***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

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| Jeffrey C. Riley  *Commissioner* |  |

12/09/2021

Ivy Medeiros

Executive Director

Stevens Children's Home

24 Main Street

Swansea, MA 02777

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

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| --- |
| A - Stevens Residential Program  B - Stevens Day Program |

Dear Ms. Medeiros:

Enclosed is the Department of Elementary and Secondary Education (“Department”) Approved Special Education Schools Mid-cycle Review Final Report based on the virtual Mid-cycle Review conducted in your approved special education school programs in November 2021.

This report includes detailed findings describing the determinations of the Department about the implementation status of each requirement status of selected Mid-cycle Review criteria as well as implementation of new state or federal special education requirements enacted since your programs’ last Program Review. Please note that all requirements were found to be fully implemented; therefore, the Department does not need to order a Corrective Action Plan.

At this time, the Department requests that you upload a separate statement signed by you and the Chairperson of your Board of Directors which describes the steps the programs are taking to make the findings of the Department available to staff, parent groups, and the general public. Please go into the WBMS and upload your programs’ statement that has been signed by you and the Chairperson of your Board of Directors into Additional Documents no later than **DATE**. You can do this by accessing: > MCR > Self-Assessment > Additional Documents.

The Approval Certificates enclosed with this correspondence shall remain in effect until August 31, 2025 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 programs as required by 603 CMR 28.09.

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 2024-2025 school year, unless the Department determines that there is some reason to schedule this visit earlier.

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 virtual review process. Should you require any additional information, please do not hesitate to contact the Team Chairperson.

Sincerely,

Christina Belbute, Chairperson

Office of Approved Special Education Schools

Nina M. Marchese, M.Ed., Director

Office of Approved Special Education Schools

c: Joyce Moore, President of the Board of Directors, Stevens Children’s Home

Robin Passerello, Educational Director, Stevens Children’s Home

Jeffrey C. Riley, Commissioner of Elementary and Secondary Education

Russell Johnston, Ph.D., Senior Associate Commissioner

Joanne K. Morris, Supervisor, Office of Approved Special Education Schools

Encl.: Mid-cycle Review Report

Full Approval Certificate, Expiration Date: August 31, 2025

Stevens Residential Program

Stevens Day Program

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| DESE logo  **MID-CYCLE REVIEW REPORT**  **Stevens Children's Home**  **MCR Onsite Dates:** **11/08/2021 - 11/09/2021**  **Programs under review for the agency:**  **A - Stevens Residential Program**  **B - Stevens Day Program**    State Seal of Massachusetts |
| Jeffrey C. Riley  Commissioner 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, interviews, and observations indicated that the program served students consistent with characteristics included in the approved Program & Student Description regarding the population of students to be served, ages of students, and educational and behavioral characteristics of students. |

| **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 - Stevens Day Program |
| **Basis for Findings:** |
| This standard is not applicable to the day program. |

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

| **PS Criterion #3.1(d) - Evacuation and Emergency Procedures** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and interviews indicated that the program has developed and implemented Evacuation and Emergency Procedures that comply with 603 CMR 18.05(10). |

| **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 #5.2(a) - Contracts** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of student records indicated the program maintained a signed written contract for each enrolled student consistent with the requirements of 603 CMR 28.06(3)(f). |

| **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 #8.8 - IEP - Progress Reports** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of student records indicated that parents receive reports on students progress towards reaching the goals set in their IEPs, that progress report information sent to parents includes written information on progress toward annual IEP goals; and that the program sent copies of progress reports to parents/guardians, public school districts and state agencies as applicable. |

| **PS Criterion #9.7 - Terminations** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the program has developed and implements a written termination policy that includes provisions related to planned and emergency termination, and that the policy is compliant with regulatory requirements. |

| **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 the teaching staff were appropriately licensed or had been granted an appropriate waiver for the 2021-2022 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 - 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 #11.10 - Supervision of Direct Care Day and Residential Staff** |
| --- |
| **Rating:** |
| Implemented |
| **Applies To:** |
| All |
| **Basis for Findings:** |
| A review of documentation, staff records, and interviews indicated the program has developed and implemented a written plan to indicate how regularly scheduled conferences occur between residential childcare workers and residential supervisors. Review of documentation, staff records, and interviews also indicated the program provided regular supervision of all direct care workers by someone who has supervisory and administrative responsibility within the program, and regularly scheduled conferences occurred between direct care workers and supervisor and between teachers, direct care workers, and other educational personnel. |

| **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 training 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 #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:** |
| A review of student records indicated all secondary age students received a copy of the anti-hazing legislation and that the program's anti-hazing disciplinary code approved by the Board of Directors had been distributed to all secondary school age students. |