***Massachusetts Department of***

***Elementary and Secondary Education***

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| Jeffrey C. Riley*Commissioner* |  |

December 17, 2019

Leigh Mahoney

Executive Director

Robert F. Kennedy Children’s Action Corps

40 Court Street, Ste. 410

Boston, MA 02108

Re: Approved Special Education Schools Mid-cycle Review and Verification of previous Program Review Corrective Action Plan

A - RFK Academy Day Program

B - RFK Don Watson Academy

Dear Ms. Mahoney:

Enclosed is the Department of Elementary and Secondary Education’s (Department) Approved Special Education Schools Mid-cycle Review Report based upon the Mid-cycle Review conducted in your approved special education school programs in October 2019.

This report includes 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 29, 2017. This report also includes detailed findings describing the determination of the Department about the implementation 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.

For requirements not found to be fully implemented, the Department has prepared a Corrective Action Plan for the program that must be implemented without further delay. You will find these requirements for corrective action and further progress reporting included in the attached report, together with any steps that must be taken by the program to fully implement special education requirements.

**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 Mid-cycle Review Report.**

At this time, the Department requests that you upload a written assurance signed by you and the chairperson of your Board of Directors. This statement must contain:

1. a description of the steps the programs are taking to make the Department’s findings available to staff, parent advisory groups and the general public; and
2. an assurance that your programs will implement the corrective action ordered by the Department within the required timelines.

Please go into the WBMS and upload your program’s written assurance into Additional Documents no later than **January 6, 2020**. You can do this by accessing: > MCR > Self-Assessment > Additional Documents.

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 2022-2023 school year, unless the Department determines that there is some reason to schedule this visit earlier.

As a result of the onsite visit conducted in your programs, the Department has determined that the RFK Academy Day Program does not meet all compliance requirements as documented in the attached Mid-cycle Review Report. However, the Department has determined that the program meets health and safety standards and is able to demonstrate the ability to carry out the provisions of each enrolled student’s IEP. Therefore, the Department is issuing Provisional Approval to RFK Academy Day Program for a period indicated on the attached Approval Certificate. During this period, the approved special education school must implement the required corrective action required by the Department and submit progress report information. The Department and any school districts placing students in the program may conduct announced and unannounced monitoring visits to this program throughout the approval term.

The Full Approval certificate enclosed with this correspondence for RFK Don Watson Academy shall remain in effect until August 31, 2023 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.

**Please be advised that the attached Department Approval Certificates 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. Should you require any additional information, please do not hesitate to contact the Onsite Team Chairperson.

Sincerely,

Bridgette Mekkaoui, Mid-cycle Review Chairperson

Office of Approved Special Education Schools

Nina M. Marchese, M.Ed., Director

Office of Approved Special Education Schools

c: Alan J. Klein, President of the Board of Directors

 Jeffrey C. Riley, Commissioner of Elementary and Secondary Education

 Russell Johnston, Ph.D., Senior Associate Commissioner

 Karen Brann, Supervisor, Office of Approved Special Education Schools

Encl.: Mid-cycle Review Report

Full Approval Certificate, Expiration Date: August 31, 2023

 RFK Don Watson Academy

Provisional Approval Certificate, Expiration Date: June 13, 2020

 RFK Academy Day Program

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|  |  | **MID-CYCLE REVIEW REPORT****Robert F. Kennedy Children’s Action Corps****MCR Onsite Dates:** **10/21/2019 - 10/22/2019****Programs under review for the agency:****A - RFK Academy Day Program****B - RFK Don Watson Academy**  |
|   |  | Jeffrey C. 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 indicated that the Face Sheet, Statement of Assurances, and the narrative describing the program capacity and student characteristics showed accurate and current information. |

| **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:** |
| All |
| **Basis for Findings:** |
| This standard is not applicable to the day program. |

| **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 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 #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 documentation and 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 staff interviews indicated that the program has developed and is implementing written Policies and Procedures for Behavior Support 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:** |
| B - RFK Don Watson Academy Day Program |
| **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 #9.1(a) - Student Separation Resulting from Behavior Support** |
| --- |
| **Rating:** |
| Partially Implemented |
| **Applies To:** |
| A - RFK Academy Day Program |
| **Basis for Findings:** |
| A review of documentation, observations, and staff interviews indicated that the program is not consistently documenting all time students spend outside of their classrooms for the purpose of calming when the total time out was less than approximately five minutes. Additionally, observations indicated that students are, at times, alone in quiet rooms, although staff interviews indicated that administrators and teachers would rotate supervision, in intervals, of students in these spaces. The remaining parts of the program's Policies and Procedures for Student Separation meet the requirements of this criterion. |
| **Department Order of Corrective Action:** |
| The program should create a log to be used each time a student leaves the classroom for the purpose of calming. The log should be readily available near each space used for calming and should include space for the student name, reason for being in the quiet space, time in, time out, and space to include interventions used to get the student back to the classroom, along with regular sign-offs by staff that the student is being monitored closely. The program should submit their log for approval, and will be asked to submit a statement that all staff have been trained on its' use, as well as a sample of logs after implementation in the school. |
| **Required Elements of Progress Reports:** |
| 01/10/2020: Program must submit student separation resulting from behavior support log to be used at each quiet space with all required fields included. 02/28/2020: Program must submit a statement of assurances that all staff have been trained on the use of the student separation resulting from behavior support logs when students are utilizing quiet spaces, as well as sample of completed logs after implementation of approved form. |
| **Progress Report Due Date(s):** |
| 01/10/2020 | 02/28/2020 |  |  |

| **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 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. Documentation, a review of student records and staff interviews indicated that Physical Restraint Policies and Procedures were consistent with requirements under 603 CMR 46.00. |

| **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 at the time of the Mid-cycle Review 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 at the time of the Mid-Cycle Review, the Master Staff Roster contained the names, program job titles, corresponding Uniform Financial Report (UFR) title numbers and full-time equivalents (FTE) for all staff. The Master Staff Roster also accurately corresponded to the most recently approved DESE staffing plan. |

| **PS Criterion #12.1 - New Staff Orientation and Training** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff interviews 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 that 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 interviews 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 for each month the school is in session. In addition, such training was documented in staff records. |

| **PS Criterion #13.4 - Physical Facility/Architectural Barriers** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| Observations and staff interviews indicated that the program assures 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. |