behavior management system is more reactive and punitive than positive in nature and/or if there is a positive behavior management system in place, it is followed inconsistently. Individual student behavior is not systematically addressed. Staff is inconsistently trained in crisis intervention. The acuity of emergency interventions is intense and occurs frequently.
- 1 There is little or no consistent, schoolwide behavior management system. Individual student behavior management is ineffective. Staff is not systematically trained in crisis intervention. The school environment is chaotic, highly disruptive, and the safety of students and staff is regularly at risk.

## 8. The Facility Has a Schoolwide Positive Behavior Management/Support System in Place

### Examples of Documentation to Verify Rating:

- Policies/procedures around school/facility wide behavior management
- Evidence of training for staff regarding the philosophy/implementation of the behavior management system
- Posting of school rules in the halls, classrooms, cafeteria, rest rooms, etc.
- Evidence of training for students around positive expectations
- Examples of positive recognition of students and staff
- Policies/procedures around crisis intervention
- Certification of staff training in crisis intervention
- Samples of individual behavior plans and/or IEPs that describe modifications for individual students
- Policies/procedures and/or narrative notes to outline collaboration/communication between education, therapeutic, and residential staff around student behavior
- Examples of data collection/utilization to support the effectiveness of the behavior management system, which could include a review of critical incident reports, incident reports, time-out logs, point sheets, etc.
- During monitoring, students and/or staff may be asked to describe the behavior management system

### Notes:

## 9. The Facility Implements Transition Planning for Next Steps and Post-School Outcomes

### Rating Indicators:

4 All the criteria of #3 are met, plus the facility school collaborates closely with the administrative unit of residence, the family (broadly defined as the adult support system), placing agencies, and other agencies, such as adult services (if applicable) to design and implement realistic and effective transition plans. Educational and therapeutic/residential staff collaborate and use the transition continuum to provide direct instruction, guided practice, and reinforcement across facility settings and, when appropriate, in the community. Whenever possible, post-discharge data is collected as one tool for evaluating the effectiveness of the transition planning process.

3 Transition planning begins the day a student enters the facilities (please note that these first four bullets are appropriate for students of all ages):

- Clearly identify discharge plans—when the student will leave, where the student will live, where the student will attend school, what role the family will play, who the decision maker is surrounding discharge
- Identify the skills/knowledge that will enhance the student’s success in the next setting
- Teach skills and/or provide experiences that will increase the odds of success in the next setting
- Develop self-advocacy/self-determination skills
- For transition age students, defined in *ECEA Rules 4.03(6)(d)(i)* as “beginning with the first IEP developed when the child is age 15, but no later than the end of 9<sup>th</sup> grade, or earlier if deemed appropriate by the IEP team,” develop measurable post-school goals (career/employment, education/training, independent living skills) based on age-appropriate transition assessments and define transition services needed to assist the child in reaching those goals. (Note, this is a compliance issue for special education students, best practice for general education students, and will be evaluated as part of QS 7, *The School Complies with Special Education Requirements*.)
- For transition age special education students, the post-school goals should drive everything else on the IEP so as to present a “coordinated set of activities” for attainment of the post-school goals (also a special education compliance issue which will be monitored as described in QS 7, *The School Complies with Special Education Requirements*).

The facility participates in CDE transition training(s).

2 Transition planning is inconsistent. Discharge plans are often unclear and/or standardized, rather than individualized. (It is understood that often the decision for a student to discharge is made by the placing agency, and not the facility, meaning that there are occasions when no notice is given prior to discharge.) Post-school goals are present, but they are not measurable and/or they don’t coordinate with the rest of the IEP. Transition assessments are limited to interest inventories. Transition planning may be limited to either next steps or post-school goals, but seldom includes both. There is no consistent opportunity during the school day and/or in the residential setting (if applicable) to teach transition skills. A *Corrective Action Plan* is in place and monitored closely; technical support and assistance is offered.

1 There is little to no evidence of systematic transition planning.

### Notes:

## 9. The Facility Implements Transition Planning for Next Steps and Post-School Outcomes

### Examples of Documentation to Verify Rating:

- Policies/procedures around transition planning
- Review of IEPs/PLPs (reference to where they are filed)
- Evidence of attendance at CDE sponsored transition trainings
- Internal quality assurance procedures to verify that IEPs for transition age students meet State Performance Plan Indicator #13 (transition) requirements
- List of available transition assessments
- Evidence of collaboration with school districts, families (if applicable), and agencies (if applicable)
- Description of wraparound/after care services (if applicable)
- Course descriptions for classes that specifically address transition/independent living
- Identification of skills required for success in the next setting; i.e., school readiness, self-determination/self-advocacy, social skills, anger management, and a description of how those skills will be taught; i.e., in a separate school class, embedded across the curriculum, in the residential setting, via therapeutic groups, etc.
- Identification of work/study habits and/or competencies required for success in the next setting and to attain post-school success and a description of how those skills will be taught; i.e., in a separate school class, embedded across the curriculum, in the residential setting, via therapeutic groups, etc.
- Evidence of collaboration around transition between education and therapeutic/residential staff
- Collection and analysis of post-discharge data to help determine the effectiveness of transition planning
- Feedback from school districts regarding students who return to a public school

### Notes:

## 10. The Facility Provides a Comprehensive Academic Curriculum

### Rating Indicators:

- 4 All the criteria of #3 are met, plus the facility school is working within or toward a Response to Intervention (RTI) model, which includes ongoing progress monitoring of students to determine the effectiveness of the curriculum/instruction and adjustments as required. Data is also collected and analyzed to demonstrate student academic growth and inform school wide decisions on curriculum/instruction. Problem solving team(s) meet(s) regularly to analyze data. Students exhibit a high percentage of academically engaged time. Students are able to take advantage of community resources; if students are unable to access the community, efforts are made to bring guest speakers and other community resources to the facility.
- 3 The academic curriculum meets or exceeds the *Colorado Content Standards* and/or the *Access Skills*. The *Assessment Frameworks* are utilized to assure that course content is in alignment with CSAP. Reading (literacy), writing, and math curricula are evidence-based and implemented with fidelity. Curriculum and instruction is differentiated, if needed, to meet individual student needs. If academics are taught in a non-traditional fashion; i.e., service learning, outdoor/experiential education, those experiences are clearly linked to the standards. The facility school collaborates with the administrative unit of residence around credits and/or graduation requirements/diplomas. Transcripts (or a list of courses completed with a specific title and clock hours completed) are generated for all students to aid in transition. All Colorado students, grades 3-10, participate in CSAP/CSAPA. The facility takes advantage of professional development opportunities.
- 2 There is evidence of good teaching, but it is inconsistent and/or sporadic. Teachers tend to act independently rather than systematically follow a specific curriculum or scope and sequence. Little or no effort is made to collaborate with school districts around credits and/or graduation requirements. Little or no effort is made to intentionally engage students in CSAP/CSAPA. Descriptions of student progress are more anecdotal than evidence based.
- 1 There is little evidence of continuity or underlying structure to daily instruction. CSAP/CSAPA requirements/deadlines are not met in a timely fashion.

### Notes:

## 10. The Facility Provides a Comprehensive Academic Curriculum

### Examples of Documentation to Verify Rating:

- Course descriptions
- Alignment of course descriptions with *Colorado Content Standards, Access Skills, and/or Assessment Frameworks*
- List of curricula currently being implemented and verification that they are evidence based
- Sample teacher lesson plans
- Reference to professional development section for staff training specific to curriculum implementation
- List of staff professional affiliations; i.e., CEC, NCTE, NCTM
- List of academic assessments
- Samples of curriculum based measurement
- Description of student access to the community
- Description of how the community is brought to the facility
- Analysis of intake/discharge academic testing results
- Analysis of ongoing progress monitoring to determine the effectiveness of curriculum/instruction
- Evidence that data is being used to inform schoolwide and classroom decisions around curriculum/instruction
- Sample transcript form
- Evidence of communication with school districts regarding credits/graduation requirements/diplomas
- Evidence of accreditation by a private agency such as the North Central Association Commission on Accreditation and School Improvement (please note this is not a requirement to attain exemplary status)
- During classroom observations, the amount of time that students are academically engaged will be monitored
- Schedule of CSAP/CSAPA implementation
- Description of any activities to promote meaningful CSAP participation
- Analysis of CSAP data, including the percentage of students who complete a scorable assessment

### Notes:

## 11. The Facility Encourages Input From and Communication With Parents/ Guardians/ Educational Surrogate Parents

### Rating Indicators:

- 4 All the criteria of #3 are met, plus the facility school provides and/or communicates to parents (broadly defined) opportunities for parent education and parent involvement, typically in concert with the administrative units of residence/attendance.
- 3 If a student's parental rights have been terminated or parents cannot be located, the facility school will immediately contact the administrative unit of residence and inform them that an educational surrogate parent needs to be appointed (a facility must work with the administrative unit of residence—which in this instance will almost always also be the administrative unit of attendance). Parents/guardians/Educational Surrogate Parents are always invited to IEP meetings. Flexibility is provided to parents when scheduling IEP meetings. They are informed of their procedural safeguards. (These are special education compliance issues). They are regularly sent progress reports, report cards, etc. They are invited to observe classes, if interested, and/or participate in the facility school in other ways.
- 2 Parents are not consistently invited to IEP meetings. Flexibility in involving parents is not always present.
- 1 Little or no effort is made to involve families in the education of their children.

### Notes:

## 11. The Facility Encourages Input From and Communication With Parents/ Guardians/ Educational Surrogate Parents

### Examples of Documentation to Verify Rating:

- QS7, *The School Complies with Special Education Requirements* is where notification of IEP meeting sent to parent(s) will be evaluated
- Verification that the procedural safeguards notice is distributed to parents
- Policies/procedures regarding collaboration with administrative units of residence/attendance around appointment of an Educational Surrogate Parent
- Policies/procedures regarding collaboration with administrative units of residence around parent training
- List of parent trainings made available to families
- Samples of routine parent communication
- Examples of how family involvement is encouraged around education

### Notes:

## RATING INDICATORS

**Self  
Assessment  
Rating**

**CDE Rating**

1. **The Facility Maintains DHS Licensure and CDE School Approval**
2. **The Schedule for the Educational Program Is Comparable to a Public School**
3. **The Facility Purposefully Employs Appropriately Qualified Teachers**
4. **The Facility Employs Paraprofessionals**
5. **The Facility Employs (or Contracts with) a Special Education Director**
6. **Educational Staff Participates in Ongoing Professional Development**
7. **The School Complies with Special Education Requirements  
(to include compliance with State Performance Plan Indicator #13 as described in  
QS 9 and documentation of notification to parent(s)/ESP as described in QS 11)**
8. **The Facility Has a Schoolwide Positive Behavior Management/Support System in  
Place**
9. **The Facility Implements Transition Planning for Next Steps and Post-School  
Outcomes**
10. **The Facility Provides a Comprehensive Academic Curriculum**
11. **The Facility Encourages Input From and Communication with  
Parents/Guardians/Educational Surrogate Parents**

Which of the above standard(s) will guide your *School Improvement Plan* for the upcoming year?

What other sources will your facility use to guide your *School Improvement Plan*?

- Compliance issues/recommendations identified by CDE's monitoring report
- Accreditation (from other agencies) goals and objectives
- Title 1 goals and objectives
- Other \_\_\_\_\_
- Other \_\_\_\_\_