**Massachusetts Department of Elementary and Secondary Education**

75 Pleasant Street, Malden, Massachusetts 02148-4906 Telephone: (781) 338-3000

TTY: N.E.T. Relay 1-800-439-2370

April 8, 2014

Mr. Lou Giramma, Executive Director

Institute of Professional Practice, Inc.

270 Airport Road

Fitchburg, MA 01420

Re: Approved Private School Program Review Final Report

Institute of Professional Practice, Inc.

The Durham Center for Education Day Program

Dear Mr. Giramma:

Enclosed is the Department of Elementary and Secondary Education (“Department”) Approved Private Special Education School Program Review Final Report containing findings based on the onsite visit conducted in your program.

This report includes detailed findings for each program area describing the determinations of the Department about the implementation status of each requirement. For requirements not found to be fully implemented, you must propose to the Department corrective actions to bring those areas into compliance with respective statutes or regulations. You are encouraged to incorporate the corrective action activities into your program’s improvement planning process, including your professional and paraprofessional staff development plan.

You should access the CAP format directly by going into WBMS and clicking on the area on the menu bar entitled “CAP/Progress Reports”. The due date for your response is **May 13, 2014,** which istwenty business days from the Final Report date. We appreciate your program’s cooperation throughout the Program Review process and look forward to reviewing your response.

Once the Department receives your Corrective Action Plan, we will review and respond to each part of it. Where we disapprove any part of your proposed corrective action, we will provide an explanation and substitute our own order of corrective action, with required timelines. Progress reports may be requested, at dates to be determined by the Department, for any corrective action, and any CAP may be verified onsite. At all these key junctures the Department will provide you with its written review, the status of any outstanding items, requests for additional information and the necessary forms, electronically via WBMS and/or email.

Please include with your program’s CAP a separate statement signed by you and the chairperson of your Board of Directors. This statement should contain:

1. a description of the steps the program is taking to make the Department’s findings available to staff, parent advisory groups and the general public; and

1. an assurance that once the CAP has been reviewed by the Department the corrective action approved or ordered by the Department will be implemented by the approved or ordered dates of completion.

**Please note that all programs must demonstrate resolution of noncompliance identified by the Department as soon as possible but in no case later than one year from the issuance of the Department’s Final Program Review Report.**

The approval certificate we are now issuing shall remain in effect for three (3) years and will be contingent upon continued compliance with all regulations contained within 603 CMR 28.00 “Special Education Regulations” and 603 CMR 18.00 “Program And Safety Standards For Approved Public Or Private Day And Residential Special Education School Programs.” The Department may change this approval status at any point during this three-year period if circumstances arise that warrant such a change.

**Please be advised that the attached Department Approval Certificate must be conspicuously posted in a public place within the program as required by 603 CMR 28.09.**

In closing, we would like to extend our thanks to the administration and staff who shared their time and thoughts so generously during the preparation and onsite phases of the visit. Special thanks are given to Rhonda Page for the extra efforts in coordinating this visit. Should you require any additional information, please do not hesitate to contact the Onsite Team Chairperson at (781) 338-3713.

Sincerely,

Helen M. Murgida, Private School Program Review Chairperson

Program Quality Assurance Services

Darlene Lynch, Director

Program Quality Assurance Services

c: Mitchell D. Chester, Ed.D., Commissioner of Elementary and Secondary Education

Mari Scharrschmidt, Chairperson, Board of Directors

Rhonda Page, Private School Program Review Coordinator

Encl.: Final Report

Full Approval Certificate, Expiration Date: August 31, 2017

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| ESE Logo |  | **Institute of Professional Practice, Inc.**    **PRIVATE SPECIAL EDUCATION SCHOOL**  **PROGRAM REVIEW**  **REPORT OF FINDINGS**  **Dates of Onsite Visit:** **February 3-5, 2014**  **Date of Draft Report:** **February 13, 2014**  **Date of Final Report:** **April 8, 2014**  **Corrective Action Plan Due:** **May 13, 2014**  **Department of Elementary and Secondary Education Onsite Team Members:**  **Helen Murgida, Chairperson**  **Amy Krukonis, Team Member** |
|  |  | **Mitc Mitchell D. Chester, Ed.D.** **Co Commissioner of Elementary and Secondary Education** |
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**MASSACHUSETTS DEPARTMENT OF ELEMENTARY**

**AND SECONDARY EDUCATION**

**PRIVATE SPECIAL EDUCATION SCHOOL PROGRAM REVIEW**

**Institute of Professional Practice, Inc.**

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#### MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

##### APPROVED PRIVATE SCHOOL PROGRAM REVIEW REPORT

# **OVERVIEW OF REVIEW PROCEDURES**

# **INTRODUCTION**

The Massachusetts Department of Elementary and Secondary Education (“Department”) is required under M.G.L. c. 71B, §10 to review special education programs in approved private special education schools that serve publicly funded students under the provisions of Board of Elementary and Secondary Education Regulations 603 CMR 28.00 and 18.00. Each private school program submits an application for approval by the Department and thereafter periodically updates information in a re-approval application. Each year, the Department's Program Quality Assurance Services unit (“PQA”) conducts onsite visits to selected approved private school programs to verify the implementation of these programs. The selected schools for the 2013-2014 review cycle were notified in February 2013 of scheduled visits and were required to conduct a Self-Assessment using the Department's web-based monitoring system (WBMS) before the arrival of the Department's visiting team.

The statewide six-year Private School Program Review cycle together with the Department’s Mid-cycle monitoring schedule is posted on the Department’s web site at <http://www.doe.mass.edu/pqa/review/psr/6yrcycle.html>.

**Web-based Approach to Monitoring**

In the 2012-2013 school year and continuing forward, all Program Reviews are conducted using the web-based approach to comprehensive monitoring, allowing both programs and the Department to submit, review and exchange documents and information through the Department’s security portal. This new approach combines familiar elements from the standard Program Review procedures in combination with new features that strengthen accountability and oversight on a continuous basis. The WBMS has already been successfully used in conducting the Department’s public school monitoring.

**Private School Program Review Elements**

**Criteria:** The Program Review criteria encompass key elements drawn from 603 CMR 18.00 and 28.00 and the private school program’s application for approval. They also include those required by the federal Office for Special Education Programs (OSEP) and revised requirements of the Individuals with Disabilities Education Act, 20 U.S.C. Section 1400 *et seq.* (IDEA-2004) as described in the Department's Special Education Advisories. PQA, through the Desk Review, examines the Self-Assessment submission and determines which criteria will be followed up on through onsite verification activities. The Self-Assessment and Desk Review are both described below.

**Self-Assessment Phase:** This is a requirement for all agencies being monitored. It is completed in the year prior to the onsite review and covers all of the monitoring criteria. The agency is responsible for completing the Self- Assessment for each individually approved program being reviewed, which consists of:

* Agency review of documentation for required elements including document uploads.
* Agency review of a sample of student records selected.
* Agency review of a sample of staff records selected.

Upon completion of these portions of the Self-Assessment, it is submitted to the Department for review.

**Desk Review Phase:** The PQA chairperson assigned to each agency reviews the responses by the private school program to questions regarding the critical elements for appropriate policies, procedures, and practices, as well as actual documents and data submissions by criteria. The student record review data, staff record review data, and explanatory comments are examined. The outcome of this review, along with 3-year trend data from the Problem Resolution System, and required notifications to the Department is used to determine the scope and nature of the Department’s onsite activities.

**Onsite Verification Phase:** This includes activities selected from the following:

* Interviews of administrative, instructional, and other staff consistent with those criteria selected for onsite verification.
* Interviews of parent representatives and other telephone interviews as requested by other parents or members of the general public.
* Review of student records and staff records: The Department selects a sample of student and staff records from those the agency reviewed as part of its self-assessment to verify the accuracy of the data. The Department also conducts an independent review of a sample of student and staff records that reflect activities conducted since the beginning of the school year. The onsite team will conduct this review, using standard Department procedures, to determine whether procedural and programmatic requirements have been implemented.
* Surveys of parents of students with disabilities: Parents of students with disabilities whose files are selected for the record review, as well as the parents of an equal number of other students with disabilities, are sent a survey that solicits information regarding their experiences with the agency’s implementation of special education, related services, and procedural requirements by its private school programs.
* Observation of classrooms and other facilities: The onsite team visits a sample of classrooms and other school facilities used in the delivery of programs and services to determine general levels of compliance with program requirements.

**Team:** Depending upon the scope of onsite activities that have been identified based on the Department’s Desk Review of the agency’s Self-Assessment, a 2-3 member Department team will conduct a 2-3 day onsite Program Review.

**Report:** The report is based on a review of the written documentation regarding the operation of the school's programs and the information gathered from the Onsite Verification Phase. A Draft Report of Comments is issued via the WBMS. Agencies may respond to the factual accuracy of the report within 10 business days.

A Final Report is then issued via the WBMS and in hard copy. The findings in the Final Report note those criteria that the team found to be implemented in a commendable or substantially implemented, and those not implemented or not fully implemented. Findings for each program area describe determinations of the Department about the implementation status of each requirement (criterion) reviewed. The Department’s Approved Private School Program Review Final Reports are posted on the Department’s web site at <http://www.doe.mass.edu/pqa/review/psr/reports/default.html>.

**Response:** Where criteria are found not to be fully implemented, the agency is required to propose corrective actions, within 20 business days of receipt of the Final Report, to bring those areas into compliance with the respective statutes or regulations for each effected private school program. **Under federal *Special Education State Performance Plan* requirements pursuant to IDEA-2004, public and private school programs serving disabled students must demonstrate effective resolution of noncompliance identified by the Department as soon as possible but in no case later than one year from the issuance of the Department’s Final Program Review Report.** A program is required to incorporate the required corrective action into its Re-approval Application as required by 603 C.M.R. Section 28.09. Additionally, a program is encouraged to incorporate any required corrective action as approved by the Department into its internal improvement plans, including the program’s professional development plans.

The Department believes that the Private School Program Review process is a positive experience and that the Final Report is a helpful planning document for the continued development and improvement of programs and services in each approved private school program.

# **REPORT INTRODUCTION**

A two-member team visited Institute of Professional Practice, Inc. during the week of February 3, 2014 to evaluate the implementation of selected compliance criteria under the Massachusetts Board of Elementary and Secondary Education Regulations 603 CMR 18.00 (Program and Safety Standards for Approved Public or Private Day and Residential Special Education School Programs) and 603 CMR 28.09 (Approval of Public or Private Day and Residential Special Education School Programs), M.G.L c. 71B, the federal Individuals with Disabilities Education Act, 20 U.S.C. Section 1400 *et seq,* as amended in 2004 (IDEA--2004), and civil rights provisions that are pertinent to Approved Private School Programs. The team appreciated the opportunity to interview staff and parents, to observe classroom facilities, and to review the program efforts underway.

The Department is submitting the following Private School Program Review Report containing findings made pursuant to this onsite visit. In preparing this report the team reviewed extensive documentation regarding the operation of the school programs, together with information gathered by means of the following Department program review methods:

• Interview of one administrative staff.

• Interview of one clinical staff.

• Interviews of four teaching and educational support services staff.

• Interviews of zero childcare staff.

• Interviews of no Parent Group representatives and of no other parents of Massachusetts students enrolled in the school program.

• Student record review: A sample of four Massachusetts student records was selected by the Department. Student records were first examined by the school program’s staff and then verified by the onsite team using standard Department student record review procedures to make determinations regarding the implementation of procedural and programmatic requirements.

• Staff record review: A sample of four staff records was selected by the Department. Staff records were first examined by the school program’s staff and then verified by the onsite team using standard Department staff record review procedures to make determinations regarding the implementation of procedural and programmatic requirements.

• Observation of classrooms and other facilities: A sample of six instructional classrooms and other facilities used in the delivery of programs and services was visited to determine general levels of compliance with program requirements.

• Surveys of parents of students with disabilities: Twelve parents of students with disabilities were sent surveys that solicited information about their experiences with the school program’s implementation of special education programs, related services and procedural requirements; eight of these parent surveys were returned to the Department for review.

The report includes findings organized under 16 specified compliance areas listed in the table of contents. The findings explain the “ratings,” or determinations by the team about the implementation status of the compliance criteria reviewed within each of these areas. The ratings indicate those criteria that were found by the team to be substantially “Implemented” or implemented in a “Commendable” manner, defined as criteria that are implemented in an exemplary manner significantly beyond the requirements. Where criteria were found to be either "Partially Implemented" or "Not Implemented," the private school program must propose to the Department corrective action to bring those areas into compliance with the controlling statute or regulation. In some instances the team may have found certain requirements to be fully “Implemented” but made a specific comment on the school program’s implementation methods that also may require response from the private school program.

The private school program is expected to incorporate the corrective action into any program improvement plans, including the school program’s professional and paraprofessional staff development plan.

**Institute of Professional Practice, Inc.**

**The Durham Center for Education Day Program**

**SUMMARY OF COMPLIANCE CRITERIA INCLUDED IN THIS REPORT**

**REQUIRING CORRECTIVE ACTION PLAN DEVELOPMENT**

**in response to the following**

**PROGRAM REVIEW REPORT FINDINGS**

| **PROGRAM AREA** | **PARTIALLY IMPLEMENTED** | **NOT IMPLEMENTED** | **OTHER CRITERIA REQUIRING RESPONSE** |
| --- | --- | --- | --- |
| **Area 1: Demonstration of Need and Capacity** |  |  |  |
| **Area 2: Administration – Approvals, Licenses and Certificates Documentation** |  |  |  |
| **Area 4: Disclosure of Information** |  |  |  |
| **Area 5: Administration and Admissions Procedures** |  |  |  |
| **Area 6: Educational Program Requirements -- Student Learning Time** |  |  |  |
| **Area 8: Educational Program Requirements – Individualized Education Programs** | 8.8 |  |  |
| **Area 9: Educational Program Requirements -- Student Discipline and Behavior Management** |  |  |  |
| **Area 10: Educational Staffing Requirements -- Ratios** |  |  |  |
| **Area 11: Educational Staffing Requirements -- Personnel Policies** |  |  |  |
| **Area 12: Educational Staffing Requirements -- Staff Training** | 12.1, 12.2 |  |  |
| **Area 13: Physical Facility and Equipment Requirements** |  |  |  |
| **Area 15: Parent and Student Involvement** |  |  |  |
| **Area 16: Health and Medical Services** | 16.7 |  |  |
| **Area 18: Student Records** |  |  |  |
| **Area 19: Anti-Hazing** |  |  |  |
| **Area 20: Bullying Prevention and Intervention** |  |  |  |

**NOTE THAT ALL OTHER CRITERIA REVIEWED BY THE DEPARTMENT THAT ARE NOT MENTIONED ABOVE HAVE RECEIVED AN “IMPLEMENTED” OR “NOT APPLICABLE or NOT RATED” RATING.**

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| **DEFINITION OF TERMS** **FOR THE RATING OF EACH COMPLIANCE CRITERION** | |
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| **Commendable** | The criterion is implemented in an exemplary manner significantly beyond the requirements. |
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| **Implemented** | The requirement or criterion is substantially met. |
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| **Partially Implemented** | The requirement, in one or several important aspects, is not entirely met. |
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| **Not Implemented** | The requirement is totally or substantially not met. |
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| **Not Applicable or Not Rated** | The requirement does not apply to the private school program. |

**Institute of Professional Practice, Inc.**

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| **AREA 1: DEMONSTRATION OF NEED AND CAPACITY** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 1.2 Program & Student Description, Program Capacity  28.09(2)(a)(2);  28.09(2)(b)(2, 3, 7) | A narrative is provided that describes:   * Identified population of students to be served * Ages of students; * Educational characteristics; * Behavioral characteristics and * Philosophy, goals and objectives. * How each of the following educational services are implemented for the described student population of the program:   + The content requirements of the Massachusetts Curriculum Frameworks;   + Self-help, daily living skills;   + Social/emotional needs;   + Physical education; adapted physical education;   + Pre-vocational, vocational, and career education;   + English language support (for limited English proficient students) and   + Other: any other specialized educational service(s) provided by the program. * How each of the following related services is or will be provided for the described student population of the program whose IEPs indicate such services:   + Transportation;   + Braille needs (blind/visually impaired);   + Assistive technology devices/services;   + Communication needs (all students including deaf/hard of hearing students);   + Physical therapy;   + Occupational therapy;   + Recreation services;   + Mobility/orientation training;   + Psychological services, counseling services, rehabilitation counseling services, social work services;   + Parent counseling and training;   + Health services, medical services and   + Other (e.g., music therapy, sensory integration therapy). * How the kinds of supplementary aids and services available for students in the program is or will be provided:   Supplementary aids and services are defined as “those aids and services-which are not ‘specially designed instruction or related services’-which enable eligible students to be educated to the maximum extent possible with non-disabled students.” These may include aids and services that would typically be available in a less restrictive setting, and their availability would be helpful when the student can be placed in a less restrictive placement (e.g., adapted text, enlarged print, graph paper, peer tutor). |

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| Rating: Implemented |
| Response Required: No |

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| AREA 2: ADMINISTRATION – APPROVALS, LICENSES ANDCERTIFICATES DOCUMENTATION |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 2.2 Approvals, Licenses, Certificates of Inspection 18.04(1); 28.09(2)(b)(5); 28.09(5) (b); 28.09(6) (b, c) | The program has current licenses, approvals, and certificates of inspection by state and local agencies.   * Safety Inspection. The program shall have an appropriate certificate of inspection from the Department of Public Safety or the local building inspector for each building to which students have access; * Fire Inspection. The program shall obtain a written report of an annual fire inspection from the local fire department; * Lead paint inspection (if facility was built prior to 1978). All buildings, residential or otherwise, utilized by children younger than six or with a mental age younger than six shall be free of lead paint; * Local Board of Health permit if providing food services; * Asbestos inspection or date when building was constructed and statement from appropriate authority that building is asbestos free (if Asbestos is present then a containment plan); and * Statement regarding the non-existence of PCBs, or, if PCBs are present then a containment plan; and * Other inspections that may be required by local or state authorities |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 2.3  EEC Licensure  102 CMR 3.00  **(Residential Programs only)** | The residential program has a current, full license from the Department of Early Education and Care (EEC) (per 102 CMR 3.00). Approval by EEC to operate a group care facility or a day care center (if applicable). |

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| Rating: Not Applicable |
| Response Required: No |
| Department of Elementary and Secondary Education Findings: *This program is a day program; therefore this criterion is not applicable.* |

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| **AREA 4: DISCLOSURE OF INFORMATION** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 4.2 Public Information and Postings  *28.09(6)(a, b, c, d, e);*  28.09(2)(b)(4) | The following information must be publicly posted:   * First aid procedures; * Emergency procedures; * Emergency telephone numbers; * Current ESE approval certificate; and * Current EEC License if applicable. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 4.4 Advance Notice of Proposed Program/  Facility Change  28.09 (5)(c) | The program shall develop and implement a written procedure describing how it notifies the Department of substantial changes within its program and identifying the person responsible for making this notification.  The program notifies the Department using the Department’s Form 1 (<http://www.doe.mass.edu/pqa/sa_nr>) and also notifies school districts and parents of any new policies and procedures and/or changes in current policies and procedures.  Prior to any substantial change to the program or physical plant, the program provides written notification of intent to change to the Department. Notice shall be given with sufficient time to allow the Department to assess the need for the proposed change and the effects of such change on the educational program. The program must also provide written notification to the Department of any sudden and/or unexpected changes that may impact the overall health or safety of students and/or the delivery of services required by IEPs. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 4.5 Immediate Notification  18.03(10); 18.05(7);  28.09(12) (a, b) | The program shall develop and implement a written procedure describing how it notifies all appropriate parties of serious incidents within the program and identifying the person responsible for making this notification.  For ALL students (Massachusetts and Out-of-State students)  The program makes immediate notification to the parent, the public school district special education administrator, and to any state agency involved in the student’s care or placement (by telephone and letter), and the Department of Elementary and Secondary Education (by telephone and Form 2) of the following incidents:   * Death of a student; * Filing of a 51-A report with DCF, or a complaint to the Disabled Persons Protection Commission against the school or a school staff member for abuse or neglect of a student; * Any action taken by a federal, state or local agency that might jeopardize the school’s approval with the Department; and * Any legal proceeding brought against the school or its employee(s) arising out of circumstances related to the care or education of any of its students regardless of state of residency.   For Massachusetts Students Only:   * The hospitalization of a Massachusetts student (including out-patient emergency room visits) due to physical injury at school or previously unidentified illness, accident or disorder which occurs while the student is in the program; * Massachusetts student injury resulting from a motor vehicle accident during transport by school staff (including contracted staff) which requires medical attention; * Massachusetts student serious injury requiring emergency medical intervention resulting from a restraint * Massachusetts student run away; * Emergency termination of a Massachusetts student under circumstances in which the student presents a clear and present threat to the health and safety of him/herself or others pursuant to 18.05(7)(d); and * Any other incident of serious nature that occurs to a Massachusetts student. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 5: ADMINISTRATION AND ADMISSION PROCEDURES** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 5.1 Student Admissions  28.09(11); 18.05(1)(b)(1-17); 18.05(2); 18.05(3)(c) | The program develops and implements a written admissions policy that includes the following:   * A statement that the program maintains a copy of its policies and procedures manual on site; * A statement that the program provides written notice to the parents of the enrolled students that copies of its policies and procedures manual are available upon request; * Admission criteria; * Admissions procedures; * Information required from referring school districts as part of the application process; * Procedures followed to determine whether the student will be admitted; * (**For Residential Programs Only**) Procedures to prepare staff and students in the living unit for the new student’s arrival; * A statement that prior to admission documentation is required from a licensed physician of a complete physical examination of the student not more than twelve (12) months before admission; * A statement that in the event of emergency placements, the school shall make provisions for a complete examination of the student within 30 days of admission; and * A statement that prior to admission, and upon request, the Director of the program or designee will be available to the parents, student and the public school for an interview. The interview shall include an explanation of the school’s purpose and services, policies regarding student and parent rights including student records, the health program including the procedures for providing emergency health care, and the procedure for termination of a student. The interview will allow for the opportunity for the student and parents to see the facilities, meet the staff members and to meet other enrolled students. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 5.2(a) Contracts  28.06(3)(f) | There shall be a written contract for each enrolled student consistent with the requirements of 603 CMR 28.06(3)(f).  Written contracts: School districts shall enter into written contracts with all out-of-district placements. Each contract shall include, but not be limited to, the following terms:   1. The out-of-district placement shall comply with all elements of the IEP for the student and shall provide, in writing, to the Administrator of Special Education detailed documentation of such compliance through completion of required student progress reports. 2. The out-of-district placement shall allow the placing school district to monitor and evaluate the education of the student and shall make available, upon request, any records pertaining to the student to authorized school personnel form the school district and the Department in accordance with 603 CMR 23.00: *Student Records* 3. The out-of-district placementshall allow the placing school district and/or the Department to conduct announced and unannounced site visits and to review all documents relating to the provision of special education services to Massachusetts students at public expense. Access to documents for the placing school district shall include general documents available to the public, documents specifically related to the student placed by such district, and other documents only to the extent they are necessary to verify and evaluate education services provided at public expense. 4. The out-of-district placement shall afford publicly-funded students all the substantive and procedural rights held by eligible students, including but not limited to those specified in 603 CMR 28.09, and shall comply with all other applicable requirements of 603 CMR 28.00 and applicable policy statements and directives issued by the Department. 5. No school district shall contract with any out-of-district placement that discriminates on the grounds of race, color, religion, sexual orientation, or national origin, or that discriminates against qualified persons with disabilities. |

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| Rating: Implemented |
| Response Required: No |

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| AREA 6: EDUCATIONAL PROGRAM REQUIREMENTS –STUDENT LEARNING TIME |

| **CRITERION**  **NUMBER** |  |
| --- | --- |
|  | **Legal Standard** |
| 6.1 Daily Instructional Hours  603 CMR 27.04 | The program ensures that each student is scheduled to receive an average minimum of the following instructional hours unless otherwise approved by ESE or a student’s IEP provides otherwise:   * Elementary – A total of:   + 10 month program – 900 hours   + 11 month program – 990 hours   + 12 month program – 1080 hours * Secondary – A total of:   + 10 month program – 990 hours   + 11 month program –1089 hours   + 12 month program – 1188 hours   The program ensures that, unless a student’s IEP provides otherwise, each elementary school student is scheduled for at least 900 hours of structured learning time a year and each secondary school student is scheduled for at least 990 hours of structured learning time a year (including physical education for all students, required by M.G.L. c. 71, § 3), within the required school year schedule. Where the private special education program operates separate middle schools, at the beginning of the school year it designates each one as either elementary or secondary.  NOTE: The program ensures that its structured learning time is time during which students are engaged in regularly scheduled instruction, learning or assessments within the curriculum of core subjects and other subjects as defined in 603 CMR 27.02. The program’s structured learning time may include directed study (activities directly related to a program of studies, with a teacher available to assist students); independent study (a rigorous, individually designed program under the direction of a teacher, assigned a grade and credit); technology-assisted learning; presentations by persons other than teachers; school-to-work programs; and statewide student performance assessments. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| *6.1(a) Physical Education Requirements*  M.G.L. c. 71, § 3 | The program shall have a written plan to teach physical education as a required subject at all grade levels for all students for the purpose of promoting the physical well being of students.  **NOTE:** Physical education classes are to be considered part of the student’s structured learning time. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 6.4 School Days Per Year  603 CMR 27.05(2); 28.09(9)(a) | All programs are run for the following minimum number of days (exclusive of weekends, holidays, vacations):   * 10 month program - 180 days * 11 month program - 198 days * 12 month program - 216 days   Before the beginning of each school year, the program sets a school year schedule for each program. This schedule must include at least five additional school days to account for unforeseen circumstances (i.e., snowstorms).  NOTE: All programs must comply with the number of school days per the ESE application for approval plus five additional days for unforeseen circumstances. |

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| Rating: Implemented |
| Response Required: No |

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| AREA 8: EDUCATIONAL PROGRAM REQUIREMENTS –INDIVIDUALIZED EDUCATION PROGRAMS |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 8.4 Program Modifications and Support Services for Limited English Proficient Students  M.G.L. c. 71A; Title VI | The program shall develop a written plan to implement necessary program modifications and support services to identify and effectively serve limited English proficient (LEP) students. Such program modifications and support services comply with applicable state law (M.G.L. c. 71A) and federal law (Title VI).   * The program must acknowledge it is responsible to serve LEP students. * The program must affirm its willingness to accept students with LEP into its program. * The student must be afforded the same opportunity to access and participate in the program’s services, activities and other benefits as all other students. * Unless the student’s IEP specifies otherwise, the student must receive:   + sheltered content instruction from a trained and qualified teacher; and   + additional instruction in English as a Second Language by a certified ESL teacher. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 8.5 Current IEP & Student Roster  28.09(5)(a) | * The program has on file a current IEP for each enrolled Massachusetts student that has been issued by the responsible public school district and consented to and dated by the student’s parent(s) (or student, when applicable). |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 8.8 IEP – Progress Reports  28.07(3);  34 CFR 300.320(a)  (3)(i, ii) | Progress Reports and Content   * Parents receive reports on the student’s progress towards reaching the goals set in the IEP at least as often as parents are informed of the progress of students without disabilities; * Progress Report information sent to parents includes written information on the student’s progress toward the annual goals in the IEP; and * The program shall send copies of progress reports to the parents and public school.   **NOTE**: IEP must contain a description of:   * How the child's progress toward meeting the annual goals will be measured; and * When periodic reports on the progress the child is making toward meeting the annual goals (such as through the use of quarterly or other periodic reports, concurrent with the issuance of report cards) will be provided. |

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| Rating: Partially Implemented |
| Response Required: Yes |
| Department of Elementary and Secondary Education Findings: *While interviews and a review of student records indicates that progress reports are written and sent quarterly to parents, a review of student records indicates that not all progress reports are sent to the public school districts as required.* |

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| AREA 9: EDUCATIONAL PROGRAM REQUIREMENTS –STUDENT DISCIPLINE AND BEHAVIOR MANAGEMENT |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 9.1 Polices and Procedure for Behavior Management  18.03(7)(b)  (2); 18.05(5, 6, 7); 28.09(11); 603 CMR 46.00; ESE Advisory on Restraint in Special Education Programs dated 12/20/05 | The program develops and implements a comprehensive set of policies and procedures dealing with discipline and behavior management that meet all federal and state special education requirements.  The policy must include a description of the behavior management procedures used in the facility including the following if applicable:   * Level/point systems of privileges, including procedures for the student’s progress in the program; * The type and range of restrictions a staff member can impose for unacceptable behavior, including suspension and termination; * The form of restraint used in an emergency; the behavioral interventions used as alternatives to restraint, and the controls on abuse of such restraints (See 603 CMR 46.00 and 12/20/05 ESE Advisory on Restraint); and * Any denial or restrictions of on-grounds program services.   **NOTE:** Meals shall not be withheld as a form of punishment or behavior management. No student shall be denied or unreasonably delayed a meal for any reason other than medical prescriptions. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 9.1(a) Student Separation Resulting from Behavior Management  18.05(5)(i); 18.05(6, 7); 46.02(5)(b) | If the program’s behavior management policy and procedures result in a student being separated in a room apart from the group or program activities, it shall include, but not be limited to, the following:   * Guidelines for staff in the utilization of such an area; * Persons responsible for implementing such procedures; * The duration of the procedures including procedures for approval by the chief administrative person or his/her designee for any period longer than 30 minutes; * Requirement that students shall be observed at all times and in all parts of the room, and that the staff shall be accessible at all times; and * A means of documenting the use of time-out for an individual student, including, at a minimum, length of time, reasons for this intervention, who approved the procedure, and who monitored the student during the time out. * Time out rooms shall not be locked. * Any room or space used for the practice of separation must be physically safe and appropriate to the population served by the facility*.* |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 9.4 Physical Restraint  **(Day programs only)**  18.05(5); 603 CMR 46.00 | The program shall have a written policy on the use of physical restraint and administer physical restraint in accordance with the requirements of 603 CMR 46.00.  The policy and procedures must include the following:   * Parent/guardian consent to the implementation of restraint pursuant to the program’s policy must be obtained annually. * The use of chemical or mechanical restraint is prohibited unless explicitly authorized by a physician and approved in writing by the parent or guardian. * The use of seclusion restraint is prohibited. * Methods for preventing student violence, self-injurious behavior, and suicide, including de-escalation of potentially dangerous behavior occurring among groups of students or with an individual student; * A description and explanation of the school's or program's method of physical restraint, * A description of the program's training requirements for all staff and intensive training for staff who serve as restraint resources for the program, * Reporting requirements and follow-up procedures for reports to parents/guardians and to the Department, * A procedure for receiving and investigating complaints regarding restraint practices. * Floor or prone restraints shall be prohibited unless the staff member administering the restraint has received in-depth training according to the requirements of 603 CMR 46.03(3) and, in the judgment of the trained staff member, such method is required to provide safety for the student or others present. * The director or his/her designee shall maintain an on-going record of all instances of physical restraint, which shall be made available for review by the Department of Elementary and Secondary Education, upon request,   **NOTE:** A residential educational program must comply with the EEC restraint requirements contained in 102 CMR 3.00 for all students enrolled in such program  3.00 for all students enrolled in such program.  **NOTE:** A program within a program or facility subject to M.G.L. c. 123 or Department of Mental Health Regulations must comply with the restraint requirements of M.G.L. c. 123, 104 CMR 27.12 or 104 CMR 28.05, where applicable. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 9.5  3-5 Day Suspensions  18.05(6) | The program shall develop and implement a written policy on suspensions and provide a copy to the parents and to the school district and/or human service agency that placed the student. Such policy shall contain the following information:   * Whenever a student is suspended, the school shall immediately notify the parents and the public school or human service agency responsible for the placement. Within 24 hours, the school shall send a written statement explaining the reasons for suspension to the parents and public school district. * No student may be suspended and sent home unless a responsible adult is available to receive the student. * Once a student has been suspended for three (3) consecutive school days or five (5) non-consecutive school days in a school year, the school, parents, and public school district, consistent with federal requirements, shall explore together all possible program modifications within the school in an attempt to prevent more lengthy suspension of the student from the program. * Procedures must be in place to record and track the number and duration of suspensions, including suspensions from any part of the student’s IEP program (including transportation).   **NOTE:** Sending a student home “early” or an in-school suspension of a student who is not receiving instruction from either a licensed teacher or a paraprofessional who is being supervised by a licensed teacher is considered a suspension if the student’s IEP does not allow for the modification of learning time requirements of the Board of Elementary and Secondary Education. |

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| Rating: Implemented | |
| Response Required: No | |
| **CRITERION**  **NUMBER** |  |
|  | **Legal Standard** |
| 9.6 10+ Day Suspensions  34 CFR 300.530 – 537  18.05(7) | 1. *The program shall develop and implement the following procedures when suspensions constitute a change of placement. A suspension is a change of placement when: 1) it exceeds 10 consecutive school days or 2) it is one of a series of suspensions that constitute a pattern under 34 CFR 300.536.* 2. A request is made of the student's responsible school district to convene an IEP Team meeting prior to a suspension that constitutes a change in placement of a student with disabilities. 3. The program participates in the TEAM meeting:    1. To develop or review a functional behavioral assessment of the student’s behavior and to develop or modify a behavior intervention plan;    2. To identify appropriate alternative educational setting(s); and    3. To conduct a manifestation determination (i.e. to determine the relationship between the disability and the behavior). 4. If the TEAM determines that the behavior is NOT a manifestation of the disability, the school may suspend or terminate the student consistent with policies applied to any other student in the program. The responsible school district must, however, offer an appropriate education program to the student that may be in some other setting. 5. If the TEAM determines that the behavior IS a manifestation of the disability, the TEAM, takes steps to modify the IEP, the behavior intervention plan, and/or the placement.   **NOTE:** Sending a student home “early” or an in-school suspension of a student who is not receiving instruction from either a licensed teacher or a paraprofessional who is being supervised by a licensed teacher is considered a suspension if the student’s IEP does not allow for the modification of learning time requirements of the Board of Elementary and Secondary Education. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 9.7 Terminations 18.05(7); 28.09(12)(b) | The program develops and implements a written termination policy that includes provisions regarding both Planned Terminations and Emergency Terminations.  The policy must include the following:  a) Planned Terminations: The program shall notify the public school district of the need for an IEP review meeting and provides notice of this meeting to all appropriate parties ten (10) days in advance of the intended date of the meeting. The purpose of the meeting will be to develop a clear and specific termination plan for the student that shall be implemented in no less than thirty (30) days unless all parties agree to an earlier termination date.  b) Emergency Terminations: In circumstances where the student presents a clear and present threat to the health and safety of him/herself or others, the program shall follow the procedures required under 603 CMR 28.09(12)(b) and immediately notify the Department of Elementary and Secondary Education.  The program shall not terminate the enrollment of any student, even in emergency circumstances, until the enrolling public school district is informed and assumes responsibility for the student. At the request of the public school district, the program shall delay termination of the student for up to two calendar weeks to allow the public school district the opportunity to convene an emergency Team meeting or to conduct other appropriate planning discussions prior to the student's termination from the special education school program. With the mutual agreement of the program and the public school district, termination of enrollment may be delayed for longer than two calendar weeks. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 10: EDUCATIONAL STAFFING REQUIREMENTS - RATIOS** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 10.1 Staffing for Instructional Groupings  28.06(6)(d);  28 09(7)(e) | The program shall have instructional groupings that do not exceed 1) the approved ESE Student: Licensed Educator Ratio and 2) the approved ESE Student: Licensed Educator: Aide Ratio.  Student: Licensed Educator Ratio is defined as the number of students within an instructional group to the number of licensed special education teachers, licensed regular education teachers or licensed related service providers.  Student: Licensed Educator: Aide Ratio is defined as the number of students within an instructional group to the number of licensed special education teachers, licensed regular education teachers or licensed related service providers, to the number of aides (teacher aide, paraprofessional, direct care staff, behaviorist). |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 10.2 Age Range  28.06(6)(f, g) | The program shall ensure that the ages of the youngest and oldest child in any instructional grouping shall not differ by more than forty-eight months (4 years).  Prior to exceeding the forty-eight month timeframe, an Alternative Compliance Waiver (<http://www.doe.mass.edu/pqa/sa_nr>) must be requested and approved by the Department. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 11: EDUCATIONAL STAFFING REQUIREMENTS - PERSONNEL POLICIES** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.1 Personnel Policies and Procedures Manual  18.05(11); 18.05(11)(c)  (1); 28.09(7); 28.09(11)(a);  M.G.L. c. 71, § 38R; ESE Advisory on CORI revised 5/7/07; 603 CMR 26.00 as amended by Chapter 199 of the Acts of 2011 | The program shall develop and implement a written personnel policies and procedures manual that describes:   * Criteria and procedures for hiring. This should include the school’s Criminal Offender Record Information (CORI) policy regarding CORI checks on employees, volunteers and transportation providers whose responsibilities bring them into direct and unmonitored contact with students (upon initial hire and every three years thereafter). [NOTE: A residential program licensed by EEC does not need to conduct independent CORI checks where those checks have been done through EEC]; * Procedures for evaluation of staff; * Procedures for discipline of staff (including suspensions and dismissals); * Procedures for handling staff complaints (See Criterion 15.8); * A plan for using volunteer and/or intern services; and, * Statement of equal employment/educational opportunities in regard to race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.2 Administrative Responsibility  18.05(11)(a, b) | The program shall designate one person who will have administrative responsibility over the operation of the program. Programs with more than 40 professional licensed staff may have one (or more) assistant administrator(s) provided the Department approves such positions.  The administrator or designee shall at all times be on the premises of the school while the program is in operation. All staff on duty shall know who is responsible for administration of the program at any given time. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.3 Educational Administrator Qualifications  28.09(5)(a); 28.09(7)(a);  603 CMR 44.00 | At least one staff member shall be designated as the educational administrator for the program. Such person shall be assigned to supervise the provision of special education services in the program and to ensure that the services specified in each student’s IEP are delivered. The educational administrator shall either possess licensure as a special education administrator or possess all of the following:   * License as a special educator; * A minimum of a master's degree in special education or a related field; and * A minimum of one year of administrative experience.   The educational administrator shall be re-licensed pursuant to the requirements of 603 CMR 44.00.  The educational administrator shall obtain supervisory approval of his/her Professional Development Plan per 603 CMR 44.04, if applicable. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.4 Teachers  (Special Education Teachers and Regular Education Teachers)  18.05(11)(f); 28.09(5)(a); 28.09(7)(b, c); 34 CFR 300.321 | The program must ensure that all teaching staff have teaching licenses appropriate to meet the needs of the population being served pursuant to the requirements of 603 CMR 7.00 and, additionally, must adhere to the following requirements:   1. All teaching staff shall be re-licensed pursuant to the requirements of 603 CMR 44.00 including obtaining supervisor approval of Professional Development Plans pursuant to 603 CMR 44.04, if applicable. 2. To the extent that teaching staff is providing special education services, such services shall be provided, designed, or supervised by a special educator. 3. A program’s teacher who has knowledge about the education and learning progress of the student must be in attendance at the IEP meeting for the student.   At least half of the teaching staff shall be licensed in special education areas appropriate to the population served at the program; other teaching staff may be licensed in other educational areas, in order to provide for content expertise in the general curriculum. The Department of Elementary and Secondary Education may require a higher proportion of licensed special educators if, in the opinion of the Department, the population requires more specialized services.  The number of special education teachers and the number of general education teachers must correspond with the most recently approved ESE budget. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.5  Related Services Staff  28.09(7)(d) | All staff providing or supervising the provision of related services (including consultants) shall be appropriately certified, licensed or registered in their professional areas. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.6 Master Staff Roster  28.09(7) | The program maintains a master list of ALL staff for every position within the program. The staff positions shall correspond to the last ESE approved Program Budget. This list must include job titles along with their corresponding UFR title numbers and full-time equivalents (FTE’s). This list may include, but is not limited to:   * Administrators * Special education teachers * General education teachers * Related service providers * Registered Nurses * Direct care workers * Direct care supervisors * Clerical and maintenance staff * Psychologists * Social workers * Food service staff * Consultants   Any changes/discrepancies from the last Department of Elementary and Secondary Education approved Program Budget (through Initial Application, Extraordinary Relief, Special Circumstances, Program Reconstruction) must be described in a detailed, written narrative. |

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| Rating: Implemented |
| Response Required: No |

| CRITERION  NUMBER |  |
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|  | **Legal Standard** |
| 11.9 Organizational Structure  28.09(7) | The program shall demonstrate that its organizational structure provides for the effective and efficient operation of the school, supervision of school staff, and supervision of students. |

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| Rating: Implemented |
| Response Required: No |

| CRITERION  NUMBER |  |
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|  | **Legal Standard** |
| 11.12 Equal Access  26.00 as amended by Chapter 199 of the Acts of 2011; M.G.L. c. 76, § 5; Title VI: 42 U.S.C. 2000d; 34 CFR 100.3(a), (b); Title IX: 20 U.S.C. 1681; 34 CFR 106, 106.; Section 504: 29 U.S.C. 794; 34 CFR 104,104 ; Title II: 42 U.S.C. 12132; 28 CFR 35.130; NCLB: Title X, Part C, Sec. 721; Mass. Const. amend. art 114 | The program provides all students with equal access to services, facilities, activities and benefits regardless of race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness.   1. The program provides equal opportunity for all students to participate in intramural and interscholastic sports; and 2. Extracurricular activities or clubs sponsored by the program do not exclude students on the basis of race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 12: EDUCATIONAL STAFFING REQUIREMENTS - STAFF TRAINING** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 12.1 New Staff Orientation and Training  18.05(11)(g, i); 28.09(7)(f) | The program shall develop and implement a written plan for new staff orientation and training that is consistent with the needs of the student population and includes an orientation-training program which includes the following:   * Program’s philosophy * Organization * Program * Practices * Goals * ESE required topics (12.2 a-e) * Provisions for orientation of intern, volunteers or others who work at the program, if applicable.   **NOTE:** New staff may not be assigned direct care duties with students until they have participated in all mandated trainings listed under criterion 12.2 a-e through their orientation program. |

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| Rating: Partially Implemented |
| Response Required: Yes |
| Department of Elementary and Secondary Education Findings: *While interviews reveal that new staff receive all required trainings and are not assigned direct care duties until such time, a review of staff records indicates that all required trainings are not offered to new staff during orientation. In addition, the Department is unable to verify that staff are not assigned direct care duties until receipt of all required trainings due to the absence of such documentation.* |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 12.2 In-Service Training Plan and Calendar  28.09(7)(f); 28.09(9)(b); 28.09(10);  18.03(3); 18.05(9)(e)(1); 18.05(10); 18.05(11)(h)  Title VI: 42 U.S.C. 2000d; 34 CFR 100.3; EEOA: 20 U.S.C. 1703(f); Title IX: 20 U.S.C. 1681; 34 CFR 106.31-106.42; M.G.L. c. 76, § 5; 603 CMR 26.00, esp. 26.07(2, 3); 603 CMR 26.00 as amended by Chapter 199 of the Acts of 2011 | All staff, including new employees, interns and volunteers, must participate in annual in-service training on average at least two hours per month.  The following topics are required in-service training topics and must be provided annually to all staff:   1. Reporting abuse and neglect of students to the Department of Children and Families and/or the Disabled Persons Protection Commission; 2. Disciplinary and Behavior Management Procedures used by the program, such as positive reinforcement, point/level systems, token economies, time-out procedures and suspensions and terminations; as well as Restraint Procedures including de-escalation methods used by the program; 3. Runaway policy; 4. Emergency procedures including Evacuation Drills and Emergency Drills; and 5. Civil rights responsibilities (discrimination and harassment) regarding race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness.   The following additional topics are required in-service training topics and must be provided annually to all teaching staff:   * How the learning standards of the Massachusetts Curriculum Frameworks are incorporated into the program’s instruction; * Procedures for inclusion of all students in MCAS testing and/or alternate assessments; and * Student record policies and confidentiality issues.   The following additional topics are required in-service training topics and must be provided annually to appropriate staff based on their job responsibilities:   * CPR training and certification; * Medication administration (including, but not limited to, administration of antipsychotic medications and discussions of medications students are currently taking and their possible side effects); * Transportation safety (for staff with transportation-related job responsibilities); and * Student record policies and confidentiality issues (for staff who oversee, maintain or access student records). |

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| Rating: Partially Implemented | |
| Response Required: Yes | |
| Department of Elementary and Secondary Education Findings: *While staff interviews reveal that in-service training occurs, documentation and staff record reviews show that staff in-service training is not documented, therefore the Department is not able to verify staff receive all required training annually.* | |
| **CRITERION**  **NUMBER** |  |
|  | **Legal Standard** |
| 12.2(c) Required Training-  CPR Certification  18.05(9)(e) | The program shall develop and implement a training plan for CPR Certification, which identifies:   1. the staff positions/titles of staff to be trained; 2. how many staff in each position/title will be trained; and 3. the frequency of CPR training and certification. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 13: PHYSICAL FACILITY AND EQUIPMENT REQUIREMENTS** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 13.2 Description of Physical Facility  18.04;  28.09(8) | Kitchen, Dining, Bathing/Toilet and Living Areas:  The program shall ensure that all kitchen, dining, bathing/toilet and living areas are of an adequate type, size and design appropriate to the ages and needs of the students. The program shall also:   * Maintain areas which are clean, well ventilated and free from hazards; * Provide students with equipment, supplies and materials (e.g., kitchen equipment, dining utensils, toilets, sinks, individual furniture and storage space) which are clean, safe, safely stored, well maintained and appropriate to the ages and needs of the students; * Design all living areas to simulate the functional arrangements of a home and to encourage a personalized atmosphere for small groups of students, unless the school can justify that another arrangement is necessary to serve the particular needs of the students enrolled in the school.   Classroom Space:  Each room or area that is utilized for the instruction of students shall be adequate with respect to the number of students, size and age of students and students’ specific educational needs, physical capabilities and educational/vocational activities.  Indoor Space:  The program shall have a minimum of thirty-five (35) square feet of activity space per student exclusive of hallways, lockers, toilet rooms, isolation rooms, kitchen, closets, offices or areas regularly used for other purposes.  Additionally, all programs must:   * Ensure that all areas, including but not limited to, floors, ceilings and walls, are clean, well maintained and free from safety hazards; * Protect all steam and hot water pipes by permanent screen guards, insulations, or any other suitable device which prevents students from coming in contact with them; * Maintain room temperatures at not less than 68 degrees Fahrenheit at zero Fahrenheit outside and at not more than the outside temperature when the outside temperature is above 80 degrees Fahrenheit; and * Designate space separate from classroom areas for administrative duties and staff or parent conferences. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 13.4 Physical Facility/  Architectural Barriers  18.04(8); Section 504:  29 U.S.C. 794; 34 CFR 104.21,104.22; Title II: 42 U.S.C. 12132; 28 CFR 35.149, 35.150; Mass. Const. amend. art. 114 | The program shall assure that students with limited mobility have access, free from barriers to their mobility, to those areas of the buildings and grounds to which such access is necessary for the implementation of the IEPs for such students. All programs receiving federal funds shall meet the requirements of Section 504 of the Rehabilitation Act of 1973.  A program which enrolls students requiring wheelchairs shall have at least one entrance without steps and wide enough for a wheelchair, for each building utilized in carrying out the IEPs for such students.  If any part of the program is not accessible to students with limited physical mobility, a plan and timetable shall be provided that describes how the program will make all programs and appropriate buildings accessible. |

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| Rating: Implemented | |
| Response Required: No | |
| **CRITERION**  **NUMBER** |  |
|  | **Legal Standard** |
| 13.7 Library/  Resource Room  18.04(6)(b) | In addition to the regular instructional area, the program shall have a separate library or resource room that contains a variety of materials appropriate to the age and abilities of the students enrolled, and is available to all enrolled students. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 15: PARENT AND STUDENT INVOLVEMENT** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 15.1 Parental Involvement and Parents’ Advisory Group  18.05(4)(a) | The program shall have a written plan for involving parents and shall have a Parents’ Advisory Group that shall advise the program on matters that pertain to the education, health and safety of the students in the program.  The program shall designate a staff person to support the Parents’ Advisory Group. |
| Rating: Implemented | |
| Response Required: No | |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 15.3 Information to be Translated into Languages Other Than English  Title VI; EEOA: 20 U.S.C. 1703(f); M.G.L. c. 76, § 5; 603 CMR 26.02(2) | When students have parents or guardians with limited English language skills, the program ensures that important school information is sent to them in a timely manner and provided to them in a language that they understand, either through written translations of documents or through oral interpreters. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 15.5 Parent Consent and Required Notification  18.05(5)(c); 18.05(8); 18.05(9)(f)(1); 18.05 (9)(j); M.G.L. c. 71, § 32A | The program shall develop and implement policy and procedures to work with school districts to obtain the following consents:  **Annual:**   * Emergency medical treatment * Restraints * Medication Administration (when applicable)   **When applicable:**   * Research * Experimentation * Fundraising * Publicity and * Observation   The program’s policy and procedures shall include, when applicable, notification pursuant to Parental Notification Law M.G.L. c. 71, § 32A concerning curriculum that primarily involves human sexual education or human sexuality issues. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 15.8 Registering Complaints and Grievances –Parents, Students and Employees  18.05(1)(b)  (16); 603 CMR 26.00 as amended by Chapter 199 of the Acts of 2011;  Title IX: 20 U.S.C. 1681; 34 CFR 106.8; Section 504: 29 U.S.C. 794; 34 CFR 104.7; Title II: 42 U.S.C. 12132; 28 CFR 35.107 | * The private special education program shall develop, implement and make available to **parents and, when applicable, students** a set of written procedures that may be used to register complaints regarding the student’s education and care at the school that includes specific timelines and the appeals process. * The private special education program must also adopt and publish grievance procedures for **students** providing for prompt and equitable resolution of complaints alleging discrimination based on legally protected categories (race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness) that includes specific timelines and the appeals process. * The private special education program must also adopt and publish grievance procedures for **employees** providing for prompt and equitable resolution of complaints alleging discrimination based on legally protected categories (race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness) that includes specific timelines and the appeals process. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 16: HEALTH AND MEDICAL SERVICES** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.2 Physician Consultation  18.05(9)(a)  M.G.L c. 71, §§ 53, 53A, and 53B | The program shall have a licensed physician available for consultation.  **NOTE:** School Physician means a physician appointed by a School Committee or Board of Health in accordance with M.G.L c. 71, §§ 53, 53A, and 53B or, in the case of a private program, by the Board of Trustees. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.3 Nursing  18.05(9)(b)  M.G.L c. 112  M.G.L. c. 71, §§ 53,53A,and 53B | The program shall have a registered nurse available depending upon the health care needs of the program’s population.  **NOTE:**  School Nurse means a nurse practicing in a school setting, who is:   1. a graduate of an approved school for professional nursing; 2. currently licensed as a Registered Nurse pursuant to M.G.L c. 112; and 3. appointed by a School Committee or a Board of Health in accordance with M.G.L. c. 71, §§ 53,53A,and 53B or, in the case of a private school, by the Board of Trustees. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.4 Emergency First Aid and Medical Treatment  18.05(9)(e, f) | The program shall have develop and implement policies and procedures for emergency first aid and medical treatment, including:   * No emergency first aid or medical treatment is administered to a student without written authorization from a parent. Such authorization shall be renewed annually; * Secure storage of adequate first aid supplies, including but not limited to bandages, body substance isolation gloves, gauze, adhesive tape, and cleaning solutions; * Easy access to first aid supplies in major activities areas; * Procedures to be followed in the case of illness or emergency, including methods of transportation and notification of parents; * A procedure for informing parents or the Department of Children and Families if appropriate of any medical care administered to their child other than basic first aid. (For students in the Department of Children and Families care or custody, an Educational Surrogate Parent shall not have authority to consent to routine or other medical care. For such students, consent shall be obtained consistent with the applicable Department of Children and Families requirements); and * Procedures to be followed in the case of illness or emergency if parents cannot be reached. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.5 Administration of Medication  18.05(9)(f)(8) | The program shall develop and implement written policy and procedures regarding the administration of medication including, but not limited to, the following:   * No medication is administered to a student without written authorization from a parent. Such authorization shall be renewed annually. * No prescription medication shall be administered to a student without the written order of the physician prescribing the medication to that student. * The program maintains written policies and procedures regarding prescription and administration of medication including authorization, prepackaging and staff training. * Any change of medication or dosage must be authorized by a new order from a physician. * A written record shall be maintained of the prescription of medication to students. A written record shall also be maintained of the administration of prescribed medication to students and train staff by a licensed physician or registered nurse. Significant side effects of medications shall also be recorded. * All medicine shall be kept in a locked, secure cabinet and labeled with the student's name, the name of the drug and the directions for its administration. * The program shall dispose of or return to the parents any unused medication. * Medications must be delivered to the school by a responsible adult in a container labeled by the physician or pharmacist. * Provisions must be made for refrigeration of medications, when necessary. * The program shall have a written policy regarding the amount of medication to be kept on the premises at any one time for each student receiving medication. * A review of medications administered to a student shall be incorporated into all case reviews conducted at the school with staff regarding the student. |

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| Rating: Implemented | |
| Response Required: No | |
| **CRITERION**  **NUMBER** |  |
|  | **Legal Standard** |
| 16.6 Administration of Antipsychotic Medication  18.05(9)(f)(9) | The program shall develop and implement written policy and procedures for the administration of antipsychotic medication. The policy shall include that the program shall not administer or arrange for the administration of antipsychotic medication (drugs used in treating psychoses and alleviating psychotic states) **except under the following circumstances**:   * Antipsychotic medication shall be prescribed by a licensed physician for the diagnosis, treatment and care of the child and only after review of the student's medical record and actual observation of the student. * The prescribing physician shall submit a written report to the school detailing the necessity for the medication, staff monitoring requirements, potential side effects that may or may not require medical attention and the next scheduled clinical meeting or series of meetings with the student. * No antipsychotic prescription shall be administered for a period longer than is medically necessary and students on antipsychotic medication must be carefully monitored by a physician. * Staff providing care to a student receiving antipsychotic medication shall be instructed regarding the nature of the medication, potential side effects that may or may not require medical attention and required monitoring or special precautions, if any. * Except in an emergency, as defined in 18.05 (9)(g), the school shall neither administer nor arrange for the prescription and administration of antipsychotic medication unless informed written consent is obtained. If a student is in the custody of his/her parent(s), parental consent in writing is required. Parental consent may be revoked at any time unless subject to any court order. If the parent does not consent or is not available to give consent, the referral source shall be notified and judicial approval shall be sought. If a student is in the custody of a person other than the parent, a placement agency or an out-of-state public or private agency, the referral source shall be notified and judicial approval shall be sought. * In an emergency situation, antipsychotic medication may be administered for treatment purposes without parental consent or prior judicial approval if an unforeseen combination of circumstances or the resulting state calls for immediate action and there is no less intrusive alternative to the medication. The treating physician must determine that medication is necessary to prevent the immediate substantial and irreversible deterioration of a serious mental illness. If the treating physician determines that medication should continue, informed consent or judicial approval must be obtained as required by 18.05(9)(e). * The program shall inform a student twelve years of age and older, consistent with the student's capacity to understand, about the treatment, risks and potential side effects of such medication. The program shall specify and follow procedures if the student refuses to consent to administration of the medication. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.7 Preventive Health Care  18.05(9)(g)  M.G.L. c. 71, § 57  M.G.L. c. 111, § 111. | The program shall describe in writing a plan for the preventive health care of students:   * 603 CMR 18.05(9)(g)(1) Dental * The program, in cooperation with the student's parents and/or human service agency which is responsible for payment, shall make provision for each student to receive an annual comprehensive dental examination. * 105 CMR 200.100(B)(1) Physical * The program shall ensure that every student be separately and carefully examined by a duly licensed physician, nurse practitioner or physician assistant upon admission (within one year prior to entrance to program or within 30 days after program entry) and every 3-4 years afterwards. The program shall require a written report from the physician(s) of the results of the examination and any recommendation and/or modification of the student's activity. * 105 CMR 200.400(B) Vision * The program shall, in cooperation with the student's public school, develop a plan to ensure that vision screenings are conducted. The vision of each student in the program is to be screened in the year of program entry; annually through grade 5 (or by age 11 in ungraded classrooms); once in grades 6 through 8 (or ages 12 through 14 in ungraded classrooms); and once in grades 9 through 12 (or ages 15 through 18 in ungraded classrooms). * 105 CMR 200.400(C) Hearing * The program shall, in cooperation with the student's public school, develop a plan to ensure that hearing screenings are conducted. The hearing of each student in the program is to be screened in the year of program entry; annually through grade 3 (or by age 9 in the case of ungraded classrooms); once in grades 6 through 8 (ages 12 through 14 in the case of ungraded classrooms); and once in grades 9 through 12 (ages 15 through 18 in the case of ungraded classrooms). * G.L. c.71, § 57 Posture * The program shall, in cooperation with the student's public school, develop a plan to ensure that postural screenings are conducted. Tests ascertaining postural defects shall be administered at least once annually in grades 5 through 9. * The program shall have a policy and procedure for assuring that a student or staff member who has a reported communicable disease shall be authorized by a physician to continue to be present within the school and for notifying parents and referring agencies of the introduction of a reported communicable disease into the program. The local board of health must be notified in accordance with M.G.L. c. 111, § 111. * The program shall provide a locked, secure cabinet to keep all toxic substances, medications, sharp objects and matches out of the reach of students. Medications and medical supplies should not be locked in the same cabinet as other toxic substances. Toxic substances must be labeled with contents and antidote. The phone number for the nearest poison center must be posted clearly. * Where appropriate, the program shall provide or arrange for the provision of family planning information, subject to any applicable state or federal legislation. * The program shall require that all students have necessary immunizations as required by the Department of Public Health. |

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| Rating: Partially Implemented |
| Response Required: Yes |
| Department of Elementary and Secondary Education Findings: *A review of student records revealed that not all students have hearing, vision and postural screenings.* |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.11 Student Allergies  18.05(9)(h) | The program shall develop and implement written policy and procedures for protecting a student from exposure to foods, chemicals, or other materials to which they are allergic, as stated by their physician/medical assessment. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.12 No Smoking Policy  M.G.L. c. 71, § 37H | The program shall develop and implement a written policy that prohibits the use of any tobacco products within the program buildings, the program facilities or on the program grounds or on buses by any individual, including school personnel. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 18: STUDENT RECORDS** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 18.1 Confidential-ity of Student Records  28.09(5)(a); 28.09(10); 23.07(1); M.G.L. c. 71, § 34H | Programs shall keep current and complete files for each publicly funded enrolled Massachusetts student and shall manage such files consistent with the Massachusetts Student Record Regulations of 603 CMR 23.00 and M.G.L. c. 71, § 34H.   * The program shall make the individual records of enrolled Massachusetts students available to the Department of Elementary and Secondary Education upon request. * Staff notes or reports regarding a student shall be legibly dated and signed by persons making entries. * A log of access shall be kept as part of each student’s record. If parts of the student record are separately located, a separate log shall be kept with each part. The log shall indicate all persons who have obtained access to the student record, stating:   + the name, position and signature of the person releasing the information; the name, position and, if a third party, the affiliation if any, of the person who is to receive the information;   + the date of access;   + the parts of the record to which access was obtained; and   + the purpose of such access.   **NOTE**: Unless student record information is to be deleted or released, this log requirement shall not apply to authorized personnel who inspect the student record, administrative office staff and clerical personnel who add information to or obtain access to the student record and the school nurses who inspect the student health record. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 19: ANTI-HAZING** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 19 Anti-Hazing  M.G.L. c. 269, §§ 17 through 19 | * The principal/education director of each school program serving secondary school age students issues a copy of M.G.L. c. 269 §§ 17 through 19, to every student enrolled full-time, and every student group, student team, or student organization, including every unaffiliated student group, student team, or student organization, and a copy of the school program's anti-hazing disciplinary policy approved by the program's Board of Director's. * Each school program serving secondary school age students files, at least annually, a report with the Department certifying:   1. Its compliance with its responsibility to inform student groups, teams, or organizations, and every full-time enrolled student, of the provisions of M.G.L. c. 269 §§ 17 through 19;   2. Its adoption of a disciplinary policy with regard to the organizers and participants of hazing; and   3. That the hazing policy has been included in the student handbook or other means of communicating school program policies to students. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 20: BULLYING PREVENTION AND INTERVENTION** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 20 Bullying Prevention and Intervention  M.G.L. c. 71, s. 37H, as amended by Chapter 92 of the Acts of 2010. M.G.L. c. 71, s. 37O(e)(1) & (2). M.G.L. c. 71, s. 370(d). | * Programs must amend handbooks/admission materials to include an age-appropriate summary of their new Bullying Prevention and Intervention Plan. * Program employee handbooks/policies and procedures must contain relevant sections of the Plan relating to the duties of educational staff and other staff. * Each year all programs must give parents and guardians annual written notice of the student-related sections of the local Plan. * Each year all programs must provide all staff with annual written notice of the Plan. * All programs must implement, for all staff, professional development that includes developmentally appropriate strategies to prevent bullying incidents; developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents; information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim and witnesses to the bullying; research findings on bullying, including information about specific categories of students who have been shown to be particularly at risk for bullying in the school environment; information on the incidence and nature of cyber-bullying; and internet safety issues as they relate to cyber-bullying. |

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| Rating: Implemented |
| Response Required: No |

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