***Massachusetts Department of***

***Elementary and Secondary Education***

75 Pleasant Street, Malden, Massachusetts 02148-4906 Telephone: (781) 338-3700

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

January 20, 2017

Nancy Fuller

Executive Director

Community Therapeutic Day School

187 Spring Street

Lexington, MA 02421

Re: Mid-cycle Review and Verification of previous Program Review Corrective Action Plan

|  |
| --- |
| A - Community Therapeutic Summer Program  B - Community Therapeutic Day Program |

Dear Ms. Fuller:

Enclosed is the Department of Elementary and Secondary Education’s (“Department”) Mid-cycle Review Report based upon the Mid-cycle Review conducted in your private school programs in November 2016. This Mid-cycle Review Report contains the Department's findings regarding the implementation status and effectiveness of corrective steps taken in response to your previous Program Review Report issued on June 3, 2014. This report also includes a report on the status of implementation for new state or federal special education requirements enacted since your programs’ last Program Review. Because the Department determined all requirements were found to be either fully implemented or commendable during the 2014 Program Review, this Mid-cycle Review Report includes a report on the status of selected Mid-cycle Review criteria as well as the implementation of new state or federal special education requirements enacted since your programs’ last Program Review.  
  
We are pleased to indicate that the Department has determined that your programs are in substantial compliance with the selected Mid-cycle Review criteria as well as any new state or federal special education requirements enacted since your last Program Review. You and your entire staff are to be congratulated for your efforts in implementing all necessary improvements. Your program will now receive an updated status of “Full Approval.” This approval 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.  
  
The Department will notify you of your programs’ next regularly scheduled Program Review several months before it is to occur. At this time we anticipate the next routine monitoring visit to occur sometime during the 2019-2020 school year, unless the Department determines that there is some reason to schedule this visit earlier.

**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.**

Your staff's cooperation throughout these follow-up monitoring activities is appreciated. Should you require additional clarification of information included in our report, please do not hesitate to contact the Onsite Team Chairperson.

Sincerely,

Michelle Hennessy-Kowalchek, Mid-cycle Review Chairperson

Office of Approved Special Education Schools

Nina M. Marchese, M. Ed., Director

Office of Approved Special Education Schools

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

Encl.: Mid-cycle Review Report

Full Approval Certificate, Expiration Date: August 31, 2020

Community Therapeutic Summer Program

Community Therapeutic Day Program

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|  | ESE Logo | **MID-CYCLE REVIEW REPORT**  **Community Therapeutic Day School**  **MCR Onsite Dates:** **11/07/2016 - 11/08/2016**  **Programs under review for the agency:**  **A - Community Therapeutic Summer Program**  **B - Community Therapeutic Day Program** |
|  |  | Mitchell D. Chester, Ed.D.  Commissioner of Elementary and Secondary Education |
| **MID-CYCLE REVIEW REPORT** | | |

| **PS Criterion #2.2 - Approvals, Licenses, Certificates of Inspection** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated that there were current approvals, licenses and certificates of inspection for all buildings used by the students. |

| **PS Criterion #2.3 - EEC Licensure (Residential Programs Only)** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| This standard is not applicable to day programs. |

| **PS Criterion #4.5 - Immediate Notification** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated that the policy on Immediate Notification regarding serious incidents meets the current requirements and included notification to appropriate parties of such incidents, as well as the person responsible for oversight. A review of student records showed that the program maintains copies of all incidents regarding students. |

| **PS Criterion #5.1 - Student Admissions** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated that the Student Admissions Policy contained all required elements of this criterion, including that the program maintains a copy of its policies and procedures manual on site and that the program provides annual written notice to the parents of enrolled students that copies of its policies and procedures manual are available upon request. |

| **PS Criterion #6.1 - Daily Instructional Hours** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated that all students were scheduled to receive the required number of instructional hours. |

| **PS Criterion #6.4 - School Days Per Year** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated that the required number of school days was scheduled for all students. |

| **PS Criterion #8.5 - Current IEP & Student Roster** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and student records indicated that there was a current IEP for each enrolled Massachusetts student that had been issued by the responsible public school district and consented to by the student's parent or student, when applicable. In student records where an IEP was found to not be current, there was documentation of the program?s efforts to obtain a current IEP from the responsible school district. |

| **PS Criterion #9.1 - Polices and Procedure for Behavior Support** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and interviews indicated that the program has developed and is implementing written Behavior Support Policies and Procedures consistent with the regulations under 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. Behavior support policies and procedures are reviewed annually and are provided to staff annually and made available to parents of enrolled students. |

| **PS Criterion #9.1(a) - Student Separation Resulting from Behavior Support** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the policies and procedures regarding Student Separation Resulting from Behavior Management include that a student must be continuously observed by a staff member at all times, staff shall be with the student or immediately available to the student at all times, procedures are in place for obtaining principal approval of the time-out for more than 30 minutes based upon the student?s continuing agitation and that time out shall cease as soon as the student has calmed. |

| **PS Criterion #9.4 - Physical Restraint** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the program administers physical restraints only in emergency situations of last resort when needed to protect a student and/or a member of the school community for assault or imminent, serious, physical harm and with extreme caution in order to prevent or minimize any harm to the student as a result of the use of physical restraint. |

| **PS Criterion #11.1 - Staff Policies and Procedures Manual** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated that the program has personnel policies and procedures that include the following: criteria and procedures for hiring, Criminal Offender Record Information, fingerprint requirements, evaluation of staff, discipline of staff, the handling of staff complaints, a plan for using volunteer and/or intern services and a statement of equal access for employment and/or educational opportunities. |

| **PS Criterion #11.3 - Educational Administrator Qualifications** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated that the Educational Administrator possessed the required qualifications to serve in this position. |

| **PS Criterion #11.4 - Teachers (Special Education Teachers and Regular Education Teachers)** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated that at the time of the Mid-cycle Review, the teaching staff were appropriately licensed or had been granted an appropriate waiver for the 2016-2017 school year. |

| **PS Criterion #11.5 - Related Services Staff** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated that the staff providing or supervising the provision of related services were appropriately certified, licensed or registered in their professional areas. |

| **PS Criterion #11.6 - Master Staff Roster** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation indicated the Master Staff Roster contained the name, program job title, corresponding Uniform Financial Report (UFR) title number and full-time equivalent (FTE) for all staff. The Master Staff Roster accurately corresponded to the last approved staffing plan. |

| **PS Criterion #11.12 - Equal Access** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that all students were provided with equal access to services, facilities, activities and benefits regardless of race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness. |

| **PS Criterion #12.1 - New Staff Orientation and Training** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff records indicated that the program has a written plan for New Staff Orientation and Training that includes all mandated trainings prior to staff being assigned direct care duties with students and such training was documented in staff records. |

| **PS Criterion #12.2 - In-Service Training Plan and Calendar** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff records indicated that the program has an In-Service Training Plan and Calendar that shows that staff receive training in all mandated training topics annually, the program has a plan for staff to participate in outside training opportunities and that staff receive an average of two hours of training each month in which the school is in session. In addition, such training was documented in staff records. |

| **PS Criterion #13.2 - Kitchen, Dining, Bathing/Toilet and Living Areas** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| Observations and staff interviews indicated that the program provides the facilities, textbooks, equipment, technology, materials and supplies needed to provide the special education services specified on the IEP's of enrolled students. |

| **PS Criterion #14.2 - Food and Nutrition** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that all meals are included in the rate of the program, which makes breakfast and lunch available to publicly-funded students with disabilities as they would have access to such meals in their sending school district. A copy of the written plan describing the methods for purchase, storage, preparations and serving of food as well as the name and title of the person(s) responsible for oversight of the purchase, storage and preparations were also submitted. |

| **PS Criterion #15.5 - Parent Consent and Required Notification** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and student records indicated that the program maintains annual required parental consents for each student. |

| **PS Criterion #19 - Anti-Hazing** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| This standard is not applicable to day or summer program as the programs are not secondary programs. |

| **PS Criterion #20 - Bullying Prevention and Intervention** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the student admissions materials/handbook was updated to conform to the updated amended Bullying Prevention and Intervention Plan (?Plan?) and was consistent with the amendments to the Massachusetts anti-bullying law, including making clear that a member of the school staff may be named the ?aggressor? or ?perpetrator? in a bullying report. There was evidence of staff, students and parents/guardians having been annually notified in writing of the Plan and a professional development plan was in place for all staff, with evidence of its implementation provided. |