***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 2, 2019

Ms. Barbara Salisbury

Executive Director

Massachusetts Association for the Blind, Inc.

200 Ivy Street

Brookline, MA 02446

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

|  |
| --- |
| A - Ivy Street Residential ProgramB - Ivy Street Day Program  |

Dear Ms. Salisbury:

Enclosed is the Department of Elementary and Secondary Education’s (“Department”) Mid-cycle Review Report based upon the Mid-cycle Review conducted in your approved special education school programs in October 2018. 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 August 15, 2016. This report also includes the implementation of new state or federal special education requirements enacted since the last Program Review.

We have 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,” 603 CMR 18.00 “Program And Safety Standards For Approved Public Or Private Day And Residential Special Education School Programs,” and 603 CMR 46.00 “Prevention of Physical Restraint and Requirements, If Used.” 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 the next regularly scheduled Program Review several months before it is to occur. At this time we anticipate the next routine monitoring visit to occur during the 2021-2022 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 Griffin, Supervisor

Office of Approved Special Education Schools

Nina M. Marchese, M.Ed., Director

Office of Approved Special Education Schools

c: Jeffrey Riley, Commissioner of Elementary and Secondary Education

 Michael O’Friel, President, Massachusetts Association for the Blind Board of Directors

 Jannelle Roberts, Educational Specialist, Office of Approved Special Education Schools

Encl.: Mid-cycle Review Report

Full Approval Certificate, Expiration Date: August 31, 2022

 Ivy Street Residential Program

 Ivy Street Day Program

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| --- | --- | --- |
|  | ESE Logo | **MID-CYCLE REVIEW REPORT****Massachusetts Association for the Blind, Inc.****MCR Onsite Dates:** **10/24/2018 - 10/25/2018****Programs under review for the agency:****A - Ivy Street Residential Program****B - Ivy Street Day Program**  |
|   |  | Jeffrey RileyCommissioner of Elementary and Secondary Education |
| **MID-CYCLE REVIEW REPORT** |

| **PS Criterion #1.2 - Program & Student Descriptions, Program Capacity** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation was submitted that now accurately describes the 1) Identified population of students served; 2) Ages of students; 3) Educational characteristics; and 4) Behavioral characteristics. The Program and Student Descriptions are now consistent with DESE's most recent approval of the program. |

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

| **PS Criterion #2.3 - EEC Licensure (Residential Programs Only)** |
| --- |
| **Rating:** |
| Not Applicable |
| **Applies To:** |
| B - Ivy Street Day Program |
| **Basis for Findings:** |
| This criterion is not applicable to the day program. |

| **PS Criterion #2.3 - EEC Licensure (Residential Programs Only)** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| A - Ivy Street Residential Program |
| **Basis for Findings:** |
| A review of documentation indicated that there was a current license from the Department of Early Education and Care for all residential facilities. |

| **PS Criterion #4.4 - Advance Notice of Proposed Program/Facility Change** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the programs has now developed and implemented written procedures for notifying the Department of substantial changes within its programs or physical plants and has identified the person responsible for such notification. Documentation and staff interviews also indicated that the programs have implemented procedures to notify the Department of any sudden or unexpected changes that may impact the overall health and safety of the students and/or the delivery of IEP services. |

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

| **PS Criterion #6.1 - Daily Instructional Hours/6.4 School Days Per Year** |
| --- |
| **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 per year, and that the required number of school days per year was scheduled for all students. |

| **PS Criterion #8.5 - Current IEP & Student Roster** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of student records indicated that there was a current Individualized Education Program (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 the student, when applicable. In student records where an IEP was found not to be current, there was documentation of the program's efforts to obtain a current IEP from the responsible school district. |

| **PS Criterion #9.1 - Policies and Procedure for Behavior Support** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and interviews indicated that the programs have developed and are implementing written Policies and Procedures for Behavior Support that are 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 Support include that a student must be continuously observed by a staff member at all times, that staff shall be with the student or immediately available to the student at all times, that procedures are in place for obtaining principal approval of the student separation for more than 30 minutes based upon the student's continuing agitation, and that student separation 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, student records 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 from 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 #10.1 - Staffing for Instructional Groupings** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and classroom observations indicated that the programs now has instructional groupings that do not exceed the DESE approved Student: Licensed Educator ratio or Student: Licensed Educator: Aide ratio. |

| **PS Criterion #11.1 - Staff Policies and Procedures Manual** |
| --- |
| **Rating:** |
| Partially Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of staff records and interviews indicated that the program does not follow its own procedures for the evaluation of staff. Staff evaluations were found in some, but not all, staff records. |
| **Department Order of Corrective Action:** |
| The program must ensure that staff evaluations are completed, consistent with its policy. |
| **Required Elements of Progress Reports:** |
| By February 14, 2019, the program must provide a list of all staff with the following information: name of staff (alphabetically by last name), position title; date of hire; date staff evaluation is due; name of individual responsible for completing staff evaluation; title of position of person responsible for completing evaluation; and the date the staff evaluation was completed and signed by the employee and his/her supervisor. |
| **Progress Report Due Date(s):** |
| 02/14/2019 |  |  |  |

| **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 General 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 2018-2019 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 that the Master Staff Roster contained the names, program job titles, corresponding Uniform Financial Report (UFR) title numbers and full-time equivalents (FTEs) for all staff. The Master Staff Roster also accurately corresponded to the most recently approved DESE staffing plan. |

| **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, that 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 for each month the school is in session. In addition, such training was documented in staff records. |