**Self-Assessment: Discipline**

***Directions:***  *Review your district’s written procedures for Discipline. Determine if administrators and teachers are complying with all the components of the Discipline Regulations (i.e. Parent notification, manifestation determinations, change of placement). Determine if students with disabilities of all racial and ethnic groups, and particularly students of the identified group(s), are disciplined equitably.* ***Complete the following checklist pertaining to discipline procedures and gather the evidence to support your answers****.*

**District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

| ***Discipline******Arkansas Procedural Requirements and Program Standards:*** [***Section 11 (Discipline)***](https://arksped.k12.ar.us/rules_regs_08/1.%20SPED%20PROCEDURAL%20REQUIREMENTS%20AND%20PROGRAM%20STANDARDS/11.00%20DISCIPLINE%20PROCEDURES.pdf) | ***Rate Your Compliance:*** |
| --- | --- |
| ***Yes*** | ***No*** |
| 1. The district notifies parents on the date of which the decision is made to make a removal that constitutes a change in placement of a child with a disability because of violation of a code of child conduct. Parents receive copies of *Your Rights Under IDEA*. (11.03.6)
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| 1. School personnel consider unique circumstances on a case by case basis when determining a change of placement is appropriate for a child who violates the student code of conduct. (11.03.1)
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| 1. Did school personnel consider any unique circumstances on a case-by-case basis when determining whether the change in placement, consistent with the other requirements of this regulation, was appropriate for a child with a disability who violated the student code of conduct?
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| 1. Was a Manifestation Determination Review meeting held within 10 days of a decision to change the placement of a child with a disability who violated the student code of conduct and for each disciplinary removal thereafter.
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| 1. Did the Local Educational Agency (LEA), the parent, and the members of the child's IEP Team, convene to review all relevant information - the child's IEP, any teacher and related service provider observations, and any information provided by the parents to determine if the conduct in question was caused by, or had a direct and substantial relationship to, the child’s disability?
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| 1. If the IEP Team makes a determination that the conduct was a manifestation of the child’s disability, the IEP Team conducts a functional behavioral assessment (FBA), unless the district had conducted a FBA before the behavior that resulted in the change of placement occurred, and implement a behavioral intervention plan. (11.05.4.1.A.1)
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| 1. If the student already has a behavioral intervention plan, the IEP Team reviews the plan and its implementation and modifies the plan, as necessary, to address the behavior that resulted in the disciplinary change of placement. (11.05.4.1.A.2)
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| 1. The district ensures that the IEP for a child with a disability whose behavior impedes the child’s learning or that of others addresses the child’s behavioral needs. The IEP team should consider the use of positive behavioral interventions and supports and other strategies to address the behavior in the IEP or behavior intervention plan*.* (8.07.1.2A)
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| 1. The district ensures that parents of children with disabilities who disagree with any decision regarding placement or the manifestation determination have an appeal process. (11.0.6)
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| 1. For children with disabilities removed >10 days, the district provides educational services so as to enable the children to continue to participate in the general educational curriculum, although in another setting, and to progress toward meeting the goals set out in the Individualized Education Program. (11.02.1.1)
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| 1. The district ensures that special education services are provided by qualified personnel.
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| ***Sampling of Documentation to Support Compliance Ratings:*** | ***Sampling of Evidence to Consider:*** |
| --- | --- |
| ***Look at:*** * Policies and procedures to support this requirement
* Professional learning materials, agendas, sign-in sheets
* Supervision and monitoring plan
* Technical assistance meeting minutes, walk-through data
* School-wide discipline plan, discipline logs
* District Code of Conduct
* Discipline files, suspension records
* Student Information System showing enrollment and attendance reports
* Sampling of student records for students suspended > 10 days (e.g., Behavior Intervention Plans, Functional Behavioral Assessments, parent notification, Manifestation Determination documentation, Notice of Action, etc.)
* Comprehensive Data Analysis Sheet
* Data analysis of student referrals
* Discipline Records Review Checklist
* Success Gap Rubric
 | ***Look for evidence that:*** * Personnel can outline a plan to review discipline data at varied levels.
* Manifestation determination meetings are conducted in accordance with the discipline regulations.
* Behavior Intervention Plans are developed and based on Functional Behavioral Assessments, as appropriate.
* Parents receive notification as outlined in the Discipline Regulations.
* Behavior Intervention Plans include targeted behaviors, measurable goals, evidence of positive behavioral interventions and supports, and data collection methods.
* Students with disabilities, suspended greater than ten days, continue to receive services.
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**Self-Assessment Team Member Sheet**

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| --- | --- |
| District:  | Click here to enter text. |
| Address:  | Click here to enter text.  |
| Superintendent: | Click here to enter text. |
| Special Education Director:  | Click here to enter text. |
| Contact E-mail Address:  | Click here to enter text. |
| Contact Phone: | Click here to enter text. |

**Team Members Who Participated in the Self-Assessment Review Process:**

*A team of stakeholders selected by the district must participate in the self-assessment process. When assembling this team, the district should consider including regular and special educators and team members representing administration, professional learning, parents, curriculum and instruction, school psychology, student support services, and school improvement.*

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**Summary of Verification of Accuracy**

*The superintendent is required to certify the information prior to submission.*

I verify that the information submitted in this report is accurate and is based upon the findings from the Self-Assessment of District Policies, Procedures, and Practices.

**Superintendent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**