

POS
SHORT & LONG TERM ACTIONS
ST. VINCENT

General Benchmarks as a Result of Board Action on 6/27/06:

1) If an agency is marked unsatisfactory in one of the 4 indicator areas the following are the steps will be taken:

St. Vincent

The POS study group determined as a result of the evidence provided, on-site visit and additional documentation that St. Vincent submitted it is unsatisfactory in 2 indicator areas (Curriculum and Assessment and Outcomes). As a result of the board meeting on 6/27/06 the following benchmarks and timelines have been developed:

Increase the score of must bring the indicator area of Curriculum and Assessment & Outcome up to a minimum of 60% by Nov. 5. The agency must provide documentation to verify to the districts satisfaction attainment of each indicator marked “no” by the POS study group. If the agency meets 60% in all areas then a follow-up will be conducted two times each school year and follow the requirements approved in Motion 4.5 at the 6/27/06 Board Meeting. If agency does not attain the benchmarks, the committee will submit to the Board of Education a motion to consider terminating the contract.

The district will designate staff person(s) to conduct periodic on-site visits as needed. During on-site visits the SSD staff will have access to the facility, classrooms, staff, students, parents and all data requested for review.

The POS study group will review all documentation submitted and provide written feedback.

Appendix B-6: St. Vincent: Additional Documentation Submitted by 6/26/2006

4 Quality Indicator Areas	45 Quality Indicators	Met	6/8	6/26
Social Emotional Behavior (14)	01. There is evidence of FBA and BIP development and revision	No Yes		
	02. There is evidence of a behavior management procedures	Yes		
	03. School improvement plan in place	Yes		
	04. There is evidence of a data collection system for restraints	Yes		
	05. There is evidence of a data collection system for seclusions (isolated)	Yes		
	06. There is evidence of a data collection system for tracking and evaluating therapy minutes	No *	Yes	
	07. Additional staff are available if needed for crisis (para, behavior specialist, admin, etc)	Yes		
	08. There is evidence of a vision/mission for returning students to LRE	No Yes		
	10. Agency offers individual therapy for students	Yes		
	11. There is adequate space for de-escalation (time out)	Yes		
	12. Agency offers family/parent supports or therapy	No *	Yes	
	13. Agency has post-program follow up data that indicate generalization of learned skills	No	No*	
	14. Agency collaborates with outside resources (BJC, psychiatrists, DMH, etc)	No*	No*	
	15. Agency offers group therapy for students	No Yes		
	Staff (12)	16. Information from last DESE review submitted	No	Yes
17. The agency employs appropriately certified teaching staff for each classroom		No	Yes	
18. The agency employs certified administrator(s)		No	No*	
19. The agency has a professional development plan		No	Yes	
20. The agency has a student teacher ratio of 1:12 or less		Yes		
21. The agency has other certified related staff (OT, PT MT, SLP, etc)		No *	Yes	
24. The agency has a school board or the governing body		Yes		
25. The agency has a nurse or medication administrator policy/training		Yes		
26. There is evidence of a PBE process		No Yes		
Curriculum & Assessment (14)	27. Therapists are appropriately certified/licensed	No	Yes	
	28. Day students have access to a psychiatrist (direct services)	No	No*	
	29. Parents are notified if the classroom is not taught by certified staff	No	Yes	
	30. Curriculum includes specific, measurable goals for each subject at every grade level	No*	No*	
	31. Goals for graduates/high school graduation requirements	NA		
	32. Course offerings are aligned with the Show-Me-Standards or GLE	No	No*	
	33. Instructional strategies show evidence of differentiation for the individual learner	Yes		
	34. Staff is trained in the curriculum and classroom strategies	No*	No*	
	35. Technology is built into the curriculum and available in the classroom	Yes		
	36. Work-place/transition activities are built into the curriculum	Yes		
	37. There is organized remedial programs built into the curriculum	Yes		
	38. There is a process in place for review and revision of the curriculum	No*	No*	
	39. There is an ESY curriculum/program	Yes		
	40. Exploratory/Elective classes are offered for middle/high school students	No*	No*	
Outcome (5)	41. There is an organized social skills curriculum	No	Yes	
	42. Assessment plan is in place with tests listed and timelines for administration	Yes		
	43. Assessment plan includes how results are shared with SSD and parents	No	No*	
	44. Evidence supports students are making academic progress	Yes		
	45. Evidence supports students are making therapeutic progress	No*	No*	
	46. There is evidence of meaningful post-program follow-up	No	No*	
	47. Rate of return to LRE is equal to or greater than 20% each school year	No*	No*	
	48. Rate of return to LRE increases yearly	No *	Yes	

NA: quality indicator is not applicable to the agency

Met Quality Indicator Area: SEB	71%	86%
Met Quality Indicator Area: STAFF	33%	83%
Met Quality Indicator Area: CURRICULUM	46%	54%
Met Quality Indicator Area: OUTCOME	20%	40%
Met 45 Quality Indicators	48%	70%

* No changes were made on the rubrics after reviewing the additional documentation

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6/26/2006