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|  | ESE Logo | **COORDINATED PROGRAM REVIEW**  **MID-CYCLE REPORT**  **District:** **Holyoke Public Schools**  **MCR Onsite Dates:** **04/04/2016 - 04/08/2016**  **Program Areas: Special Education & Civil Rights** |
|  |  | Mitchell D. Chester, Ed.D.  Commissioner of Elementary and Secondary Education |
| COORDINATED PROGRAM REVIEW **MID-CYCLE REPORT** | | |

| **SE Criterion # 2 - Required and optional assessments** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Record review and interviews indicated that the district consistently completes required and optional assessments consented-to by the parents of referred students. Record review demonstrated that educational assessments, including a history of the student's educational progress in the general curriculum, teacher assessment that addresses attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults, and consented-to assessments in the area of suspected disability are included in the student record. |

| **SE Criterion # 3 - Special requirements for determination of specific learning disability** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Record review and interviews indicated that the district completes the required written eligibility determination and the four components used to determine eligibility for students suspected of having a specific learning disability (SLD): Historical Review and Educational Assessment (SLD 1); Area of Concern and Evaluation Method (SLD 2); Exclusionary Factors (SLD 3); and Observation (SLD 4). Record review also indicated that IEP Team members sign the written eligibility determination. |

| **SE Criterion # 3A - Special requirements for students on the autism spectrum** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Record review, document review, and an interview demonstrated that whenever an evaluation indicates that a student has a disability on the autism spectrum, the IEP Team considers and specifically addresses the following: 1) the verbal and nonverbal communication needs of the student; 2) the need to develop social interaction skills and proficiencies; 3) the needs resulting from the student's unusual responses to sensory experiences; 4) the needs resulting from resistance to environmental change or change in daily routines; 5) the needs resulting from engagement in repetitive activities and stereotyped movements; 6) the need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from autism spectrum disorder; and 7) other needs resulting from the student's disability that impact progress in the general curriculum, including social and emotional development. |

| **SE Criterion # 4 - Reports of assessment results** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Record review and interviews indicated that assessment summaries include procedures employed and diagnostic impressions, identifying the student’s educational needs and offering explicit means of meeting those needs. Student records also indicated that the assessment summaries are completed prior to discussion by the Team and made available for parents at least two days prior to the Team meeting, if requested. |

| **SE Criterion # 6 - Determination of transition services** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and interviews indicated that the Team discusses the student’s transition needs annually beginning no later than when the student is 14 years old and documents its discussion on the Transition Planning Form, also updating information in the IEP, as appropriate. However, the district is not consistently inviting students to Team meetings starting when they are 14 years of age. | | | |
| **Department Order of Corrective Action:** | | | |
| Provide training to Special Education Coordinators and Evaluation Team Leaders at the high school level on the procedures for inviting students 14 years of age and older to Team meetings where transition services will be discussed.  Develop an internal oversight and tracking system to ensure that students 14 years of age and older are invited to IEP Team meetings. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance.  For those students whose records were identified by the Department, reconvene the IEP Team meeting and invite the student, updating the IEP and Transition Planning Form, as appropriate.  Subsequent to implementation of all corrective actions, conduct a review of a sample of student records from Team meetings held in which the student is 14 years of age or older, for evidence that students are invited to Team meetings in which transition services are discussed.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Provide evidence (agenda, attendance sheet with staff name, role and signature, and materials used) of training by **November 10, 2016.**  Provide a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible by **November 10, 2016.**  For those student records identified by the Department, submit a copy of the Team Meeting Invitation (N3), Team Meeting Attendance Sheet (N3A), updated IEP or any amendments to the IEP by **November 10, 2016**.  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 | 02/28/2017 |  |  |

| **SE Criterion # 7 - Transfer of parental rights at age of majority and student participation and consent at the age of majority** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and interviews indicated that the district informs students of the transfer of educational decision-making rights at least one year prior to the student turning 18 years of age, but does not consistently document the student’s decision to share or delegate decision making or implement procedures to obtain consent from the student to continue his or her special education program. | | | |
| **Department Order of Corrective Action:** | | | |
| Provide training to Special Education Coordinators and Evaluation Team Leaders at the high school level on the procedures for documenting the student’s decision to share or delegate decision-making authority, and obtaining the student’s consent at the age of majority. Please refer to *Administrative Advisory SPED 2011-1 on the Age of Majority* at <http://www.doe.mass.edu/sped/advisories/11_1.html>  Develop an internal oversight and tracking system to ensure that the decision to share or delegate decision-making is appropriately documented, and that consent is obtained from the student to continue the special education services at the age of majority. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance.  For those students whose records were identified by the Department, provide evidence of shared or delegated decision-making and obtain consent for the continuation of the special education program.  Conduct a review of a sample of records of students who turned 18 after implementation of all corrective actions for evidence that the district is documenting the student’s decision to share or delegate decision-making authority and the district is obtaining consent from the student for the continuation of the special education program.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Provide evidence (agenda, attendance sheet with staff name, role and signature, and materials used) of training by **November 10, 2016.**  Provide a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible by **November 10, 2016**.  For those student records identified by the Department, submit evidence of the student’s decision to share or delegate decision-making authority, and the signature page of the IEP to document that the student with decision-making rights has signed the IEP. Submit this information by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
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| **SE Criterion # 8 - IEP Team composition and attendance** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and interviews indicated that required IEP Team members are not consistently attending Team meetings. When the required Team member is unable to attend, the parent and the district do not always agree in writing to excuse the Team member and the Team member is not providing written input into the development of the IEP prior to the meeting. Specifically, general education and special education teachers are not consistently in attendance. | | | |
| **Department Order of Corrective Action:** | | | |
| Review those records in which a Team meeting was held since the start of the 2016-2017 school year and in which all required Team members were not in attendance and the excusal process was not documented. Analyze the information to determine the root cause(s) of the non-compliance. Based on the results of the analysis, describe the steps the district will take to correct the non-compliance and provide a timeline for the implementation of those corrections.  Conduct a review of a sample of student records from across all grade levels and schools for students whose Team meetings were held after implementation of all corrective actions, for evidence that required Team members are in attendance and appropriate excusal procedures are followed if the Team member is unable to attend.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit the results of the root cause analysis that includes a description of the district's proposed corrective actions, the timeline for implementation, and the person(s) responsible by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 | 02/28/2017 |  |  |

| **SE Criterion # 9 - Timeline for determination of eligibility and provision of documentation to parent** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and interviews indicated that the district does not consistently convene IEP Team meetings and provide parents with either the proposed IEP and placement or finding of no eligibility within 45 school working days after receipt of the parents' written consent to an initial evaluation or re-evaluation. | | | |
| **Department Order of Corrective Action:** | | | |
| Review those records in which an initial evaluation or re-evaluation was conducted from December 2015 through October 2016 and in which the Team meeting to determine the student’s eligibility and the provision of the proposed IEP and placement did not occur within 45 school working days. Analyze the information to determine the root cause(s) of the non-compliance. Based on this root cause analysis, indicate the specific corrective actions the district will take to remedy the non-compliance and a timeline for implementation of those corrective actions.  Develop a report of the results of an internal review of student records, in which initial evaluations or re-evaluations were conducted subsequent to implementation of all corrective actions, to ensure that eligibility determinations are conducted and provision of the proposed IEP and placement or finding of no eligibility occurs within 45 school working days of receipt of written parental consent.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit the results of the root cause analysis that includes a description of the district's proposed corrective actions, the timeline for implementation, and the person(s) responsible by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
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| 11/10/2016 | 02/28/2017 |  |  |

| **SE Criterion # 10 - End of school year evaluations** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Record review indicated that if consent for an evaluation is received between 30 and 45 school working days before the end of the school year, the district ensures that a Team meeting is scheduled to enable the provision of a proposed IEP and placement or written finding that the student is not eligible no later than 14 days after the end of the school year. |

| **SE Criterion # 12 - Frequency of re-evaluation** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and interviews indicated that the district does not consistently conduct re-evaluations every three years. | | | |
| **Department Order of Corrective Action:** | | | |
| Review those records in which a re-evaluation was due from December 2015 through October 2016, but was not conducted within three years of the prior evaluation. Analyze the information to determine the root cause(s) of the non-compliance. Based on this root cause analysis, indicate the specific corrective actions the district will take to remedy the non-compliance and a timeline for implementation of those corrective actions.  Subsequent to the implementation of all corrective actions, develop a report of the results of an internal review of student records in which re-evaluations were due to determine whether the district is conducting re-evaluations every three years.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit the results of the root cause analysis that includes a description of the district's proposed corrective actions, the timeline for implementation, and the person(s) responsible by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
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| 11/10/2016 | 02/28/2017 |  |  |

| **SE Criterion # 13 - Progress Reports and content** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and interviews indicated that the district does not consistently provide progress reports to parents as frequently as non-disabled students receive report cards (four times per year for secondary students, three times per year for elementary and middle school students, and one time per year for preschoolers); not all progress reports provide information specific to the annual IEP goal; and summaries of academic achievement and functional performance are not consistently developed for students who are graduating or whose eligibility terminates because the student is exceeding the age of eligibility*.* | | | |
| **Department Order of Corrective Action:** | | | |
| Provide training to Special Education Coordinators, Evaluation Team Leaders, special education teachers and related service providers on the procedures for providing progress reports to parents as frequently as parents are informed of the progress of non-disabled students; providing information specific to the annual IEP goal; and developing summaries of academic achievement and functional performance for students who are graduating or exceeding the age of eligibility.  Develop an internal oversight and tracking system to monitor the issuance and content of progress reports, as well as the development of summaries of academic achievement and functional performance. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance.  Conduct a review of a sample of student records across all grade levels and schools, after all corrective actions are completed, to determine if the district is addressing all goals in the IEP and issuing progress reports to parents as frequently as non-disabled students receive report cards.  Conduct a review of a sample of student records at the high school level, after all corrective actions have been implemented, to determine if the district is developing summaries of academic achievement and functional performance for students who are graduating or exceeding the age of eligibility.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Provide evidence (agenda, attendance sheet with staff name, role and signature, and materials used) of training by **November 10, 2016.**  Provide a detailed description of the district's internal oversight and tracking system including periodic reviews and identify the person responsible by **November 10, 2016.**  Submit the results of the internal reviews of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
| **Progress Report Due Date(s):** | | | |
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| **SE Criterion # 14 - Review and revision of IEPs** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and interviews indicated that annual review IEP Team meetings are not consistently held on or before the anniversary date of the IEP to review the student's progress, to develop a new IEP, or refer the student for a reevaluation, as appropriate. | | | |
| **Department Order of Corrective Action:** | | | |
| Review those records in which the annual review IEP Team meeting was due since the start of the 2016-2017 school year, but was not conducted on or before the anniversary date of the IEP. Analyze the information to determine the root cause(s) of the non-compliance. Based on this root cause analysis, indicate the specific corrective actions the district will take to remedy the non-compliance and a timeline for implementation of those corrective actions.  Subsequent to the implementation of all corrective actions, develop a report of the results of an internal review of student records in which annual review IEP Team meetings were due to determine whether the Team meeting is held on or before the anniversary date of the IEP.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit the results of the root cause analysis that includes a description of the district's proposed corrective actions, the timeline for implementation, and the person(s) responsible by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 | 02/28/2017 |  |  |

| **SE Criterion # 18A - IEP development and content** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review, document review, and interviews indicated that students whose disability affects social skills development or who may be vulnerable to bullying, harassment and teasing do not consistently have IEPs that identify skills and proficiencies needed to avoid and respond to bullying, harassment and teasing. However, students on the autism spectrum have IEPs that identify skills and proficiencies needed to avoid and respond to bullying, harassment and teasing. | | | |
| **Department Order of Corrective Action:** | | | |
| Develop procedures to ensure that IEP Teams consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing when a student's disability affects social skills development or when the student's disability makes him or her vulnerable to bullying, harassment, or teasing. Conduct training for Special Education Coordinators and Evaluation Team Leaders on these procedures. Please review the Department’s guidance at <http://www.doe.mass.edu/sped/advisories/11_2ta.html> and <http://www.doe.mass.edu/bullying/considerations-bully.html>.    Develop an internal oversight and tracking system for ensuring that IEP Teams consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure ongoing compliance.  For those students whose records were identified by the Department, reconvene the IEP Teams for consideration and development of bullying, harassment and teasing proficiencies, skills and supports.  Subsequent to implementation of all corrective actions, conduct an internal review of records across grade levels and schools for those students whose disability affects social skills development or when the student's disability makes him or her vulnerable to bullying, harassment, or teasing, to ensure that the IEP Teams consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing.  \* **Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit the procedures and evidence of training (agenda, attendance sheet with staff name, role and signature, and materials used) by **November 10, 2016.**  Provide a detailed description of the district's internal oversight and tracking system including periodic reviews and identify the person responsible by **November 10, 2016.**    For those student records identified by the Department, submit a copy of the IEP and the Team Meeting Attendance Sheet (N3A) indicating that the IEP Teams have reconvened. Submit this information by **November 10, 2016**.  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
| **Progress Report Due Date(s):** | | | |
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| **SE Criterion # 18B - Determination of placement; provision of IEP to parent** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and interviews indicated that following the development of the IEP, the district does not propose the IEP within 3-5 days or, alternatively, within two calendar weeks when the parents are provided a summary at the conclusion of the Team meeting. When meeting summaries are provided, the summaries contain a service delivery grid describing the types and amounts of special education services proposed, but they do not consistently include a statement of the major goals associated with these services. Additionally, the district does not provide two copies of the proposed IEP and placement to the parent.  The district closed the Center for Excellence, an unapproved public day program for special education students, which was also the subject of the finding in the previous Coordinated Program Review.  See also SE 29. | | | |
| **Department Order of Corrective Action:** | | | |
| Establish a system for issuing two copies of the proposed IEP and placement, along with the required notice, immediately following development. Provide training to Special Education Coordinators and Evaluation Team Leaders on this system, as well as on providing complete Team meeting summaries.  Develop an internal oversight and tracking system to ensure that parents are receiving two copies of the proposed IEP and proposed placement, along with the required notice, immediately, and the district is providing complete Team meeting summaries. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance.  Conduct an internal review of a sample of student records across all grade levels and schools, for Team meetings held after all corrective actions have been implemented, to determine compliance with:   * Timelines for issuing the proposed IEP and proposed placement * Summary notes that include a completed IEP service delivery grid and a statement of the major goal areas * Issuing two copies of the proposed IEP and placement to parents   **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Provide a description of the district's new system for issuing IEPs to parents, identifying key personnel responsible, and evidence (agenda, attendance sheet with staff name, role and signature, and materials used) of training on the new system and on writing complete Team meeting summaries by **November 10, 2016**.  Provide a detailed description of the district's internal oversight and tracking system including periodic reviews and identify the person responsible by **November 10, 2016.**  Submit the results of the internal reviews of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
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| **SE Criterion # 20 - Least restrictive program selected** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Record review and interviews indicated that IEP Teams consistently justify why a student's removal from the regular education classroom is considered critical to the student's program and provide the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. |

| **SE Criterion # 24 - Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and interviews indicated that when a student is referred for special education eligibility, a Notice of Proposed School District Action (N1), seeking the consent of the parent for an evaluation to occur, is sent home within five days. N1 forms are typically found in the student records, however, they are frequently incomplete and are not individualized to the student. Specifically, the N1 forms contain identical language for multiple students and do not include required information on the evaluation procedures and tests used as a basis for the district’s proposed action. | | | |
| **Department Order of Corrective Action:** | | | |
| Provide training to Special Education Coordinators and Evaluation Team Leaders on writing N1 forms that are complete and individualized to the student.  Develop an internal oversight and tracking system to ensure that the district responds to all questions on page 2 of the N1 form, and individualizes those responses for each student. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance.  Conduct a review of a sample of student records from across all grade levels and schools in which Team meetings were held after all corrective actions have been implemented, to determine whether the N1 forms are complete and individualized to the student.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Provide evidence of training (agenda, attendance sheet with staff name, role and signature, and materials used) by **November 10, 2016.**  Provide a detailed description of the district's internal oversight and tracking system including periodic reviews and identify the person responsible by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
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| **SE Criterion # 25 - Parental consent** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Record review and interviews indicated that when parents fail to provide consent for evaluations or fail to sign the IEP, the district contacts parents in a timely manner and documents its attempts to secure consent. Record review indicated that the district uses a variety of methods to obtain consent, such as letters, emails and phone calls. |
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| **SE Criterion # 26 - Parent participation in meetings** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| The district provided the special education student roster as required by the Department. |

| **SE Criterion # 27 - Content of Team meeting notice to parents** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Record review indicated that the district’s Team Meeting Invitation (N3) includes the required information, specifically the persons invited to the IEP Team meeting, the purpose of the meeting, and the time and location of the meeting. |

| **SE Criterion # 29 - Communications are in English and primary language of home** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review and staff interviews indicated that not all important special education documents, such as IEPs, notices, and assessment summaries, are translated into the parents' primary languages. Translated IEPs are sometimes sent to the parent one to three months after the Team meeting and there is no system in place to document oral communications. Additionally, student record review and interviews indicated that interpreters are not consistently present at Team meetings where the primary language of the home is other than English. | | | |
| **Department Order of Corrective Action:** | | | |
| Develop procedures for translating special education documents and ensuring this information is provided to parents in a timely manner. Also develop procedures for documenting oral communications and ensuring that interpreters are present at IEP Team meetings for parents whose primary language of the home is other than English and require such services. Train Special Education Coordinators, Evaluation Team Leaders and other staff members identified as responsible for translations on these procedures.  Develop an internal oversight and tracking system to ensure that all important special education documents are translated and provided to parents in a timely manner; that oral communications are documented; and that interpreters are present at Team meetings where parents require interpreting services. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance.  For those student records identified by the Department, translate the IEPs, notices and assessment summaries, and provide evidence that the Team has reconvened with an interpreter present.  Subsequent to implementation of all corrective actions, conduct an internal review of a sample of student records across all grade levels and schools in which communications with the home are in a language other than English and who require interpretation at Team meetings, for evidence that special education documents have been translated and that interpreters are present at Team meetings.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit the procedures and evidence of training (agenda, attendance sheet with staff name, role and signature, and materials used) by **November 10, 2016.**  Provide a detailed description of the district's internal oversight and tracking system including periodic reviews and identify the person responsible by **November 10, 2016.**  For those records identified by the Department, submit the translated IEPs, notices, assessment summaries, Team Meeting Invitation (N3) and Team Meeting Attendance Sheet (N3A) by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 | 02/28/2017 |  |  |

| **SE Criterion # 34 - Continuum of alternative services and placements** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| The district closed the Center for Excellence, an unapproved public day program for special education students, which was the subject of the finding in the previous Coordinated Program Review (CPR). |

| **SE Criterion # 37 - Procedures for approved and unapproved out-of-district placements** | | | |
| --- | --- | --- | --- |
| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review, document review andinterviews indicated thatthe district did not have a written contract with all out-of-district placements and did not demonstrate that it consistently monitors the provision of services to students placed in out-of-district programs. | | | |
| **Department Order of Corrective Action:** | | | |
| Develop procedures for securing contracts with out-of-district placements and for monitoring the services of students placed in out-of-district programs. Train Special Education Coordinators and Evaluation Team Leaders responsible for out-of-district placements on these procedures.  Develop an internal oversight and tracking system to ensure that the district has a written contract with all out-of-district placements and monitors the provision of services to students placed in out-of-district placements. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance.  For those student records identified by the Department, develop written contracts with the out-of-district placements and conduct monitoring of students in these placements.  Subsequent to implementation of all corrective actions, conduct a record review of students placed in out-of-district programs for evidence of a monitoring plan and monitoring activities, as well as written contracts.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit a copy of the procedures and provide evidence of training (agenda, attendance sheet with staff name, role and signature, and materials used) by **November 10, 2016.**  Provide a detailed description of the district's internal oversight and tracking system including periodic reviews and identify the person responsible by **November 10, 2016.**  For those records identified by the Department, submit copies of the written contracts and evidence of monitoring by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 | 02/28/2017 |  |  |

| **SE Criterion # 40 - Instructional grouping requirements for students aged five and older** | | | |
| --- | --- | --- | --- |
| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Document review, interviews and facilities observations indicated that instructional groupings at Holyoke High School now conform to class size requirements for eligible students receiving services outside of the regular education classroom. However, in the Peck School’s Functional Skills class in room 237N, where students receive more than 60% of their scheduled services, there are 15 students with one special education teacher and one aide. | | | |
| **Department Order of Corrective Action:** | | | |
| Revise the instructional grouping for the Functional Skills classroom at the Peck School to ensure that for eligible students served in settings that are substantially separate, serving solely students with disabilities for more than 60% of the student’s school schedule, the district provides groupings that do not exceed:   * 8 students to 1 certified special educator, or * 12 students to 1 certified special educator and 1 aide.   Develop an internal oversight and tracking system to ensure that the instructional groupings are in compliance for students receiving services outside of the regular education classroom. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance. | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit an updated *Special Education Instructional Grouping and Age Span* document, which can be found in the WBMS Document Library, for the Functional Skills classroom at the Peck School by **November 10, 2016**.  Provide a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible by **November 10, 2016**. | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 |  |  |  |

| **SE Criterion # 41 - Age span requirements** | | | |
| --- | --- | --- | --- |
| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Document review and staff interviews indicated that student age span exceeded 48 months, without Department approval, in the following schools and special education programs:  Holyoke High School:   * Room 306 Functional English * Room 304 Functional Math * Room G3 Rise program * Room G6 Shine program   Peck School:   * Room 212S Shine program   There are no longer age span issues at the Donahue School. | | | |
| **Department Order of Corrective Action:** | | | |
| Revise the instructional groupings for the identified classrooms at Holyoke High School and the Peck School to ensure that the ages of the youngest and oldest student in any instructional grouping do not differ by more than 48 months, or request approval of a wider age range from the Department.  Develop an internal oversight and tracking system to ensure the ages of the students in instructional groupings outside of the general education classroom do not differ by more than 48 months. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance. | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit an updated *Special Education Instructional Grouping and Age Span* document, which can be found in the WBMS Document Library, for Holyoke High School and the Peck School by **November 10, 2016**.  Provide a detailed description of the internal oversight and tracking system including periodic reviews and the role of the person responsible by **November 10, 2016**. | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 |  |  |  |

| **SE Criterion # 43 - Behavioral interventions** | | | |
| --- | --- | --- | --- |
| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review indicated that the IEP Team does not consistently consider positive behavioral interventions and the possible need for a functional behavioral assessment (FBA) for students whose behavior impedes their learning or the learning of others. | | | |
| **Department Order of Corrective Action:** | | | |
| Develop procedures to ensure that IEP Teams consider positive behavioral interventions and the possible need for an FBA for students whose behavior impedes learning. Conduct training for Special Education Coordinators, Evaluation Team Leaders, school principals, and special education teachers on these procedures.  Develop an internal oversight and tracking system which includes periodic reviews by the Director of Special Education or designee to ensure the Team considers positive behavioral interventions and the possible need for an FBA for students whose behavior impedes their learning or the learning of others.  For those student records identified by the Department, reconvene the IEP Team to consider the student’s behavior, including positive behavioral interventions and the possible need for a functional behavioral assessment.  Subsequent to implementation of all corrective actions, conduct an internal review of a sample of student records from across all grade levels and schools for students whose behavior interferes with learning, for evidence that the IEP Team considered positive behavioral interventions and the possible need for a functional behavioral assessment.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit a copy of the procedures and evidence of training (agenda, attendance sheet with staff name, role and signature, and materials used) by **November 10, 2016.**  Provide a detailed description of the district's internal oversight and tracking system including periodic reviews and identify the person responsible by **November 10, 2016.**  For those student records identified by the Department, submit the Team Meeting Attendance Sheet (N3A), Notice of Proposed School District Action (N1) and functional behavioral assessment, if applicable, by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 | 02/28/2017 |  |  |

| **SE Criterion # 44 - Procedure for recording suspensions** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Document review and interviews indicated that the district had procedures in place to record the number and duration of suspensions from any part of a student's program, including suspensions from special transportation prescribed by the IEP. |

| **SE Criterion # 46 - Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district** | | | |
| --- | --- | --- | --- |
| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Record review, document review, and interviews indicated that the Team does not consistently consider the student's behavior, including behavioral interventions and the possible need for a functional behavioral assessment, as part of the manifestation determination process. Additionally, the Team does not consistently document the outcomes of the manifestation determination meetings. See also SE 43. | | | |
| **Department Order of Corrective Action:** | | | |
| Develop procedures to ensure that IEP Teams consider behavioral interventions and the possible need for an FBA as part of the manifestation determination, as well as document the outcomes of the manifestation determination meetings. Conduct training for Special Education Coordinators, Evaluation Team Leaders and school principals on these procedures.  Develop an internal oversight and tracking system to ensure that the Team considers behavioral interventions and the need for a functional behavioral assessment as part of the manifestation determination process and documents the outcomes of the manifestation determination meetings. The tracking system should include periodic reviews by the Director of Special Education or designee to ensure continuing compliance.  For those students identified by the Department, submit evidence of the outcomes of the manifestation determination meetings.  Subsequent to implementation of all corrective actions, conduct a record review of students who have had a manifestation determination meeting to determine if the Team considered behavioral interventions and the possible need for a functional behavioral assessment as part of the process, and to ensure that the outcomes of the manifestation determination meetings have been documented.  **\* Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review;**  **c) Name of person(s) who conducted the review with their role(s) and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit a copy of the procedures and evidence of training (agenda, attendance sheet with staff name, role and signature, and materials used) by **November 10, 2016.**  Provide a detailed description of the district's internal oversight and tracking system including periodic reviews and identify the person responsible by **November 10, 2016.**  For those students identified by the Department, submit evidence of the outcomes of the manifestation determination meetings by **November 10, 2016.**  Submit the results of the internal review of student records and include the following:  1. The number of records reviewed;  2. The number of records in compliance;  3. For any records not in compliance, determine the root cause; and  4. The specific corrective actions taken to remedy the non-compliance.  Please submit the above information by **February 28, 2017.** | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 | 02/28/2017 |  |  |

| **SE Criterion # 48 - Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| The district closed the Center for Excellence, which was the subject of the finding in the previous Coordinated Program Review (CPR). |

| **SE Criterion # 51 - Appropriate special education teacher licensure** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| Document review indicated that the district employs a special education teacher at the McMahon Elementary School who is not licensed and who was also identified during the last Coordinated Program Review as not having licensure or an approved waiver.  The licensure of the special education teachers in the Holyoke Public Schools is currently being monitored by the Office of District and School Turnaround. | | | |
| **Department Order of Corrective Action:** | | | |
| Ensure that the teacher is appropriately licensed or on an approved waiver from the Department. | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit a copy of the license or approved waiver for the identified teacher by **November 10, 2016**. | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 |  |  |  |

| **SE Criterion # 54 - Professional development** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Document review and staff interviews indicated that the district provides training on the required special education topics to all professional staff, including general education teachers. This training includes state and federal special education requirements and local special education policies and procedures; analyzing and accommodating diverse student learning styles for inclusion of students; and collaboration methods among teachers and paraprofessional staff to accommodate all students with diverse learning styles in the general education classroom.  Document review and staff interviews also indicated that the district provides in-service training for all locally hired and contracted transportation providers, before they begin transporting any special education student receiving special transportation, on his or her needs and appropriate methods of meeting those needs. |

| **SE Criterion # 55 - Special education facilities and classrooms** | | | |
| --- | --- | --- | --- |
| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| On-site observations indicated that occupational therapy (OT) and physical therapy (PT) services at Sullivan Elementary School are provided in a classroom that ensures privacy and confidentiality for students receiving those services. Special education services at Holyoke High School are distributed throughout the school to maximize the inclusion of special education students into the life of the school and minimize their separation or stigmatization.  Observations indicated the following issues with the district’s special education facilities and classrooms:   * Dean Technical High School: The TIP program occupies four classrooms clustered in a corner on the second floor of the school building, which does not maximize the students’ inclusion into the life of the school. The classrooms are located next to the electrical shop; however, there are no other academic classrooms in this area. * Donahue Elementary School: Three special education classrooms are clustered together at the end of a hallway along with the OT/PT room, which does not maximize the inclusion of students into the life of the school. The time out room at Donahue is approximately 3 ft x 5 ft, and due to the limited space, an injury could occur to student or staff if a staff member enters while a student is in the room. Please note that speech and language services are now conducted in a classroom, which ensures privacy and confidentiality for students receiving such services. * Peck School: The second level of the south building is comprised entirely of special education classrooms, including five TIP classrooms, one SHINE classroom, as well as a “quiet room” and an “incentive room” used by the students in these classrooms. There are no general education classrooms located in this area. The location does not facilitate the inclusion of these students into the life of the school. | | | |
| **Department Order of Corrective Action:** | | | |
| Reconfigure the classroom spaces at Dean Technical High School, Donahue Elementary School, and the Peck School, to maximize the inclusion of the students into the life of the school. Identify an alternative space for the time out room at Donahue Elementary School. | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit floor plans for the reconfigured spaces at Dean Technical High School, Donahue Elementary School and the Peck School for the 2016-2017 school year, and arrange for site visits with the Department by **November 10, 2016**. | | | |
| **Progress Report Due Date(s):** | | | |
| 11/10/2016 |  |  |  |

| **CR Criterion # 17A – Physical Restraint** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Document review and interviews indicated that the district has developed and implemented written restraint prevention and behavior support policy and procedures consistent with new regulations regarding appropriate responses to student behavior that may require immediate intervention, which went into effect on January 1, 2016. The policy and procedures include: methods for preventing student violence, self-injurious behavior and suicide; methods for engaging parents and youth in discussions about restraint prevention and use; a description and explanation of the program’s alternatives to physical restraint and method of physical restraint in emergency situations; a statement prohibiting medication restraint, mechanical restraint, prone restraint unless permitted pursuant to 603 CMR 46.03(1)(b), seclusion, and the use of restraint inconsistent with 603 CMR 46.00; a description of the program’s training requirements, reporting requirements, and follow-up procedures; a procedure for receiving and investigating complaints; a procedure for conducting periodic review of data and documentation on the program’s use of restraint; a procedure for implementing the reporting requirements; a procedure for making both oral and written notification to the parent; and a procedure for the use of time-out.  Restraint prevention and behavior support policy and procedures have been provided to staff and made available to parents of enrolled students. All staff have been trained on the policy and procedures and each school has staff members in place who are authorized to serve as a school-wide resource to assist in ensuring proper administration of physical restraint. |