

242 Student Assessment and Academic Prevention/Intervention Services

State-Mandated Assessments. The School shall administer State-mandated assessments (*e.* g., diagnostic assessments and achievement tests) to Students at the times designated by the State Board of Education. The School may, for medical reasons or other good cause, excuse a Student from taking a State-mandated assessment on the date scheduled, but any such assessment shall be administered to such excused Student not later than nine (9) calendar days after the last regularly scheduled test administration date. The School shall annually report to the State Board of Education, not later than June 30, the number of Students who have not taken one or more of the State-mandated assessments.

The Superintendent or his/her designee shall administer State-mandated assessments and submit the assessments to the entity with which the Ohio Department of Education contracts for the scoring of the tests, in accordance with Ohio law.

Beginning with students who enter the ninth grade for the first time on or after July 1, 2022, the parent or guardian of a student may elect not to have a nationally standardized assessment administered to that student. In that event, the School shall not administer the nationally standardized assessment to that student.

Diagnostic Assessments are assessments aligned with the Ohio academic content standards and model curriculum designed to measure student comprehension of academic content and mastery of related skills for relevant subject areas. Diagnostic assessments shall be administered by the School at least once annually for grades levels kindergarten through grade three as required from time-to-time by ODE to the following students:

- Any Student who transfers to the School if his/her former school did not administer each applicable diagnostic assessment to the Student in the current school year (must be administered within thirty (30) days from the date of transfer).
- Previously home-schooled Students enrolling at the School will be given a diagnostic assessment in order to determine their appropriate grade level placement.
- Each kindergarten student will complete the readiness assessment. The School shall administer the readiness assessment not earlier than the first day of the school year and not later than November 1 of that year, except that the language and reading skills portion of the assessment must be administered by September 30 of that year.
- As required pursuant to the Third Grade Reading Guarantee. See Policy 245, Promotion and Retention Policy.

Social Studies Assessments are to be administered in at least the fourth (4th) and sixth (6th) grades. Assessments used for such purposes shall be determined by the School, and may be formative or

summative in nature. The School shall not report the results of social studies assessments to the Ohio Department of Education.

Academic Prevention/Intervention Services. The School shall provide intervention services commensurate with the student's performance in pertinent subject areas to students who score below the proficient level on a reading, writing, mathematics, social studies, or science proficiency or achievement test or who do not demonstrate academic performance at their grade level based on the results of a diagnostic assessment.

If the School has a three-year average graduation rate of less than seventy-five percent (75%), then the School shall provide intervention services commensurate with the student's performance to any student whose results on the Ohio Graduation Test practice assessment indicate that the student is failing to make satisfactory progress toward being able to attain scores at the proficient level on the Ohio graduation tests. The School shall provide the intervention services prior to the end of the school year, during the summer following ninth grade, in the next succeeding school year, or at any appropriate combination of those times.

Testing Time Limitations. Starting in the 2017-2018 school year, the School shall ensure that no student is required to spend more than two percent (2%) of the school year, cumulatively, taking State-mandated or other School-required assessments or spend more than one percent (1%) of the school year, cumulatively, taking practice or diagnostic assessments. The School may exceed these limitations by resolution of the Board, provided that the Board first conducts at least one public hearing on the proposed resolution.

These time limitations do not apply to:

- Assessments for students with disabilities;
- Related diagnostics for students who did not obtain a passing score on the third grade English language arts achievement assessment;
- Substitute advanced placement or international baccalaureate examinations; or
- Additional assessments administered to identify a student as gifted.

Recordkeeping. The School shall keep records for each student that include the following:

- A unique state student identification code or student data verification code in accordance with R.C. 3301.0714(D)(2);
- A list or designation of which assessments are required and which assessments are not required;
- A list or designation of which assessments, required or not required, are taken and which

assessments are not taken during each assessment administration period;

- A score for each assessment taken, whether required or not required;
- Whether or not each student attained the requisite performance standard designated for each required assessment;
- What, if any, assessments must still be taken;
- Whether or not intervention must be provided; and
- For each test required for graduation, the date passed shall be recorded on the student's transcript. No information regarding a test not passed shall be on the student's transcript.

After the administration of any diagnostic assessment and upon a Parent's request, the School shall provide a Student's completed diagnostic assessment, the results of such assessment, and any other accompanying documents used during the administration of the assessment to the Student's Parent.

Retention. No results from required statewide assessments shall be used as the sole basis for determining whether or not to promote a student from grade to grade, except as specified in the Third Grade Reading Guarantee.

Summer Remediation Services. Instruction will be developed and offered by the School during the summer to any student who failed to score at the proficient level on a third grade reading achievement test or a diagnostic assessment.

Superintendent Duties. The Superintendent or his/her designee shall develop an assessment system that includes:

- The administration of state-mandated assessments;
- Regular assessments of student performance;
- Multiple and appropriate assessments that will be used to measure student progress;
- Assessment practices that conform to current professional standards for validity and reliability; and
- Sharing information with parents, students, and the community regarding assessment purposes and results.

The Superintendent or his/her designee shall also develop:

- Procedures for using diagnostic assessments to measure student progress in accordance with academic standards;
- A plan for the design of classroom-based intervention services to meet the instructional needs of individual students as determined by the results of the diagnostic assessments;
- Procedures for the regular collection of student performance data; and
- Procedures for using student performance data to evaluate the effectiveness of intervention services and, if necessary, to modify those services.

See Appendix 242-A Assessment and Academic Prevention/Intervention Services Procedures.

Students with Disabilities. All identified students with disabilities in the School shall be considered for participation in State-mandated testing. The extent of the student's participation shall be determined by the IEP/504 team. The IEP/504 plan developed for the student must specify the manner in which the student will participate in the state achievement assessments. All students shall participate in diagnostic assessments except those with significant cognitive disabilities or other disabilities as authorized by the Ohio Department of Education on a case-by-case basis.

This policy shall be reviewed and updated annually.

R.C. 3301.0710, 3301.0711, 3301.0715, 3301.0729, 3313.608, 3313.6012, OAC 3301-13 et seq. and 3301-35 et seq.

See **Appendix 242-A** Assessment and Academic Prevention/Intervention Services Procedures; Policy 242.2 Alternate Assessments for Students with Disabilities; and Policy 245 Promotion and Retention Policy. See also **Appendix 242-B** for Individual Student Record Keeping Chart.

276 Positive Behavioral Interventions and Supports, Seclusion, and Restraint

This policy governs the use of positive behavioral methods and emergency safety interventions including seclusion and restraint. Any use of emergency safety interventions that does not meet the requirements set forth below is prohibited.

Definitions

Aversive behavioral interventions: an intervention that is intended to induce pain or discomfort to a student for the purpose of eliminating or reducing maladaptive behaviors, including interventions such as: application of noxious, painful and/or intrusive stimuli, including any form of noxious, painful or intrusive spray, inhalants or tastes.

Behavior Intervention Plan: a comprehensive plan for managing problem behavior by changing or removing contextual factors that trigger or maintain the behavior, by strengthening replacement skills, teaching new skills, and providing positive behavior intervention and supports and services to address the behavior.

Chemical Restraint: a drug or medication used to control a student's behavior or restrict freedom of movement that is not (A) prescribed by a licensed physician, or other qualified health professional acting under the scope of the professional's authority under State law, for the standard treatment of a student's medical or psychiatric condition; and (B) administered as prescribed by the licensed physician or other qualified health professional acting under the scope of the professional's authority under State law.

De-escalation techniques: are strategically employed verbal and non-verbal interventions used to reduce the intensity of threatening behavior before a crisis situation occurs.

Functional Behavior Assessment (FBA): is a collaborative problem-solving process that is used to describe the function or purpose that is served by a student's behavior. Understanding the function that an impending behavior serves for the student assists directly in designing educational programs and developing behavior plans with a high likelihood of success.

Mechanical Restraint: (A) any method of restricting a student's freedom of movement, physical activity, or normal use of the student's body, using an appliance or device manufactured for this purpose; and (B) does not mean devices used by trained school personnel, or used by a student, for the specific and approved therapeutic or safety purposes for which such devices were designed and, if applicable, prescribed, including: (1) restraints for medical immobilization; (2) adaptive devices or mechanical supports used to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; or (3) vehicle safety restraints when used as intended during the transport of a student in a moving vehicle.

Parent: (A) a biological or adoptive parent; (B) a guardian generally authorized to act as the child's

parent, or authorized to make decisions for the child (but not the State if the child is a ward of the State); (C) an individual acting in the place of a biological or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child's welfare; (D) a surrogate parent who has been appointed in accordance with O.A.C. 3301-51-05(E); and (E) any person identified in a judicial decree or order as the parent of the child or the person with authority to make educational decisions on behalf of the child.

Physical Escort: the temporary touching or holding of the hand, wrist, arm, shoulder, waist, hip, or back for the purpose of inducing a student to move to a safe location.

Physical Restraint: the use of physical contact that immobilizes or reduces the ability of a student to move his/her arms, legs, body, or head freely. This does not include a physical escort, mechanical restraint, or chemical restraint, or brief, but necessary physical contact for the following purposes: (A) to break up a fight; (B) to knock a weapon away from student's possession; (C) to calm or comfort; (D) to assist a student in completing a task if the student does not resist the contact; or (E) to prevent an impulsive behavior that threatens the student's immediate safety.

Positive Behavior Interventions and Supports: (A) a school-wide systematic approach to embed evidence-based practices and data driven decision making to improve school climate and culture in order to achieve improved academic and social outcomes and increase learning for all students, and (B) that encompasses a wide range of systemic and individualized positive strategies to reinforce desired behaviors, diminishes reoccurrences of challenging behaviors, and teaches appropriate behavior to students.

Positive Behavior Interventions and Supports Leadership Team: the team at the School that plans, coaches and monitors implementation on PBIS. The team may include the a School administrator, teacher representatives across grade levels, and staff able to provide behavioral expertise, and other representatives identified by the district or school such as bus drivers, food service staff, custodial staff, and paraprofessionals.

Prone Restraint: physical or mechanical restraint while the student is in a face down position.

Seclusion: involuntary isolation of a student in a room, enclosure, or space from which the student is prevented from leaving by physical restraint or by a closed door or other physical barrier.

Student: a child or adult aged three to twenty-one enrolled in the school.

Student personnel: teachers, principals, counselors, social workers, school resource officers, teachers' aides, psychologists, or other School staff who interact directly with students.

Timeout: a behavioral intervention in which a student, for a limited and specified time, is separated from the class within the classroom or in a non-locked setting for the purpose of self-regulating and controlling his or her behavior. In a timeout, the student is not physically restrained or prevented

from leaving the area by physical barriers.

Creation of Positive Behavioral Intervention and Supports (PBIS)

The School shall establish an evidence-based school wide system of positive behavioral interventions and supports that will apply in all settings to all students and staff. The system shall include family involvement. The School's PBIS framework includes all of the following:

- A. A decision-making framework that guides selection, integration, and implementation of evidence-based academic and behavior practices for improving academic and behavior outcomes for all students;
- B. Data-based decision making to select, monitor, and evaluate outcomes, practices, and systems;
- C. Evidence-based practices along a multi-tiered continuum of supports;
- D. Systems that enable accurate and sustainable implementation of practices; and
- E. Progress monitoring for fidelity and target outcomes.

The School's implementation of its PBIS framework includes:

- A. Explicit instruction of school-wide behavior expectations;
- B. A consistent systems of acknowledging and correcting behaviors;
- C. Teaching environments designed to eliminate behavior triggers; and
- D. Family and community involvement.

Prohibited Practices

The following are **prohibited under all circumstances**, including emergency safety situations:

- A. Prone restraint;
- B. Any form of physical restraint that involves the intentional, knowing, or reckless use of any technique that:
 - i. involves the use of pinning down a student by placing knees to the student's torso, head, or neck;
 - ii. uses pressure point, pain compliance, or joint manipulation techniques; or
 - iii. otherwise involves techniques that are used to unnecessarily cause pain.
- C. Corporal punishment;
- D. Child endangerment as defined in R.C. 2919.22;
- E. Deprivation of basic needs;
- F. Seclusion or restraint of preschool students (if any);
- G. Mechanical or chemical restraints;
- H. Aversive behavioral interventions;
- I. Seclusion of students in a locked room or area; or
- J. Any physical restraint that obstructs the student's airway or impacts the student's

primary mode of communication.

Staff must:

- A. Be appropriately trained to protect the care, welfare, dignity, and safety of the student;
- B. Continually observe the student in restraint and/or seclusions for indications of physical or mental distress and seek immediate medical assistance if there is a concern;
- C. Use verbal and on-verbal communication strategies and research based de-escalation techniques in an effort to help the student regain control;
- D. Remove the student from physical restraint and/or seclusion immediately when the immediate risk of physical harm to self or others has dissipated;
- E. Conduct a de-briefing including all involved staff to evaluate the trigger for the incident, staff response, and methods to address the student's behavioral needs; and
- F. Complete all required reports and document staff observations of the students.

Restraint

Restraint may be used only in a manner that is age and developmentally appropriate, when there is an immediate risk of physical harm to the student or to others and no other safe and effective intervention is possible. Physical restraint must be performed by trained staff, except in the case of an unavoidable emergency situation.

Physical restraint may not be used for punishment, discipline, or as a substitute for other less restrictive means of assisting a student in regaining control, and should be used only as a last resort.

Seclusion

Seclusion may be used as a last resort for the student to regain control; it is age and developmentally appropriate; there is an immediate risk of physical harm to the student or others; and there is no other safe and effective intervention available.

Seclusion shall not be: used for punishment or discipline; as a substitute for an education program; as a substitute for inadequate staffing, or for staff training in PBIS frameworks and crisis management; for the convenience of staff; as a means to coerce or retaliate; in a manner that endangers the student; or, as a substitute for other less restrictive means of assisting the student in regaining control reflective of the cognitive, social, and emotional levels of the student.

The room or area used for seclusion cannot be locked, and must allow for the student to exit the area should the staff become incapacitated or leave the area. The room or area must also provide for adequate space, lighting, ventilation, and the ability to observe the student. The student must be under constant supervision by staff trained to detect indications of physical or mental distress that require removal and/or immediate medical assistance and who document their observations of the student.

Multiple Incidents and Functional Behavioral Assessment

For students eligible for special education per the Individuals with Disabilities Education Act (“IDEA”) or who have a Section 504 Plan, the School shall convene the IEP team or Section 504 team within ten (10) school days after the third incident of seclusion or physical restraining in a school year. The IEP team or Section 504 team will consider the need to conduct a functional behavioral assessment (“FBA”). If necessary, this FBA should be followed by a behavioral intervention plan (“BIP”), or an amendment to an existing BIP, that incorporates appropriate positive behavioral interventions.

Training and Professional Development

The School PBIS Leadership Team or other qualified training shall train all staff working with students at least every three (3) years on the requirements of this policy and shall keep written or electronic documentation of the type of training and the participants. Professional development will include:

- A. An overview of PBIS;
 - B. The process for teaching behavioral expectations;
 - C. Data collection;
 - D. Implementation of PBIS with fidelity;
 - E. Consistent systems of feedback to students for appropriate behavior and corrections;
- and
- F. Consistency in discipline and disciplinary referrals.

The School shall also ensure that an adequate number of personnel in each building are trained annually in crisis management and de-escalation techniques, as well as the safe use of physical restraint and seclusion, and that their training is kept current. The minimum training requirements include:

- A. Proactive measures to prevent the use of seclusion or restraint;
- B. Crisis management;
- C. Documentation and communication about the restraint or seclusion with appropriate parties;
- D. The safe use of restraint and seclusion;
- E. Instruction and accommodation for age and body size diversity;
- F. Directions for monitoring signs of distress during and following physical control; and
- G. Debriefing practices and procedures.

Training must include face-to-face training and allow for a simulated experience of administering and receiving physical restraint. The School shall maintain documentation that includes the following:

- A. The name and position of each person who completed training;
- B. The name, position, and credentials of each person who provided the training;
- C. When the training was completed; and
- D. What protocols, techniques, and materials were included in training.

Student personnel will be trained to perform the following functions:

- A. Identify conditions such as: where, under what conditions, with whom and why specific inappropriate behavior may occur; and
- B. Use preventative assessments that include at least the following:
 - i. A review of existing data;
 - ii. Input from parents, family members, and students; and
 - iii. Examination of previous and existing behavior intervention plans.

The School shall ensure that there is a support plan in place for substitute teachers if the individual needs assistance with PBIS or crisis management and de-escalation.

Required Data and Reporting

Staff must document each use of seclusion or restraint and report it to the building administration and the parent immediately. A written report of the incident must be created, given to the parent within twenty-four (24) hours of the incident, and placed in the student's file. This report is subject to the Family Educational Rights and Privacy Act.

The School shall report information concerning its use of seclusion and restraint annually to, and as requested by, the Ohio Department of Education.

The School shall give notice of this policy to parents annually, and shall post this policy on its website.

Monitoring and Complaint Procedures

The School shall review this policy on an annual basis.

A Parent may submit written complaints regarding an incident of seclusion or restraint to the School, and the Principal or his/her designee will investigate every complaint and make a reasonable effort to have an in-person follow-up meeting with the parent within 30 days of the complaint's filing.

Parents may choose to file a complaint with the Ohio Department of Education, Office of Integrated Student Supports, in accordance with the complaint procedures established by the Department.

O.A.C. 3301-35-15; R.C. 3319.46.