

**Kansas Integrated Accountability System**

**District Corrective Action Plan: IDEA Gifted File Review**

**DISTRICT/COOP:** *SAMPLE*

**DUE DATE:**

**DISTRICT CONTACT:**

**The district must submit a corrective action plan that addresses the root cause of all findings of noncompliance.**

**Instructions for Completing Corrective Action Plan**

<b>Root Cause Analysis</b>	Conduct root cause analysis using the following steps for the identified problem: (1) Identify and discuss data analyzed for determining root cause (i.e. data patterns including who, what and where) (2) What was the root cause of problem (i.e. why)? (3) Was root cause at procedural, policy and/or practice level?
<b>Strategy for Correcting the Problem Identified by the Root Cause Analysis</b>	Develop strategies for addressing the root cause of the problem: (1) Strategies must have a logical link to the identified root cause (i.e. professional development for staff, targeted technical assistance, sufficient supervision, revision of practices and related policies and procedures). (2) Identify resources needed for each strategy identified. (3) Include timelines for implementation of strategies.
<b>Method of Evaluation to Assure this Problem does not Reoccur</b>	Evaluate how effective the strategies were in correcting the problem. (1) Describe what data will be reviewed (i.e. record review) (2) Identify how often the data will be reviewed. (3) Describe how the data reviewed will indicate correction of the problem.
<b>Location of the Documentation of Actions Taken</b>	For KSDE monitoring purposes indicate where supporting documentation (e.g., root cause analysis, strategies and evaluation data) will be located.

<b>Statement of the Problem</b>	(Q 9)-The group responsible for determining the student's (initial or continued) eligibility failed to ensure that NONE of the following were the determinant factor(s): Lack of appropriate instruction in reading; lack of appropriate instruction in math; limited English proficiency 34 C.F.R. 300.306(b)(1)(i)-(iii); K.A.R. 91-40-10(c)
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<b>Root Cause Analysis</b>	<ol style="list-style-type: none"><li>1. Based on review of the current Multi-Disciplinary Team (MDT) evaluation report template and explanation for completion in district Policy, Procedure, Practice handbook (PPP), verification of the issue identified in files submitted for IDEA/Gifted file review, additional files pulled to include at least one current year evaluation conducted at each building and program, and following an interview with the coordinators of speech/language and school psychology, data was reviewed and analyzed to assess for patterns. Noncompliance with required documentation was noted within evaluation reports for three separate buildings within the district, with a total of six issues of self-reported noncompliance for this regulation.</li><li>2. The root causes for this issue were determined to be at both policy/procedure and provider/practice levels, specifically with lack of knowledge within the area of required documentation for evaluation reports, lack of quality/compliance checks for evaluations conducted, and lack of regular supervision and training for those evaluation teams lead by special education practitioners within the first three years of their professional practice.</li><li>3. It was determined that the <u>primary</u> root cause for this issue was at the provider/practice level, with lack of knowledge in appropriate evaluation planning and documentation, and a need for additional and ongoing training support for practitioners within the first three years of their employment within our district. Although there is a dedicated section on the evaluation /reevaluation report template to address the consideration of determinant factors within a new or continued eligibility discussion, the MDT teams at these three buildings failed to complete the documentation to demonstrate this team discussion occurred.</li></ol>
<b>Strategy for Correcting the Problem Identified by the Root Cause Analysis</b>	<ol style="list-style-type: none"><li>1. The strategies for correcting this issue are twofold, and include both short-term and ongoing implementation: scheduling frequent, tiered staff development and support for staff within the first three years of employment with district, and implementing a schedule to review and provide feedback and correction of issues identified for newer staff involved in leading and conducting evaluations/reevaluations.</li><li>2. Resources needed are materials developed for training in the area of evaluation/reevaluation including a checklist of all required components of an MDT report, time allocated for review with all staff annually at the back-to-school training (recorded and uploaded to the special education website), additional small group training support of “new” (defined as employed with district three years or less) staff through monthly support calls, and random reviews of evaluation reports by the coordinators of school psychology and speech/language. Every school psychologist and speech pathologist will have at least one randomly selected evaluation report reviewed annually; new staff will have two reports reviewed within the first nine weeks of the first semester. All school psychologists and speech pathologists will receive individual feedback, with additional support and training provided as needed, based on the initial reviews. Targeted staff training will be provided for evaluation teams at the three buildings with noncompliant evaluation reports by not later than the end of January. All issue of non-compliance for this regulation will be corrected through individual corrective action plans, implemented by no later than March 31..</li><li>3. Timeline for implementation of these strategies is outlined as above.</li></ol>

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<p><b>Method of Evaluation to Assure this Problem does not Reoccur</b></p>	<ol style="list-style-type: none"><li>1. In preparation for the updated data file pull conducted by KSDE (Spring of current year), the district will complete an internal file review of at least three evaluations (conducted between January and February) from each of the three buildings with noncompliance in this area. The files will be reviewed by the school psychologist and speech pathologist coordinators, who will review the MDT report for documentation that teams ensured that NONE of the following were the determinant factor(s) when making new or continued eligibility decisions: Lack of appropriate instruction in reading; lack of appropriate instruction in math; limited English proficiency.</li><li>2. Three MDT reports will be reviewed for each building by not later than February 28 and any issues of noncompliance will be addressed and corrected within ten days of the review.</li><li>3. 100 % accuracy in all files reviewed will be required as indicated above. Staff training, support of new staff, and monitoring of MDT content (for both quality and compliance) will be an ongoing focus within our special education strategic plan.</li></ol>
<p><b>Location of the Documentation</b></p>	<p>Documentation of implementation of this DCAP will be maintained on file at the central office at XYZ, Kansas. (ICAP corrections will be maintained within each student's evaluation file at the central office at XYZ, Kansas).</p>