



**National Commission  
for the Accreditation of  
Special Education Services**

**Standards  
for  
Accreditation**

## **INTRODUCTION**

The NCASES Standards are arranged thematically within sections (e.g., Finance, Facilities) and in some cases within subsections (e.g., Insurance, Financial Management) of those sections. Standards are composed of one or more Components, some of which may not be required of certain types of programs. The required Components are identified for each Standard. In order for a Standard to be scored as Compliant all of the required Components within it must be met. The outcome of the Site Review is the aggregate of all of the Standards that are scored as Compliant.

In the case of an agency undergoing an integrated NCASES/COA accreditation several NCASES Standards are relegated to the COA Site Reviewers and are not subject to review by the NCASES Site Review Team. These Standards are highlighted. Following each Component of these Standards there is an indication of the relevant, corresponding COA Standard.

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# NCASES STANDARDS

## FINANCE

### Insurance

**1) Standard:** The agency maintains insurance as protection for its governing body, staff, students/clients, funds, and properties.

**Required Components:** A, B, C

**Score for Standard 1:** Compliant \_\_\_\_\_ Noncompliant \_\_\_\_\_

A. The agency carries insurance that meets the following minimum requirements: (COA RPM 4.01)

- Fire and theft insurance to cover at least 80% of the assessed value of the agency's property
- Professional and facility liability coverage
- Workers' compensation coverage

**Suggested Evidence of Compliance:**

- Property assessment values
- Insurance documents
- Copies of applicable regulations

B. All persons delegated the authority to sign checks or manage funds are bonded at the agency's expense. (COA RPM 4.01)

**Suggested Evidence of Compliance:**

- List of persons approved to sign checks
- Document demonstrating bonding
- Staff interviews



- C. The agency's insurance program is evaluated annually to assure appropriate coverage. (COA RPM 4.01)

**Suggested Evidence of Compliance:**

- Documented review process
- Staff interviews

**Financial Management**

**2) Standard: The agency plans, prepares, and maintains an approved annual budget to manage and allocate agency funds to maintain fiscal solvency.**

**Required Components: A, B, C**

**Score for Standard 2:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency has financial policies and procedures. (COA FIN 1)

**Suggested Evidence of Compliance:**

- Written policies and procedures
- Staff interviews

- B. The agency has a mechanism for approving the annual budget as well as approving and tracking any revisions to the budget (for an agency with a governing board that board approves the annual budget and any revisions to the approved budget). (COA FIN 1)

**Suggested Evidence of Compliance:**

- Annual budget on file; with any tracked revisions to budget
- Executive meeting minutes
- Governing Body minutes (board for nonprofit, owner or owners for for-profit)
- Board member interviews
- Policy and procedures

- C. The agency engages in cost analyses at set intervals. The analysis includes: (COA FIN 7.03)

- An analysis of financial performance against budget projection with budget-to-actual variance analyses performed on interim financial statements of activities

- Cash reserves in alignment with an operating reserves policy
- Service revenues and actual service delivery costs
- An inventory of significant assets, including securities

**Suggested Evidence of Compliance:**

- Written policy and procedure
- Minutes from finance committee or similar group
- Staff interviews
- Financial statements
- Financial records demonstrating fiscal solvency

**Fiscal Accountability**

**3) Standard: The agency demonstrates fiscal accountability and follows Generally Accepted Accounting Principles (GAAP).**

**Required Components: A, B, C, D for nonprofit agencies; A & B for for-profit agencies**

**Score for Standard 3:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency completes an independent audit at least annually by a CPA, who attests to following GAAP. (COA FIN 6.02)

**Suggested Evidence of Compliance:**

- Annual audit
- Signed attestation from CPA
- Fiscal/administrative staff interviews

- B. The agency maintains policies and procedures for following GAAP. (COA FIN 7.01)

**Suggested Evidence of Compliance:**

- Written policies and procedures
- Fiscal/administrative staff interviews

- C. For an agency with a governing board the agency has a system for reporting financial statements to the board on, at minimum, a quarterly basis. (COA FIN 1)

**Suggested Evidence of Compliance:**

- Board minutes
- Staff interviews
- Board member interviews

D. For an agency with a governing board the auditor reviews the audit and management letter in executive session. (COA FIN 6.03)

**Suggested Evidence of Compliance:**

- Board minutes
- Annual financial statement and management letter
- Fiscal/administrative staff interviews
- Board member interviews

**FACILITIES**

**Information Technology (IT)**

4) **Standard: The agency demonstrates a systematic approach to network management, security, and maintenance.**

**Required Components: A, B, C**

**Score for Standard 4:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. The agency has policies and procedures that address network management, security, and maintenance.

**Suggested Evidence of Compliance:**

- Copies of policies and procedures
- Interview with IT staff or IT vendor(s)

B. The agency implements network management, security, and maintenance procedures.

**Suggested Evidence of Compliance:**

- Copies of network maintenance logs
- Interview with IT staff or IT vendor(s)

- Interview staff regarding network security (password policy, remote access, or other topics within the scope of policies and procedures)
- C. The agency has a disaster recovery plan that addresses the catastrophic loss of data or network services

**Suggested Evidence of Compliance:**

- Copy of disaster recovery plan or similar documentation
- Interviews with IT staff and senior administrators

**Physical Plant Safety**

- 5) **Standard: The agency's facilities, grounds, and equipment are structurally sound, functional, safe, and appropriate to the needs of its students/clients, staff, and visitors.**

**Required Components: A, B, C, D**

**Score for Standard 5:**      Compliant\_\_\_\_\_      Noncompliant\_\_\_\_\_

- A. The agency's buildings and grounds, offices and other structures have been reviewed by an independent third party and deemed safe to operate.

**Suggested Evidence of Compliance:**

- Copies of supporting documentation (e.g., occupancy certificates, fire inspection reports, etc.)
  - Staff interviews
  - Copies of applicable regulations
- B. Food preparation/storage areas are periodically reviewed and found to be safe or corrective actions completed.
- C. The agency's plumbing, ventilation, heating, cooling, lighting, pools and water temperature, elevators, and other fixtures and equipment are periodically reviewed and found to be safe, or corrective actions completed.

**Suggested Evidence of Compliance:**

- Copies of supporting documentation (e.g., health inspections, elevator certificates, boiler inspections certificate, etc.)
- Staff interviews

- Copies of applicable regulations
- D. The agency conducts a program of inspection and preventive maintenance at set intervals to ensure the soundness and safety of its premises, equipment, and fixtures as evidenced by records of all inspections and maintenance activities.

**Suggested Evidence of Compliance:**

- Staff interviews
- Maintenance logs
- Maintenance planning/inspection documentation
- Relevant policies and procedures

**Emergency Procedures**

- 6) **Standard: There are established written procedures for meeting all reasonably predictable types of emergencies such as meteorological, security, and geological. These procedures reflect the cognitive, physical, and behavioral needs of the students/clients served.**

**Required Components: A, B, C**

**Score for Standard 6:** Compliant \_\_\_\_\_ Noncompliant \_\_\_\_\_

- A. Emergency procedures are reviewed annually and any updated procedures are distributed to all staff.

**Suggested Evidence of Compliance:**

- Emergency procedure documents
- Staff acknowledgment of receipt

- B. The agency completes comprehensive staff and client training regarding emergency procedures at set intervals as defined by agency policy.

**Suggested Evidence of Compliance:**

- Training records
- Staff interviews

- C. The agency conducts emergency drills for all environments and shifts, including the evacuation from seclusion and/or exclusion areas, at set intervals.

**Suggested Evidence of Compliance:**

- Documentation of drills

**Emergency Services**

- 7) **Standard:** The agency follows all policies and written procedures for responding to student/client medical and psychiatric emergencies.

**Required Component: A**

**Score for Standard 7:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The medical and psychiatric emergencies policy and procedures contain logical and sequential steps for staff to follow including appropriate notifications and documentation.

**Suggested Evidence of Compliance:**

- Relevant policy and procedures
- Emergency response documentation that includes comprehensive documentation of the medical or psychiatric emergency to minimally include:
  - Known precipitants
  - Description of the emergency
  - Attempts to resolve
  - The outcome
- Documentation of notifications

**PLANNING/EVALUATION**

- 8) **Standard:** The agency has a systematic process for integration of technology to support administrative and education services.

**Required Components: A and B**

**Score for Standard 8:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency has a plan for how technology is integrated into administrative and educational services.

**Suggested Evidence of Compliance:**

- Copy of the Technology Plan or other document that details plans for technology integration
- Staff interviews
- Planning minutes or other documentation of the planning process

B. Agency implements technology integration plan(s).

**Suggested Evidence of Compliance:**

- Staff interviews
- Documentation of planned acquisition and installation of technology (e.g., invoices, service logs, etc.)
- Observation of technology being used as per plan

9) **Standard:** The agency utilizes a system for strategic planning.

**Required Components: A, B, C, D**

**Score for Standard 9:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. The strategic plan documents desired outcomes.

**Suggested Evidence of Compliance:**

- Copy of strategic plan

B. Governance approves the strategic planning at intervals as defined by agency policy.

C. Governance reviews progress towards achievement of the strategic plan at intervals as defined by agency policy.

**Suggested Evidence of Compliance:**

- Board and Strategic Committee Meeting minutes
- Board and staff interviews

D. The agency demonstrates progress towards the strategic plan outcomes, or, in the event that progress is not made, can demonstrate a system of reviewing and revising the strategic plan.

**Suggested Evidence of Compliance:**

- Strategic plan progress reports
- Staff interviews
- Stake holder interviews
- Board and Strategic Committee Meeting

**10) Standard: The agency utilizes an ongoing evaluation and quality improvement process for its programs and services and other operations.**

**Required Component: A**

**Optional Component: B**

**Score for Standard 10:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency uses an evaluation and quality improvement process that systematically collects, analyses, and reports data to determine program effectiveness and inform program improvement. The system minimally: (COA PQI 4.01-4.05; PQI 6.04)
- Establishes priority variables for data collection and analysis that include referrals, current students, student outcomes
  - Includes among its data collection methodology surveys of employees, students/clients, staff, and other relevant stakeholders
  - Establishes quality goals/objectives based on evaluation data
  - Shares evaluation findings and progress toward goals/objectives with its staff, governance structure, and identified stakeholders on a regular basis

**Suggested Evidence of Compliance:**

- Applicable policy or procedures
- Staff and stakeholder interviews
- Data samples
- Exit interview records
- Minutes of planning meetings and other documentation supporting the implementation of practices based on data collected
- Tracking reports or other supporting documentation

- B. Staff responsible for data collection are trained in data collection, analysis, and reporting methodologies or have access to adequate consultative resources. (COA PQI 3.01-3.03)

**Suggested Evidence of Compliance:**



- Personnel records
- Training logs
- Staff interviews

## RESEARCH

**11) Standard:** The agency has and implements a policy regarding conducting research within its services or utilizing its clients/students as subjects. An agency that prohibits research must also have a policy.

**Required Component: A**

**Score for Standard 11:** Compliant \_\_\_\_\_ Noncompliant \_\_\_\_\_

- A. The agency has and implements research policies and procedures to protect the right of individuals who may participate as research subjects that minimally: (COA ETH 6.01-6.03)
- Distinguishes explicitly between program/service evaluation and research,
  - Requires the use of an internal Institutional Review Board (IRB) that must review and approve all research prior to its initiation following a standardized review procedure,
  - Guarantees the individual’s right to refuse to participate or withdraw from participation without penalty,
  - Informs potential subjects of the potential risks and benefits of participation,
  - Requires that informed consent agreements articulate the research conditions, risks, and benefits, as well as the individual’s right to refuse to participate or continue participation without penalty, be signed by the individual, where capable of doing so, and by the individual’s guardian, where applicable,
  - Ensures participants’ confidentiality throughout the process, providing adequate data protection safeguards.

**Suggested Evidence of Compliance:**

- Research Policy/Procedure
- IRB handbook and/or minutes
- Records of past research
- Copies of signed Informed Consent Forms
- Staff and student/client interviews regarding research

## **ORGANIZATION**

**12) Standard: The agency is structured and governed to promote the provision of special educational and related services.**

**Required Components: A and B**

**Score for Standard 12:**      Compliant\_\_\_\_\_      Noncompliant\_\_\_\_\_

A. The agency defines its mission and fulfills it through a program of special educational and related services.

**Suggested Evidence of Compliance:**

- Up-to-date description of programs and services (website, brochures, newsletters, newspaper articles)
- Documentary evidence of operating authority to offer special education and related services (Articles of Incorporation, bylaws, organizational chart, strategic plan, Annual Reports, other legal documents, licenses, certifications, letters of compliance)
- Board minutes approving mission
- Published mission statement

B. Governance delegates responsibility for administration to a chief executive and evaluates his/her performance annually.

**Suggested Evidence of Compliance:**

- Job descriptions of chief executive
- Board minutes
- Letter of appointment/employment contract
- Chief executive's performance evaluation

## PERSONNEL

### Personnel Practices

#### **13) Standard: The agency utilizes approved and comprehensive personnel policies and procedures.**

**Required Components: A, B, C, D, E, F, G**

**Score for Standard 13:** Compliant \_\_\_\_\_ Noncompliant \_\_\_\_\_

- A. The agency demonstrates a systematic process that addresses non-discrimination in both hiring and employment practices based on race, color, religion, sex (including pregnancy, sexual orientation, or gender identity), national origin, age (40 or older), disability and genetic information (including family medical history).
- B. The agency actively recruits to promote the diversity of its staff. (COA HR 2.02)
- C. The agency administers its personnel practices in a non-discriminatory fashion. (COA HR 1.01)

#### **Suggested Evidence of Compliance:**

- Policy/procedure regarding hiring practices
  - Staff interviews
  - Examples of advertising in diverse publications, as well as other recruitment efforts
- D. The agency has a written personnel manual detailing personnel policies and procedures that is available and acknowledged by all staff. (COA HR 5.02)

#### **Suggested Evidence of Compliance:**

- Copy of the personnel policy and procedures manual (paper or digital)
  - Written documentation signed by each employee indicating they have read and agree to comply with the agency's policies/procedures
- E. Personnel policies are reviewed and approved by governance on, at minimum, a biennial basis. (COA GOV 6.02)

#### **Suggested Evidence of Compliance:**

- Minutes or other documentation of the governing unit’s biennial (at minimum) approval of the policies and procedures
- Relevant documentation of policy review

F. The agency has written policies and procedures relating to conflict of interest, favoritism, nepotism, and undue influence in its personnel practices. (COA HR 5.02)

**Suggested Evidence of Compliance:**

- Policy and procedure documents containing the following elements:
  - Explicit definition of what constitutes a conflict of interest, favoritism, or undue influence -including conflict of interest, favoritism, or undue influence connected to the employment of individuals related to or personally connected to board members or staff members in capacities of supervision, administration, or decisions that pertain to personnel practices or decisions
  - Grievance
  - Procedure for reviewing and resolving any potential conflict of interest, issue of favoritism, or undue influence that an employee has indicated
- Staff interviews
- Board/owner(s) interviews
- A procedure for any potential conflict of interest or issue of favoritism or undue influence that may apply to their employment

G. The agency has a fully implemented grievance policy and procedure. (COA HR 5.02)

**Suggested Evidence of Compliance:**

- The policy/procedure
- Staff interviews

**Personnel Records**

**14) Standard: The agency maintains a personnel record for each employee that is systematically organized.**

**Required Component: A**

**Score for Standard 14:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. The agency has personnel records for all employees that include the following:  
(COA HR 7.01)

- Job application and/or resume
- Current job description, including classification of position (professional, paraprofessional, related service, contractual, administrative, etc.)
- Copies of required licensure or certification
- Transcripts or other verification of completion of educational requirements for the position as outlined in the job description
- Letters of reference/reference check summary
- Criminal background checks/clearance (as required by state or local regulations)
- Emergency contact information
- Salary history
- Training history
- Acknowledgement of personnel policies and procedures or handbook
- Annual evaluation(s)
- Performance related correspondence

**Suggested Evidence of Compliance:**

- Copy of written policy/procedure regarding the organization of personnel records
- Personnel records reviewed for required elements

**15) Standard: The agency demonstrates procedures and practices to ensure that personnel records are maintained in a secure environment.**

**Required Components: A and B**

**Score for Standard 15:** Compliant \_\_\_\_\_ Noncompliant \_\_\_\_\_

A. The means of securing the personnel records is clearly stated within written procedures.

**Suggested Evidence of Compliance:**

- Policy/procedure for securing personnel records

B. The area in which personnel records are stored is secured against loss, destruction, and/or unauthorized access.

**Suggested Evidence of Compliance:**

- Observation of the space that is used to store personnel records to ensure that records are locked or otherwise secured (e.g., locked files, locked rooms, or other security systems)

**16) Standard: The agency consistently implements policies and procedures regarding maintenance of personnel records.**

**Required Components: A, B, C, D**

**Score for Standard 16:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. There are policies in place that clearly identify the procedures for releasing information about employees, the staff members of the agency (by position) that control access to the information about employees, and who may release information about employees.

**Suggested Evidence of Compliance:**

- Copy of relevant policies
- Relevant supporting documentation
- Staff interviews
- Human resource manager interview

- B. Documentation of any release of information about employees is maintained in writing and available for review.

**Suggested Evidence of Compliance:**

- Relevant supporting documentation
- Staff interviews
- Human resource manager interview

- C. There are policies in place on employee access to their own personnel records, including how they may comment on their review of the record.

**Suggested Evidence of Compliance:**

- Policy statement on employee access to their own personnel records
- Relevant supporting documentation (e.g., a form that indicates when the employee has reviewed the personnel record with space for comments by the employee)
- Staff interviews
- Human resource manager interview

- D. There are policies and procedures in place addressing the maintenance and destruction of records post-employment.

**Suggested Evidence of Compliance:**

- Policy statement regarding personnel record maintenance post-employment
- Documentation of the destruction of records

**Job Descriptions/Staff Qualifications**

**17) Standard: The agency has a written job description for each position.**

**Required Components: A, B**

**Score for Standard 17:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. Each job description contains the following: (COA HR 5.01)
- The qualifications, including specialized knowledge or skills, education, certification, or license required for the position
  - The physical requirements for the position
  - Experience required for the position
  - Essential job functions
  - Clear lines of supervision and support

**Suggested Evidence of Compliance:**

- Copies of job descriptions
  - Organizational chart
  - Staff interviews
- B. Each employee is provided with a job description, and there is evidence of him/her having reviewed it. (COA HR 3.02)

**Suggested Evidence of Compliance:**

- Form signed by employees indicating they have reviewed the requirements for their respective positions
- Supervision notes describing review of job description
- Checklist of materials reviewed by employees
- Staff interviews

## Staff Development

**18) Standard: The agency demonstrates a systematic and comprehensive program of staff orientation and development.**

**Required Components: B and either A or C**

**Score for Standard 18:**      Compliant\_\_\_\_\_      Noncompliant\_\_\_\_\_

A. Staff development is driven by an annual needs assessment and/or by external mandates.

**Suggested Evidence of Compliance:**

- Copies of meeting minutes that summarize staff development needs assessments results and recommendations
- Copies of any external staff development mandates

B. All new staff receive orientation training that includes:

- Orientation to the agency's mission, policies, and procedures
- Position specific training curriculum/program
- Training specific to the agency and/or required by external mandates

**Suggested Evidence of Compliance:**

- Staff orientation agenda/program
- Position specific orientation/program
- Staff orientation policy and procedures
- Staff orientation training records
- Staff interviews

C. The agency maintains a comprehensive and ongoing staff development program that contains the following essential elements:

- Emphasis on awareness, sensitivity, and appreciation of the perspective of students/clients
- Opportunities for staff to improve knowledge and skills needed to enhance service delivery to students/clients, including developments, changes, and trends in the fields of respective positions
- Utilization of a variety of training methods and resources, including those available to the region and/or community (e.g., area experts, local colleges/universities, online sources, internet sources, Skype, etc.)



**Suggested Evidence of Compliance:**

- Professional development agenda or calendar for the current or last school year
- Sample agenda or handouts from sessions to demonstrate variety of topics
- List of resources and partners used in professional training sessions, especially colleges/universities offering courses or sessions on topics related to the services delivered by the agency
- Interviews with staff about usefulness of professional development training
- Documentation of staff attendance in professional development sessions
- Any other supportive documentation (e.g., invoices, registration forms, certificate of attendance, etc.) that indicate participation in training activities

**COMMUNITY**

**Community Identification and Education**

**19) Standard:** The agency demonstrates a commitment to educating and providing information about its services to the community(ies) in which it operates.

**Required Component: A**

**Score for Standard 19:** Compliant \_\_\_\_\_ Noncompliant \_\_\_\_\_

- A. The agency offers an ongoing supply of information about its services to the community and related agencies to assure and increase their general understanding of the agency’s mission, purpose, population, functions, and services. (COA GOV 4.01)

**Suggested Evidence of Compliance:**

- Clear statement identifying the agency’s community(ies), including related agencies
- Information distributed to the public that includes its mission and information about the services offered
- Documentation of community education initiatives
- Interviews with community representatives, including representatives of related agencies
- Media articles, announcements, and advertisements

## Community Planning

**20) Standard: The agency establishes relationships with others in the community (relevant agencies, organizations, and individuals) and responds to their input to coordinate programs and/or services.**

**Required Component: A**

**Score for Standard 20:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. There are community partnerships and relationship-building initiatives that demonstrate:

- The contributions of related agencies, organizations, and members of the community
- Planning with the community is ongoing; the community and agency representatives participate in planning
- That the agency incorporates community input into its planning

**Suggested Evidence of Compliance:**

- Schedules and agendas of community meetings
- Notes about outcomes of meetings with community representatives
- Interviews with community and agency representatives
- Community feedback
- Examples of agency decisions that incorporate community input

## ADMINISTRATION

### Ethical Conduct

**21) Standard: The agency has a written code(s) of ethics for the operation of its programs and services.**

**Required Components: A, B**

**Score for Standard 21:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. The code of ethics, approved by governance, is made known to all employees, contractors, volunteers, and board members and provided in writing.

**Suggested Evidence of Compliance:**

- Documentation of codes of ethical conduct
  - Personnel files/documentation of dissemination
- B. The code of ethics is provided in writing to all employees, governance, volunteers, and contractors.

**22) Standard: The agency implements policies and procedures regarding conflict of interest.**

**Required Components: A, B, C, D, E in nonprofit agencies; A through D in for-profit agencies**

**Score for Standard 22:** Compliant \_\_\_\_\_ Noncompliant \_\_\_\_\_

- A. The agency’s governance, voluntary board, staff, and consultants are not favored in applying for or receiving the services of the agency. In the event that there is a related party transaction, there should be evidence of several documented bids that are retained as evidence. (COA ETH 5.02)

**Suggested Evidence of Compliance:**

- Staff interviews
  - Copies of bid policy and bid documentation
- B. The agency neither receives nor provides payment (or other consideration) from or to another provider of services for the referral of any applicant or student/client to or from such provider of services. (Note: This prohibition does not preclude one organization from contracting with and compensating another for the provision of services.) (COA ETH 5.02)

**Suggested Evidence of Compliance:**

- Staff interviews
- C. The agency has a mechanism for reviewing and approving directed referral of its applicants, students/clients, or their families to any private practice in which its staff or consultants may be engaged. Such approval is based on the best interests of the applicant, student/client, or family, who is notified in advance of the relationship between the practitioner and agency. (COA ETH 5.02)

**Suggested Evidence of Compliance:**

- Policy statements

- Staff interviews
- D. A policy exists that requires that where a conflict of interest might exist for board members, staff, and consultants, there is prior written disclosure, and such persons exempt themselves from voting or otherwise influencing results for personal gain or to advantage any entity at the expense of the agency. (COA ETH 2.03)

**Suggested Evidence of Compliance:**

- Relevant conflict of interest policy
  - Evidence of implementation when applicable (e.g., personnel file memos, board minutes, contracts, etc.)
- E. In the case of nonprofit agency board members, staff, and consultants have no direct or indirect financial interest in the assets, leases, business transactions, or professional services of the agency. (COA ETH 2.02)

**Suggested Evidence of Compliance:**

- Conflict of interest policy
- Signed receipt of conflict policy by board members, staff, and consultants
- Staff interviews

**Administrative Authority**

**23) Standard: The chief executive has administrative authority of the agency under broad direction of the agency's governance.**

**Required Components: A, B, C, D, E**

**Score for Standard 23:**

- A. The chief executive plans and coordinates with governance the development of policies and procedures governing the agency's program of services.

**Suggested Evidence of Compliance:**

- Executive meeting/board meeting minutes
  - Interview with board members and chief executive
- B. The chief executive plans with the agency's governance, coordinates its work, assists its members and committees in the performance of their duties, and ensures that it is kept informed on matters affecting the agency's finances, operation, and services.

**Suggested Evidence of Compliance:**

- Review documents
  - Interview board members and chief executive
  - Review board minutes
- C. The chief executive is authorized to employ and discharge staff and to otherwise administer the agency's personnel policies.

**Suggested Evidence of Compliance:**

- Copy of policy or chief executive's board/owner approved job description
- D. The chief executive assumes no outside duties that interfere with his/her responsibility for administration of the agency.

**Suggested Evidence of Compliance:**

- Board/owner(s) and chief executive interview
  - Staff interviews
- E. The chief executive's responsibilities include oversight of the development, coordination, and administration of the agency's program of services. These responsibilities are delegated to staff members who are qualified by position and by professional education and experience to assume them.

**Suggested Evidence of Compliance:**

- Interviews of chief executive and board members/owners and administrative staff
- Review chief executive job description
- Review organizational chart

**Accountability**

**24) Standard: There are clear lines of accountability and authority across the agency.**

**Required Components: A, B**

**Score for Standard 24:**

- A. The agency clearly delineates and makes known to all staff the lines of accountability and authority.

**Suggested Evidence of Compliance:**

- Organization chart with review date
- Interviews with chief executive and staff to verify accuracy and compliance

B. Information and concerns are communicated among all levels of staff.

**Suggested Evidence of Compliance:**

- Interview appropriate staff member(s)

**Policies and Procedures**

**25) Standard: The agency maintains policies and procedures that govern its program of services.**

**Required Components: A, B, C, D in nonprofit agencies; A through C in for-profit agencies**

**Score for Standard 25:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. The policies and procedures of the agency are formulated and maintained in a way that promotes effective administration.

**Suggested Evidence of Compliance:**

- Review written document regarding formulating policies and procedures
- Minutes of governing body meetings

B. The agency's policies are clearly differentiated from the procedures employed to implement them.

**Suggested Evidence of Compliance:**

- Review policies/procedures

C. Policies and procedures are formalized and readily available for the guidance of the governing body, agency staff, cooperating agencies, and other interested groups or individuals, as appropriate.

**Suggested Evidence of Compliance:**

- Review policy and procedures
- Interview staff to verify their knowledge of location and accessibility

D. In nonprofit agencies policies and policy revisions are approved by the governing board.

**Suggested Evidence of Compliance:**

- Review minutes showing board approval of the agency’s policies and procedures
- For agencies that are for profit, self-study should indicate “not applicable”

**ADMISSION AND EXIT PROCEDURES**

**26) Standard: The agency clearly defines the types of students/clients served and the process by which students/clients are admitted into the program.**

**Required Components: A, B**

**Score for Standard 26:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. Admissions criteria and procedures include the following essential components:

- A policy of administering its admissions practices and delivery of services to students/clients without regard to age, sex, sexual orientation/preference, race, ethnicity, nationality, or disability consistent with the mission and population served
- Admission criteria that clearly define who the agency serves
- Activities to be completed, responsibilities of personnel, time-lines, procedures, and assessment to determine eligibility
- Process to follow to obtain previous records and assessment protocols should previous records be unavailable

**Suggested Evidence of Compliance:**

- Admissions policy documents; including statement of non-discrimination
- Demographic information of students/clients and community
- Checklist and evidence of timelines followed within a client record
- Step-by-step description of the admissions process, person(s) responsible for each step or task, timeline for completion
- Phone logs or other documentation that demonstrate compliance with all admissions protocols
- Documentation of attempts to obtain previous records

- Assessments used to determine eligibility, if previous records unavailable
- B. For all declined admissions a reason is documented and the appropriate entity is notified.

**Suggested Evidence of Compliance:**

- Examples of acceptance and rejection letters
- Referral/intake records

**Exit Procedures**

**27) Standard: The agency clearly defines the process by which students/clients are discharged.**

**Required Component: A**

**Score for Standard 27:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency utilizes clearly defined criteria and procedures for student/client exit or discharge that include written notification to appropriate entities with reason for exit or discharge.

**Suggested Evidence of Compliance:**

- Procedure
- Written exit or discharge procedures/checklists to be followed
- Examples or templates of exit/discharge letters that include statement identifying reason for exit or discharge
- Evidence of team meeting minutes when exit or discharge decision is made

**CONFIDENTIALITY**

**28) Standard: The agency’s education program and services policies include clearly defined procedures governing the collection, protection, maintenance, and dissemination of student/client information.**

**Required Component: A**

**Score for Standard 28:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency implements policy that minimally addresses the following:



- Internal dissemination of confidential student/client information to staff, including exceptions to confidentiality, which is shared with appropriate entities
- The requirement that signed releases be obtained for communications with other organizations involved in the student's/client's treatment or education
- Media postings and school releases that contain personal student/client information, images, identification or work products
- That appropriate entities are informed of the use of audio or visual recording methods for any purpose
- Forms or permissions identifying to whom the information is being released, signed by the appropriate authority (parent, guardian, adult student/client)

**Suggested Evidence of Compliance:**

- Policy
- Documentation of examples of policy in practice
- Staff interviews

**STUDENT/CLIENT RECORD**

**29) Standard: The agency maintains a record (hardcopy or electronic form) for each student/client. The records are clear, concise, legible, and chronologically complete from student/client entrance to exit.**

**Required Components: A, B, C**

**Score for Standard 29:**      Compliant\_\_\_\_\_      Noncompliant\_\_\_\_\_

A. Student/client records include:

- Access log
- Demographic data
- The IEPs or analogous document
- Transition plan where appropriate
- Current and past assessment data
- Treatment and educational progress notes
- Correspondence
- Discharge plan where appropriate

**Suggested Evidence of Compliance:**

- Review of select student/client records

- B. The agency has a policy that establishes procedures to allow the student/client, or where applicable, the guardian, to review the record and to request amendment to or correction of inaccurate information.

**Suggested Evidence of Compliance:**

- Review of select student/client records
- Access logs documenting the student/client name, name and affiliation of person accessing record, date of access, or time, if applicable, brief statement of purpose

- C. A complete record of discharged students/clients is maintained by the agency, unless agency policy indicates files of discharged students/clients are returned to the referral source and will not be maintained by the agency.

**Suggested Evidence of Compliance:**

- Review of select records of discharged students/clients
- Agency policy

**30) Standard: The agency’s student/client recording and record-keeping practices have procedural, physical, and technological safeguards to prevent unauthorized access to information.**

**Required Component: A**

**Score for Standard 30:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency implements policies and procedures for access and storage of student/client records to prevent unauthorized access.

**Suggested Evidence of Compliance:**

- Copies of policies and procedures regarding the access and storage of student/client records
- Access logs, if applicable
- Copies of applicable regulations

## RELATED SERVICES

### 31) **Standard:** Related services are delivered to support educational programs.

**Required Components:** A, B, C, D, E

**Score for Standard 31:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. Related services are specified in each student's/client's Individualized Education Program (IEP)/Individualized Service Plan (ISP) in terms of duration, frequency, and modality of service.

**Suggested Evidence of Compliance:**

- IEP/ISP review
- Staff interviews

- B. The delivery of related services is documented.

**Suggested Evidence of Compliance:**

- Service log review
- Review of other tracking documentation
- Planning and Placement Team (PPT) minutes
- Staff interviews

- C. Related service provides work in collaboration with educational and, where applicable, residential personnel.

**Suggested Evidence of Compliance:**

- Case management notes
- Minutes from meetings
- Other documentation which illustrates collaboration
- Staff interviews

- D. When the agency contracts with external vendors/service providers to deliver related services, there is documented proof of required licensure and certification to deliver such services.

**Suggested Evidence of Compliance:**

- Evidence of current credentials for each external service provider

- E. Related services provides, at minimum, annual progress summaries to appropriate entities.

**Suggested Evidence of Compliance:**

- Progress reports
- Conference summary forms
- Phone logs
- Other documentation that indicates that progress has been shared
- Staff interviews
- Parent interviews
- Referral source interviews

**32) Standard: Educational, clinical, behavioral, and/or therapeutic evaluations are conducted according to established policy and procedures, and results are used to support student/client educational program.**

**Required Components: A, B, C, D, E**

**Score for Standard 32:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. All evaluations used by the agency are authorized through written policy, procedures, or protocols and are conducted according to these protocols.

**Suggested Evidence of Compliance:**

- Copy of agency's policy, procedures, or protocols regarding evaluations
  - Supporting documentation
- B. All evaluations are discussed with, and approved by, the student's/client's parent, guardian, and/or adult student/client.

**Suggested Evidence of Compliance:**

- Evaluation meeting minutes
  - Signed evaluation plan or signed evaluation release form
  - Staff and parent interviews
- C. Evaluations include validated instruments and/or processes.

**Suggested Evidence of Compliance:**

- Evaluative instrument(s) documentation

- D. The results and recommendations of all evaluations are shared, either in writing or verbally, with staff that has programmatic responsibilities for the student/client.

**Suggested Evidence of Compliance:**

- Meeting minutes
- Written reports with cover letter indicating recipient(s)
- Interviews with staff, parents, and emancipated adult student/client

- E. Evaluation recommendations are implemented within the program.

**Suggested Evidence of Compliance:**

- Staff interviews and other supporting documentation

## MEDICATION ADMINISTRATION

Agencies have 4 options for policy that address the administration of student/client medication within its program(s).

- **Option 1** — the agency explicitly prohibits the administration of medications within its programs.
- **Option 2** — the agency allows for self-administration of medication within its program(s).
- **Option 3** — the agency only allows specific staff to administer medications within its program(s).
- **Option 4** — the agency allows for both self-administration and staff administration of medications within its program(s). Procedures must address the criteria used to determine when self-administration versus staff administration is appropriate.

**33) Standard:** The agency has policies and procedures that, in accordance with applicable state regulations, explicitly address the options for administration of student/client medication within its program(s).

**Required Components:** A, B, C

**Standard Score:** Compliant \_\_\_\_\_ Noncompliant \_\_\_\_\_

- A. The agency has policies and procedures which explicitly address the options for administration of student/client medication within its program(s).

**Suggested Evidence of Compliance:**

- Policy statement (Options 1-4)
- Copy of all applicable state regulations (Options 3 & 4)

B. The agency has written procedures to support its administration of medications policy.

**Suggested Evidence of Compliance for Option 1:**

- No evidence of procedures required

**Suggested Evidence of Compliance for Option 2:**

- Copy of written procedures detailing:
  - The process for, and documentation of, determining a student's/client's ability to safely self-medicate along with procedures to annually review student's/client's current ability to safely self-medicate
  - Where and how medications are safely stored
  - The response to incorrect administration of medication
  - Guardian or conservator's right to approve self-medication for a non-emancipated adult

**Suggested Evidence of Compliance for Option 3:**

Copy of written procedures detailing:

- The staff that are authorized to administer medication
- The procedures for securing medications for specific students/clients as prescribed by an individual authorized to do so in accordance with state regulations
- The methodology used to insure "right student/client-right medication-right dosage-right time"
- The methodology used to track medications administered
- Where and how medications are safely stored; a double lock protocol is the minimal acceptable definition of "safely stored"
- The response to incorrect administration of medication
- Maintenance of records for the disposal or return of discontinued, out-of-date, and unused medications and containers following procedures that are compliant with applicable state and local regulations
- Access to medical personnel available to consult regarding medication administration, as needed

**Suggested Evidence of Compliance for Option 4:**

- Copy of written procedures detailing all the components from Options 2 and 3
- C. The agency’s policy and procedures for the administration of medication are consistently implemented.

**Suggested Evidence of Compliance for Option 1:**

- Staff/student/client/parent interviews

**Suggested Evidence of Compliance for Option 2:**

- Records documenting a student’s/client’s right and ability to self-medicate
- Observe medication storage
- Staff/student/client/parent interviews

**Suggested Evidence of Compliance for Option 3:**

- Medical administration logs, review medication disposal logs
- Interviews of medical staff or staff authorized to administer medications to ascertain compliance with procedures
- Observation of medication storage

**Suggested Evidence of Compliance for Option 4:**

Same as for Option 3 and

- Records documenting a student’s/client’s right and ability to self-medicate
- Observation of medical storage for self-administered and staff administered medications.

**BEHAVIORAL AND AFFECTIVE PRACTICES**

**34) Standard: The agency implements a systematic approach to behavior support.**

**Required Components: A, B**

**Score for Standard 34:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency ensures that behavior supports are designed and implemented to ensure the safety and dignity of the individual.

B. The behavior supports systems are written, taught, and reviewed with the staff and students/clients in detail at the start of the program, are administered effectively throughout the year and contain the following key components/elements:

- Allows for flexibility in response to individual student/client needs and is readily apparent and consistently implemented by all staff
- Rules and behavior expectations are appropriate to the population served and stated within a positive framework

**Suggested Evidence of Compliance:**

- Relevant policy and procedures
- Written behavior systems
- Observations
- Staff and student/client interviews
- Samples of behavior support plans

**35) Standard: Individual behavior plans are based on analysis of the student’s/client’s behavioral support needs and utilized in accordance with an established and observable hierarchy of interventions used in the agency.**

**Required Components: A, B**

**Score for Standard 35:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. There is a policy and procedure in place for determining when a behavior support plan is warranted and utilizes the least restrictive/least invasive behavioral interventions sufficient to achieve the student’s/client’s safety, behavioral, and instructional goals.

**Suggested Evidence of Compliance:**

- Copy of policy and procedures pertaining to behavior support plans
- Clear statement that lists the hierarchy of interventions used in the agency
- Staff interviews
- Samples of behavior support plans

B. The staff uses principles of behavior support effectively with students/clients, as appropriate to the population served. This includes:

- Highly individualized plans that reflect an awareness of the cognitive level and frustration level of a student/client when developing interventions



- Continually supporting the student/client to a higher level of performance.
- Use of data to assess the effectiveness and make necessary modifications.

**Suggested Evidence of Compliance:**

- Observation
- Student/client/staff interviews
- Samples of behavior support plans

**36) Standard: If a program utilizes restraint and/or seclusion, the program follows established best practices including having documented policies and procedures regarding the training of staff and application of these interventions. An agency that prohibits the use of restraint and/or seclusion must have a policy stating that the agency does not practice restraint and/or seclusion.**

**Required Components: A, B**

**Score for Standard 36:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. Personnel authorized to use restraint and seclusion are required to undergo agency and other required training prior to initiating these interventions including a refresher course at least annually.

**Suggested Evidence of Compliance:**

- Written protocols, policies, and procedures regarding the use of restraint and seclusion
- Training program/curriculum and assessment tool if applicable
- Training records
- Copy of training certificates
- Staff interviews
- Observations
- Copies of applicable regulations

- B. Restraint and/or seclusion is implemented in accordance with the following principles:
- Every effort is made to prevent the use of restraint and seclusion
  - Mechanical restraint is never used
  - Physical restraint is only used in a situation where the student/client’s behavior poses imminent danger of serious physical hardship and all other less intrusive methods have failed
  - Restraint and/or seclusion is never used as punishment
  - Restraint and/or seclusion is never done in a way that restricts breathing

- Restraint and/or seclusion repeatedly used as an intervention for a student/client triggers a review of strategies to address behavior
- Every instance of restraint and/or seclusion is continuously and visually monitored to ensure appropriate use and safety of all involved
- Parents/guardians are informed of the use of restraint and/or seclusion
- Parents/guardians are aware of policies regarding restraint and/or seclusion

**Suggested Evidence of Compliance:**

- Written protocols, policies, and procedures regarding the use of restraint and seclusion
- Staff interviews
- Observations
- Incident reports
- Copies of applicable regulations

**CURRICULUM**

**37) Standard: The agency has a comprehensive, written curriculum that addresses all of the program’s specific areas of instruction or training and meets state or local requirements, if applicable.**

**Required Components: A, B**

**Score for Standard 37:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency has a comprehensive, written curriculum that addresses the program’s primary areas of instruction or training.
- The specific abilities and educational needs of the students/clients at each grade or developmental level taught, including academic, personal, social, behavioral, and career independence content where appropriate
  - Content required for graduation and/or successful completion of identified program

**Suggested Evidence of Compliance:**

- Copies of curriculum
- Staff and student/client interviews
  - Staff describe how they facilitate student/client self-awareness
  - Students/clients indicate their self-awareness of abilities, feelings, and needs related to work and independent daily living
- Classroom observations

- Student/client transcripts documenting accrual of credits toward graduation where appropriate
- Copies of applicable requirements

B. The agency has policies and procedures guiding the selection, development, and implementation of curricula.

**Suggested Evidence of Compliance:**

- Copy of relevant policies and procedures
- Staff interviews

C. The curriculum is modified as necessary to remain congruent with needs defined by the formal individual student/client plans (e.g., IEP).

**Suggested Evidence of Compliance:**

- Classroom observation
- Examples of curricular modifications
- Student/client education plans identifying requirements for curriculum modification
- Staff interviews—staff can describe how they modify curriculum to address academic, social, behavioral, communication, developmental, and technology needs of student/client

**38) Standard: Within the program’s curriculum there is an observable and documented scope and sequence for planning instruction.**

**Required Component: A**

**Score for Standard 42:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. The agency demonstrates the following essential elements to ensure systematic instructional planning as described in the curriculum:

- Instructional objectives are aligned to student/client IEP or analogous documents and the curriculum
- Lesson and unit plans for all content include:
  - Identification of mastery levels for individual students/clients
  - Identification of multi-modal opportunities for learning – visual, auditory, kinesthetic, tactile – as appropriate to the population and the content
  - Plans for the use of technology to support (not replace) instruction
  - Plans for the use of differential instruction; including a statement of modifications and accommodations for individuals, as appropriate

- Plans for appropriate grouping
- Plans for pacing of the lesson so that students/clients remain engaged

**Suggested Evidence of Compliance:**

- Unit and lesson plans and other applicable instructional planning documents aligned to the curriculum
- IEP document samples
- Interviews with instructional and administrative staff
- Student/client interviews

**CLASSROOM MANAGEMENT**

**39) Standard: The instructor provides a structured and predictable environment that promotes positive behaviors.**

**Required Component: A**

**Score for the Standard 39: Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_**

- A. The instructor promotes positive behaviors as demonstrated by all of the following:
- Provides/maintains structure and routine within the educational setting while demonstrating the ability to react spontaneously to unexpected occurrences
  - Exercises appropriate visual monitoring and verbal cues
  - Develops a climate of respect, encouragement, and group cohesion at a level consistent with the needs of the population served
  - Develops a sense of group cohesiveness among the students/clients in a class
  - Provides students/clients with frequent, consistent, and meaningful praise and encouragement
  - Responds to behavioral outbursts in a calm, controlled, and consistent manner

**Suggested Evidence of Compliance:**

- Interviews with students/clients
- Instructional and administrative staff
- Classroom observations
- Examples of lesson plans
- Supervision logs
- Student/client/staff interviews
- Student behavior documents

## **INSTRUCTIONAL PROCESS INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

For agencies servicing clients to whom IDEA does not apply (clients over the age of 21, infant/toddler programs, etc.), while the requirement to write a formal IEP does not apply, for the purpose of NCASES a comparable individualized service or treatment plan that meets similar criteria should be developed. In the following standards, IEP refers to the overarching plan that establishes goals and objectives for a client in the program.

**40) Standard: The agency maintains and implements an IEP, or an analogous document, for each classified or 504 eligible student/client.**

**Required Component: A**

**Score for Standard 40:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency has a policy for the development, maintenance, and implementation of an IEP, or analogous document, that contains all required elements:
- A statement of the individual's present levels of educational performance
  - A statement of annual goals, including short-term instructional objectives
  - A statement of the specific special education services, programmatic components and related services to be provided to the client
  - The extent to which the individual will be able to participate in regular educational programs
  - A specified timeline for initial development, initiation of services, annual review (or more frequent as required by law or regulation) and revision of individual education plans
  - Appropriate objective criteria and evaluation procedures and schedules for determining whether the short-term instructional objectives are being achieved
  - A transition plan for students/clients covered under IDEA
  - A family service plan for infant/toddler or adult programs only

### **Evidence of Compliance:**

- Policy statement with provisions for involving parents, guardians, and referral source in the development and review of Individualized Education Programs
- Individualized Education Programs, or analogous documents with review dates
- Minutes of all Planning and Placement Team meetings, or analogous documents

**41) Standard: There is an observable and documented cycle of instructional planning, instructional delivery, and evaluation of instruction.**

**Required Components: A, B**

**Score for the Standard 41:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. The agency demonstrates the following essential elements to ensure systematic instructional planning:

- Instructional objectives are aligned to student/client Individualized Education Programs (or analogous documents) and/or approved curriculum
- Lesson and unit plans for all content include
  - Identification of mastery levels for individual students/clients
  - Multi-modal opportunities for learning – visual, auditory, kinesthetic, tactile – as appropriate to the population and the content
  - Use of technology to support (not replace) instruction, provide students/clients with access to curriculum, and maximize independent function
  - Differentiation; including a statement of modifications and accommodations
  - Effective pacing designed for the accomplishment of instructional and course goals

**Suggested Evidence of Compliance:**

- Unit/lesson plans and other applicable instructional planning documents
- IEP document samples
- Interviews with instructional and administrative staff
- Student/client interviews

B. Instructional delivery demonstrates at least half of the following essential elements:

- Instructors provide homework only as appropriate to the developmental and behavioral level of the student/client
- Instructors adapt, accommodate, and modify instructional methods, assignments, and tests to different learning styles and paces
- Instructors use simple, precise, direct language appropriate to the age, grade, and developmental level of the student/client to introduce and implement lessons
- Instructors use appropriate modeling techniques (visual and verbal) to introduce and demonstrate concepts and materials that are part of lessons

- Instruction connects to prior lessons/units and to future levels of content instruction
- Instructors match teaching and testing activities to instructional objectives to promote optimal levels of achievement
- Instructors group students/clients to maximize instruction and learning; one-to-one, small group
- Instructors use high interest materials and examples to support student/client engagement
- Appropriate remediation is provided for those needing additional assistance, including individual assistance by the instructor or by another staff member qualified to provide remedial assistance
- Homework is assigned to support and reinforce learning, and appropriate and timely feedback is provided
- Instructors provide:
  - Introductory overview of the day's lesson
  - Clear written and verbal directions
  - Appropriate repetition of key points and directions
  - Appropriate questioning techniques
  - Appropriate use of technologies
  - Ongoing check of student/client understanding
  - Smooth transitions among instructional activities
  - Appropriate summary of the lesson
  - Adequate and varied forms of positive reinforcement of student/client effort

**Suggested Evidence of Compliance:**

- Interviews with instructors/administrators
- Observation of instruction using Classroom Observation Form
- Observation of computers, tablets, iPads, calculators, interactive whiteboards, software, and/or apps, etc. available for client use during instruction
- Lesson Plans
- Interview with students/clients
- Program description of instructional methods, accommodations, and modifications

**42) Standard: Students/clients are regularly assessed to evaluate progress and effectiveness of instruction.**

**Required Components: A, B**

**Score for Standard 41:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. Instructors maintain day-to-day records of student/client progress in each curriculum area.

**Suggested Evidence of Compliance:**

- Anecdotal notes, charts, worksheets, or other instructional records
- Interviews with instructors/administrators

- B. Students/clients who are not making the expected progress receive further evaluation that may lead to alternative instructional approaches or therapeutic intervention with resulting program changes.

**Suggested Evidence of Compliance:**

- Instructional/administrative interviews
- Student/client interviews
- Policy/procedures manual section on assessment of progress
- Copies of applicable assessment timeline regulations
  - Assessment section of student/client records demonstrating documentation of progress
  - Assessment protocols and tools -- formal, informal, criterion-referenced, and benchmark
  - Notes any meetings held to discuss assessment data and resulting decisions that may impact placement or the student/client plan

**43) Standard: The agency utilizes the IEP, ITP, analogous document, or curriculum to monitor and document student/client progress.**

**Required Components: A**

**Standard Score:**    Compliant\_\_\_\_\_    Noncompliant\_\_\_\_\_

- A. Instructors collect data on progress as outlined in the IEP for individual students or as delineated in the curriculum.

**Suggested Evidence of Compliance:**

- Data are collected and documented in a manner that is easy to interpret progress
- Interviews with instructors/administrator



**44) Standard:** The agency implements policies and procedures that insure the integrity of the instructional process.

**Required Components:** A, B

**Score for Standard 44:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. Instructional plans are systematically reviewed and approved by a school administrator, or designee.

**Suggested Evidence of Compliance:**

- Documentation of policies and procedures pertaining to instructional planning
- Documentation of review of instructional plans
- Administrative/instructional staff interviews

- B. The school administrator or supervisor provides systematic instructional observations with associated feedback at least two times per academic year for each instructional staff member.

**Suggested Evidence of Compliance:**

- Documentation of policy and procedures pertaining to the provision of instructional feedback including but not limited to formal and informal observations
- Documentation of observations with associated feedback conducted according to policy
- Performance evaluations of instructional staff
- State guidelines

**RESIDENTIAL**

In agencies that provide a residential program whose residents also receive educational services the following standards apply.

**45) Standard:** Daily communication occurs between the educational program staff and residential staff regarding student/client performance.

**Required Components:** A, B

**Score for Standard 45:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. There is purposeful daily communication as students/clients transition between the educational and the residential programs.

**Suggested Evidence of Compliance:**

- Staff interviews confirm purposeful communication occurring during times of transition
- If available, written documentation that reflects transition communication

- B. There is a systematic process in place for sharing client centered information between the educational and the residential programs.

**Suggested Evidence of Compliance:**

- Policy/procedure for sharing information between programs
- Documentation of communication
- Minutes for team meetings

**46) Standard: Educational and residential staff works collaboratively to identify and plan for those activities that can occur throughout the student's/client's day.**

**Required Components: A, B, C, D**

**Score for Standard 46:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. When collaboratively identified, residential staff provides adequate time and support to students/clients for the completion of homework as applicable.

**Suggested Evidence of Compliance:**

- Documented evidence of collaboration exists in the development of homework assignments
- Staff interviews
- Observation of support provided for homework completion

- B. The educational and residential programs collaborate to address the extracurricular needs of students/clients.

**Suggested Evidence of Compliance:**

- Documented collaborative planning regarding extracurricular activities
- Written schedule of extracurricular activities

- C. Life-skills training is consistently provided between the school and residential program.

**Suggested Evidence of Compliance:**

- Documented collaborative planning regarding functional skills training
- Written schedule of functional life skills training
- Staff and student/client interviews

- D. Opportunities for community involvement are a part of the student's/client's program and are made available as appropriate.

**Suggested Evidence of Compliance:**

- Staff and student/client interviews
- Written schedule of community activities

**47) Standard: Education program staff and residential staff are knowledgeable about and support the services offered in each program.**

**Required Components: A, B**

**Standard Score:** Compliant \_\_\_\_\_ Noncompliant \_\_\_\_\_

- A. Staff can articulate the services provided in each program.

**Suggested Evidence of Compliance:**

- Interviews with staff confirm that there is a system of ongoing communications in place
- Interviews of education program staff confirm that they can articulate the services provided by the residential staff
- Interviews of residential staff confirm that they can articulate the services provided by the residential staff

- B. Staff in each program supports the services of the other.

**Suggested Evidence of Compliance:**

- Staff interviews confirm specific example of support rendered
- Documentation reflects circumstance of joint problem solving and problem resolution

**48) Standard: Service policies are consistent throughout the programs.**

**Required Components: A, B**

**Score for Standard 48:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. Policies and procedures implemented across educational and residential programs are not in conflict.

**Suggested Evidence of Compliance:**

- Staff and student/client interviews
- Review of policies and procedures across programs

- B. Behavioral support policies and procedures are consistently implemented throughout the agency.

**Suggested Evidence of Compliance:**

- Staff interviews
- Observations
- Policies and procedures that cross programs
- Documentation of behavioral supports confirm consistent implementation in both the educational and residential programs

**VOCATIONAL EDUCATION AND JOB PLACEMENT SERVICES**

**49) Standard: For agencies providing vocational services, the agency provides comprehensive vocational education programming to prepare student/client for the world of work.**

**Required Components: A, B**

**Score for Standard 49:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

- A. The agency has a comprehensive vocational education curriculum containing the following essential training elements:

- Work readiness skills
- Opportunities for job sampling
- Job seeking skills
- Job maintenance skills

- Procedures for evaluating a student's/client's progress and readiness for employment

**Suggested Evidence of Compliance:**

- Vocational training curriculum
- Vocational training schedule of job sites
- Observation of vocational training
- Vocational training records
- Vocational assessment policy and procedures
- Vocational assessment tools
- Vocational/administrative staff interviews
- Student/client interviews

- B. The agency maintains and implements an individualized vocational plan or analogous document that includes the following:

- Vocational assessments
- Identification of vocational interests, preferences, and employment goals
- Identification of optimal work environment and conditions
- Work history
- Education and training history
- Employment skills
- Transportation needs
- Impact of paid employment on any federal and state benefits the client is receiving
- Workplace accommodations, assistive technology, and other support services needed to sustain employment
- Timeframe for achieving goals

**Suggested Evidence of Compliance:**

- Vocational planning policy and procedures
- Student/client vocational plans or analogous documents
- Student/client vocational evaluations
- Vocational counseling notes
- Vocational and administrative staff interviews

## **JOB DEVELOPMENT AND PLACEMENT**

**50) Standard:** The agency implements comprehensive job development and placement procedures to assist students/clients in securing employment aligned with their vocational goals, preferences, skills, and needs.

**Required Components: A, B**

**Score for Standard 50:** Compliant\_\_\_\_\_ Noncompliant\_\_\_\_\_

A. Job development and placement procedures include:

- Policy/procedures for building and sustaining employment networks
- Policy/procedures for providing education to employers about the agency's services, applicable federal, state, or employer tax credits, disability awareness, accommodations, and strategies for building successful employment opportunities for individuals with disabilities within the workplace
- Policy and procedures for conducting worksite analyses including work conditions, job duties and expectations, potential barriers to employment, identification of natural supports
- Negotiating job accommodations as appropriate for the student/client and employment situation
- Procedures for defining lines of communication with employment placements

**Suggested Evidence of Compliance:**

- Job development policy and procedures
- Job placement policy and procedures
- Documented evidence of sensitivity training and other education provided to employers
- Job development notes/system for tracking job development activities
- Vocational planning/counseling meeting records for students/clients
- Examples of student/client job descriptions
- Documentation of worksite analyses
- Interviews with job development staff administration
- Student/client interviews
- Employer interviews

B. Students/clients receive on the job training and post-placement support as defined in their vocational plan:

- Orientation to the work environment, workplace culture, job duties and expectations, compensation and benefits, and other position specific orientation as dictated by the employer
- Training on how to complete all work tasks
- Assistance integrating into the workplace culture
- Use of natural supports, compensatory strategies, utilization of workplace accommodations, and assistive technology as needed
- Identification of short and long-term support needs
- Identification of intervals for follow up assessment and communication with employers to assess the continued appropriateness of the placement, need for additional support, and opportunities for growth and advancement

**Suggested Evidence of Compliance:**

- Job coach/ training and assessment records
- Documentation of employer contact and meeting minutes
- Documentation of vocational planning meetings discussing continued appropriateness of the worksite and adjustment to vocational plans as needed
- Interviews with vocational staff and administration
- Student/client interviews

## GLOSSARY

**Behavior Supports:** A systematic strategy or intervention designed to help an individual self-regulate his/her behavior, whether or not it is a proprietary model.

**Bonded:** The maintenance of a fidelity bond or other type of insurance to protect against monetary losses resulting from the fraudulent acts performed by employees or others engaged by the organization.

**Community:** The social context within which an agency offers its services, as defined by geography, demographic group, service population, stakeholders and consumers, potential partners, etc.

**Curriculum:** The framework of an educational program. It ultimately determines the skills and competencies that student/client/students will learn. While subject matter, methods, and techniques may vary, the delivery of curriculum requires balancing the demands of traditional subject matter and methods with the unique needs of the individual learner.

**Governance:** The entity that has ultimate accountability for the operations of the organization, normally the owner(s) in a for-profit organization and the board of voluntary trustees or directors in the case of a nonprofit organization.

**Job Development:** The ongoing acquisition or refinement of skills that are necessary to perform one's job.

**Job Placement:** The service that educational institutions offer to help individuals find work.

**Mechanical Restraint:** The use of any device or equipment to restrict a student's freedom of movement. This term does not include devices implemented by trained school personnel, or utilized by a student that have been prescribed by an appropriate medical or related services professional and are used for the specific and approved purposes for which such devices were designed, such as: Adaptive devices or mechanical supports used to achieve proper body position, balance, or alignment to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; Vehicle safety restraints when used as intended during the transport of a student in a moving vehicle; Restraints for medical immobilization; or Orthopedically prescribed devices that permit a student to participate in activities without risk of harm.

**Physical Restraint:** A personal restriction that immobilizes or reduces the ability of a student to move his or her torso, arms, legs, or head freely. The term physical restraint does not include a physical escort. Physical escort means a temporary touching or holding of the hand, wrist, arm, shoulder, or back for the purpose of inducing a student who is acting out to walk to a safe location.



**Related Services:** Clinical services are those services which provide therapeutic supports so that the student/client can benefit from his/her educational program. These therapeutic services can include, *but are not limited to*, speech therapy, occupational therapy, physical therapy, art therapy, music therapy, ABA therapy and counseling.

**Research:** Research includes all forms of internal or external research involving service recipients, except internal program evaluation and outcomes research, and educational projects carried out by students and interns as part of their professional training.

**Seclusion:** The involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving. It does not include a timeout, which is a behavior management technique that is part of an approved program, involves the monitored separation of the student in a non-locked setting, and is implemented for the purpose of calming.

**Vocational Education:** Vocational Education is secondary or post-secondary training that provides practical experience in a particular field or trade.

*The following are operational definitions of policy versus procedure. These definitions are applied to Standards interpretation and scoring regardless of how an applicant agency labels or identifies a document that describes required actions or processes.*

**Policies** are statements that set limits or parameters for significant organizational decisions. They are generally in the form of a concise but broad statement that has widespread application. Policies are non-negotiable, change infrequently, and address major operational issues.

**Procedures** articulate the process and sequence for accomplishing controls and operationalizing policies. They provide step-by-step descriptions of the tasks required to support and carry out organizational policies. Procedures are usually highly detailed descriptions of processes that are narrow in focus and subject to change.