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|  | ESE Logo | **COORDINATED PROGRAM REVIEW**  **MID-CYCLE REPORT**  **District:** **Dedham Public Schools**  **MCR Onsite Dates:** **04/03/2017 - 04/04/2017**  **Program Area: Special Education** |
|  |  | Mitchell D. Chester, Ed.D.  Commissioner of Elementary and Secondary Education |
| COORDINATED PROGRAM REVIEW **MID-CYCLE REPORT** | | |

| **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:** | | | |
| A review of student records and staff interviews indicated that, one year prior to the student reaching age 18, the district does not consistently inform students and their parent/guardian of the rights that will transfer from the parent/guardian to the student upon the student's 18th birthday.  A review of student records demonstrated that the district does not consistently obtain consent from students with sole or shared decision-making rights to continue their special education program once the student reaches 18 years of age. | | | |
| **Department Order of Corrective Action:** | | | |
| Provide training to Team chairpersons and relevant staff on the district’s procedures for notifying students and their parents/guardians at least one year prior to the age of 18 of the transfer of rights that will occur at the age of majority and obtaining the consent of the student with sole or shared decision-making rights to continue the special education program upon turning 18. Please see <http://www.doe.mass.edu/sped/advisories/11_1.html> for guidance on implementing these requirements.  For those students whose records were identified by the Department, obtain the student's consent to continue his/her special education program.  Develop an internal oversight and tracking system for ensuring that the district is following the requirements for the transfer of parental rights at the age of majority and student participation and consent at the age of majority. The oversight system should include periodic reviews by an administrator to ensure ongoing compliance.  Subsequent to implementation of all corrective actions, develop a report of the results of an internal review of records of students who are 17 to ensure that the district has informed students and their parent/guardians at least one year before the student turns 18 of the rights that will transfer from the parent/guardian to the student upon the student's 18th birthday.  Subsequent to implementation of all corrective actions, develop a report of the results of an internal review of records to ensure that the district has obtained the adult student's consent to continue the special education program when he or she has sole or shared educational decision-making rights.  **\*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 the student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, their role(s), and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit evidence of training, including name of presenter, agenda, and signed attendance sheet with staff name, role and signature by **November 3, 2017.**  Submit evidence of student consent for special education services by **November 3, 2017.**  Submit a description of the internal oversight and tracking system by **November 3, 2017.**  Submit the results of the internal reviews of student records and include the following for each review:  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 9, 2018.** | | | |
| **Progress Report Due Date(s):** | | | |
| 11/03/2017 | 02/09/2018 |  |  |

| **SE Criterion # 13 - Progress Reports and content** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of student records and staff interviews indicated that progress reports are provided at least as often as parents are informed of the progress of non-disabled students and consistently address student progress towards IEP goals.  A review of student records and staff interviews demonstrated that when a student's eligibility terminates because the student has graduated or exceeds the age of eligibility, the district consistently provides the student with a summary of his or her academic achievement and functional performance, including recommendations on how to assist the student in meeting his or her postsecondary goals. |

| **SE Criterion # 14 - Review and revision of IEPs** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| A review of student records indicated that at least annually, on or before the anniversary date of the IEP, a Team meeting is held to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate.  A review of student records and staff interviews indicated that if the district and parent agree to make changes to a student's IEP between annual meetings, the Team is reconvened to amend the IEP. Parents are advised that they may request a complete copy of the amended IEP.    A review of student records indicated that when progress reports indicate a lack of expected progress towards the annual goals and in the general curriculum, IEP Teams do not consistently reconvene to review and revise the IEP to address the student's performance. | | | |
| **Department Order of Corrective Action:** | | | |
| Develop procedures to ensure that when progress reports indicate a lack of expected progress towards the annual goals and in the general curriculum, IEP Teams reconvene to review and revise the IEP to address the student's performance. Provide training to Team chairpersons on these procedures.  Develop an internal oversight and tracking system to ensure that IEP Teams reconvene to address any lack of expected progress identified in student progress reports. The oversight system should include periodic reviews by an administrator to ensure ongoing compliance.  Subsequent to implementation of all corrective actions, develop a report of the results of an internal review of records to ensure that IEP Teams convene to address any lack of expected progress towards annual IEP goals and in the general curriculum.    **\*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 the student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, their role(s), and signature(s).** | | | |
| **Required Elements of Progress Reports:** | | | |
| Submit evidence of training, including name of presenter, agenda, and signed attendance sheet with staff name, role and signature by **November 3, 2017.**  Submit a description of the district's internal oversight and tracking system by  **November 3, 2017.**  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 9, 2018.** | | | |
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| **SE Criterion # 18A - IEP development and content** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of student records and staff interviews indicated that upon determining that the student is eligible for special education, IEP Teams develop the IEP, addressing all elements of the current IEP format provided by the Department of Elementary and Secondary Education. Staff interviews indicated that the IEP is not changed outside of the Team meeting.  A review of student records also demonstrated that IEP Teams specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students whose disability affects social skills development, when the student's disability makes him or her vulnerable to bullying, harassment or teasing, and for students identified with a disability on the autism spectrum. A review of student records indicated that IEP Teams document their considerations of the skills and proficiencies needed by students in the district’s Notices of Proposed School District Action (N1s), as well as in the Present Levels of Educational Performance (PLEP) B and the Additional Information sections of the IEP. |

| **SE Criterion # 18B - Determination of placement; provision of IEP to parent** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| A review of student records indicated that IEP Teams develop the IEP prior to determining the appropriate placement to deliver the student's identified services and accommodations. Record review demonstrated that Teams consistently ensure that students are educated in the school she or he would attend if the student did not require special education, unless otherwise required by the IEP. Record review also demonstrated that placements are based on the IEP, including the types of services, types of settings, types of service providers and location where services are to be provided.  A review of student records and staff interviews indicated that parents receive detailed summary notes at the conclusion of the IEP Team meeting, which include a completed IEP service delivery grid describing the types and amounts of special education and related services proposed by the district and a statement of the major goal areas associated with these services. Record review demonstrated that although the district consistently provides two copies of the proposed IEP and placement, they are not consistently sent to parents within two calendar weeks of the Team meeting. | | | |
| **Department Order of Corrective Action:** | | | |
| Develop procedures for ensuring the provision of the proposed IEP and placement to parents within two calendar weeks when a summary is provided at the conclusion of the IEP Team meeting or within 3-5 days if a summary is not provided at the conclusion of the meeting. Please see Memorandum on the Implementation of 603 CMR 28.05(7): Parent response to proposed IEP and proposed placement at <http://www.doe.mass.edu/news/news.aspx?id=3182> for guidance on implementing these requirements. Provide training to Team chairpersons on these procedures.  Develop an internal oversight and tracking system for ensuring that two copies of the proposed IEP and placement are provided to parents immediately following development at the IEP Team meeting. The oversight system should include periodic reviews by an administrator to ensure ongoing compliance.  Subsequent to implementation of all corrective actions, develop a report of the results of an internal review of records to ensure that IEPs are issued to parents immediately following development at the Team meeting.  **\*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 the student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, their role(s), and signature(s).** | | | |
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| 11/03/2017 | 02/09/2018 |  |  |

| **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:** | | | |
| A review of student records and staff interviews indicated that when a student is referred for an evaluation to determine eligibility for special education, the district does not consistently send written notice to the student's parent(s) within 5 school days of receipt of the referral, along with the district's notice of procedural safeguards. | | | |
| **Department Order of Corrective Action:** | | | |
| Provide training to Team chairpersons and relevant staff to ensure that, when a student is referred for an evaluation to determine eligibility for special education, the district sends written notice to the student's parent(s) within 5 school days of receipt of the referral, along with the district's notice of procedural safeguards.  Develop an internal oversight and tracking system to ensure that within 5 school days of receipt of a referral, the district sends written notice to the student's parent(s). The oversight system should include periodic reviews by an administrator to ensure ongoing compliance.  Subsequent to implementation of all corrective actions, develop a report of the results of an internal review of records to ensure that when a student is referred for an evaluation to determine eligibility for special education, the district sends written notice to the student’s parents within 5 school days of receipt of the referral.    **\*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 the student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, their role(s), and signature(s).** | | | |
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| **SE Criterion # 26 - Parent participation in meetings** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| The district provided its special education student roster as requested by the Department. |

| **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** | | | |
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| **Rating:** | | | |
| Partially Implemented | | | |
| **Basis for Findings:** | | | |
| A review of student records indicated that when the district conducts manifestation determinations for high school students with disabilities and determines that the behavior is not a manifestation of the disability, the district does not consistently offer a functional behavioral assessment or behavioral intervention services and modifications for students with a history of documented discipline incidents. | | | |
| **Department Order of Corrective Action:** | | | |
| Develop procedures to ensure that when the district conducts manifestation determinations for students with disabilities and determines that the behavior is not a manifestation of the disability, the district consistently offers a functional behavioral assessment or behavioral intervention services and modifications to ensure the behavior does not recur, particularly for students with a history of discipline incidents. Provide training to Team chairpersons and school administrators on these procedures.  Develop an internal oversight and tracking system to ensure that the district offers behavioral inventions and supports when students are suspended and their behavior is determined not to be a function of their disability, particularly for students with a history of discipline incidents. The oversight system should include periodic reviews by an administrator to ensure ongoing compliance.  Subsequent to implementation of all corrective actions, develop a report of the results of an internal review of records to ensure that when the student’s behavior is not a manifestation of his/her disability, the district offers a functional behavioral assessment or develops behavioral intervention services and modifications to support the student, particularly for students with a history of discipline incidents.    **\*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 the student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, their role(s), and signature(s).** | | | |
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| **SE Criterion # 47 - Procedural requirements applied to students not yet determined to be eligible for special education** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documents and staff interviews indicated that procedures for the discipline of students not yet determined to be eligible for special education are included in the student code of conduct. |

| **SE Criterion # 55 - Special education facilities and classrooms** |
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| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Onsite observations indicated that at the Riverdale Elementary School, all special education facilities reflect the average standards of general education facilities and classrooms. The school’s two speech therapists share an office space, but service delivery is scheduled to ensure that only one group of students occupy the office at a time. The two special education teachers who provide pullout services for students in grades 1-5 also share a standard classroom, but are similarly scheduled to ensure there is no overlap of service delivery within the assigned space. Both spaces are adequate in size for the number of students receiving services and auditory distractions are no longer an issue.  Onsite observations demonstrated that at Dedham Middle School, special education classrooms and therapy spaces, including Adaptive Learning Center, Strategies for Success, Speech, and Resource are no longer identified by signs that stigmatize such students.  Onsite observations indicated that at Dedham High School, counseling and psychological services, along with health services, are now provided in renovated spaces that feature separate offices for each staff member delivering services, thus reducing auditory and visual distractions and ensuring confidentiality. |