

Integrated Monitoring Procedures Guide

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About the Office of Approved Special Education Schools (OASES)

The Office of Approved Special Education Schools (OASES) is a team within the Department of Elementary and Secondary Education (DESE). It is a part of the state’s general supervision system under the Individuals with Disabilities Education Act (IDEA). Programs overseen by OASES predominantly serve students with disabilities in out-of-district placements, such as educational collaboratives and approved special education schools. OASES works towards our vision and supports our mission by requiring accountability among the schools and programs we regulate while providing guidance and technical assistance to schools and programs regarding special education laws, regulations, policies, procedures, and effective practices. OASES promotes data-driven and evidence-based decision-making and, in support of this, collects and analyzes various data from educational collaboratives and approved special education schools to identify trends and patterns where technical assistance may be needed. OASES also works closely with other components of the state’s general supervision system under IDEA, including but not limited to the Problem Resolution System Office and the Public School Monitoring Office.

DESE also works with other state agencies, including the Department of Early Education and Care (EEC), the Department of Children and Families (DCF), the Department of Mental Health (DMH), and the Department of Public Health (DPH) relating to approved special education schools and programs. OASES’s collaboration with these partner agencies includes working with schools and programs to address concerns raised by more than one agency, maintaining working groups to discuss topics that overlap among the state agencies, and streamlining processes to reduce duplication on the part of the programs and state agencies.

# OASES Integrated Monitoring

OASES monitors two types of educational organizations: Approved Special Education Schools (ASES)[[1]](#footnote-2) and Educational Collaboratives (Collaboratives)[[2]](#footnote-3). Hereafter, both types of organizations are referred to jointly as “Programs.”

## Monitoring Authority

***Approved Special Education Schools***

**The authority for DESE to monitor and provide oversight of approved special education schools is established by:**

* State laws and regulations, including but not limited to:
	+ Massachusetts General Laws [Chapter 71B](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXII/Chapter71B),
	+ [603 CMR 18.00](https://www.doe.mass.edu/lawsregs/603cmr18.html), Program and Safety Standards for Approved Public or Private Day and Residential Special Education School Programs regulations,
	+ [603 CMR 23.00](https://www.doe.mass.edu/lawsregs/603cmr23.html), Student Records regulations,
	+ [603 CMR 28.00](https://www.doe.mass.edu/lawsregs/603cmr28.html), Special Education regulations, and
	+ [603 CMR 46.00](https://www.doe.mass.edu/lawsregs/603cmr46.html), Prevention of Physical Restraint and Requirements, If Used, regulations.
* [Federal law (IDEA Part B), 20 U.S.C. § 1400](https://sites.ed.gov/idea/statute-chapter-33/subchapter-i/1400) *et seq.* and accompanying regulations (e.g., [34 C.F.R. §§ 300.145 – 300.147](https://www.ecfr.gov/current/title-34/subtitle-B/chapter-III/part-300/subpart-B/subject-group-ECFR8b9c471fc0cc1cf/section-300.145)).

Approved special education schools are also subject to other requirements, such as certain civil rights laws. DESE bases its Program Monitoring Standards for [Approved Special Education Schools](https://www.doe.mass.edu/oases/sa-nr/application.docx) and [Collaborative Programs](https://www.doe.mass.edu/oases/crs/collaborative-info-package.docx) on the applicable statutes and regulations. These monitoring standards are organized by various compliance criteria. Each criterion discusses requirements that Programs must adhere to, as well as policies, procedures, or other supporting documents that Programs must maintain to drive internal practices and meet the applicable requirements. Programs are required to maintain compliance with all criteria, regardless of whether they are reviewed in a current monitoring cycle. These monitoring standards and procedures are made available to the public on the DESE website.

Each monitoring criterion includes information about:

* Relevant laws and regulations that inform monitoring requirements,
* Specific requirements for each compliance criterion that guide requirements for the Program’s policies and procedures, and
* Required documentation to be developed and maintained by each Program.

***Collaborative Programs***

**The authority for DESE to monitor and provide oversight of Collaboratives is established by:**

* State laws and regulations, including but not limited to:
	+ Massachusetts General Laws [Chapter 40, Section 4E](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleVII/Chapter40/Section4e),
	+ Massachusetts General Laws [Chapter 71B](https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXII/Chapter71B),
	+ [603 CMR 18.00](https://www.doe.mass.edu/lawsregs/603cmr18.html), Program and Safety Standards for Approved Public or Private Day and Residential Special Education School Programs regulations,
	+ [603 CMR 28.00](https://www.doe.mass.edu/lawsregs/603cmr28.html), Special Education regulations,
	+ [603 CMR 46.00](https://www.doe.mass.edu/lawsregs/603cmr46.html), Prevention of Physical Restraint and Requirements, If Used regulations, and
	+ [603 CMR 50.00](https://www.doe.mass.edu/lawsregs/603cmr50.html?section=all), Educational Collaboratives regulations.
* Federal laws and regulations, including but not limited to:
	+ [Federal law (IDEA Part B), 20 U.S.C. § 1400](https://sites.ed.gov/idea/statute-chapter-33/subchapter-i/1400) *et seq.* and accompanying regulations at [34 C.F.R. Part 300](https://www.ecfr.gov/current/title-34/subtitle-B/chapter-III/part-300).

Educational collaboratives are also subject to certain other requirements, such as certain civil rights laws. These include but are not limited to Title VI of the Civil Rights Act of 1964, the Equal Educational Opportunities Act of 1974, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and Title II of the Americans with Disabilities Act of 1990.

## Frequency of Monitoring

OASES monitoring consists of two review processes: the Program Review, which happens once every six (6) years; and the Mid-Cycle Review, which occurs three (3) years after the Program Review. The Mid-Cycle review includes a subset of criteria reviewed during the Program Review in addition to any criteria that had findings of noncompliance from the Program Review. All Programs are reviewed on this cyclical schedule. Additionally, OASES will perform Targeted Monitoring when DESE deems it appropriate, such as if significant concerns arise about a program’s compliance with the applicable requirements. More information regarding Targeting Monitoring is included below.

Cohort Model

Each year, Programs scheduled for a monitoring review are grouped into three cohorts (fall, winter, and spring). Programs are notified of their assigned cohort during the spring of their monitoring year (Program Review or Mid-Cycle Review).

Monitoring Phases

The Program Review and Mid-Cycle Reviews consist of three phases: Discovery, Engagement, and Close-out, which occur over twenty (20) weeks. The diagram below provides a graphical representation of these phases with subcomponents associated with each phase.

# Discovery Phase

## **Training**

The Discovery Phase begins with training sessions for all Programs assigned to a given cohort. The OASES monitoring team provides training twenty (20) weeks before the onsite visit. Separate training sessions are provided for ASES and Collaboratives to tailor the training to their unique needs. Programs are encouraged to register key staff involved in the monitoring process for these training sessions.

Training sessions cover the following topics:

* Overview of the Review Process,
* Timelines for Data Review and Onsite Review,
* Overview of the Communication Hub and Monitoring Portal (CHAMP) system,
* Notification of specific DESE criteria to be included in the upcoming monitoring cycle,
* Changes and updates for criteria requirements, and
* Recent applicable statutory and regulatory changes, if applicable.

Additionally, DESE provides written guidance for the review cycle and schedules regular support for Programs through virtual office hours.

## ***Data and Information Collection***

After these training opportunities, DESE collects various data points relating to the relevant Programs for review. These data points inform decisions about record selection, interview questions, observations, and overall Program review planning. DESE reviews available data for each Program since the initial approval or the last scheduled review (Program or Mid-Cycle) to the present day, including the following:

1. DESE reviews restraint data collected in DESE’s security portal and certified annually. These data are reviewed for trends and patterns over time.
2. Certain data from other state agencies involved with the Programs, including but not limited to relevant data or information that may be available to DESE from EEC, DCF, and Disabled Persons Protection Commission (DPPC).
3. DESE’s Problem Resolution System (PRS) Office maintains documentation of state complaints (including but not limited to complaints regarding alleged bullying as defined in [603 CMR 49.00](https://www.doe.mass.edu/lawsregs/603cmr49.html?section=all)) and decisions relating to Programs. OASES staff access PRS complaint data for each Program being monitored.
4. DESE reviews Bureau of Special Education Appeals decisions and rulings relating to Programs.
5. For Mid-Cycle Reviews, DESE gathers the findings from each Program’s previous Program Review to check for ongoing compliance. Any criteria with a confirmed finding of noncompliance from the Program Review will be reviewed again during the Mid-Cycle Review.
6. DESE also gathers and reviews data and information from action forms since the previous review cycle, such as incident reports and prior approvals and notifications.
7. DESE collects and reviews the following information submitted by Programs during the Data Review, including the Program’s responses to related questions, based on the reviewed criteria:
	1. Policies and procedures with supporting documents
		1. Required forms/worksheets
		2. Data tracking logs
		3. Certificates of inspection
		4. Staff licenses
	2. Student Documentation
		1. Student roster
			1. IEP status
			2. English learner status
			3. Language(s) spoken at home
	3. Staff documentation
		1. Roster
			1. Related services staff licensure status
			2. Teacher licensure
				1. Licensure status
				2. Area of licensure
				3. Subject(s) and ages taught

## **Desk Review**

During the Desk Review, DESE staff analyze the data and information described above to determine specific areas of follow-up during DESE’s onsite activities. Once a Program submits its required data and information, DESE completes a Desk Review that includes:

1. School information,
2. Staff review (if applicable),
3. Student review, and
4. Program documentation review.

DESE confirms that the Program’s contact and location information is accurate and current. It also reviews staff and student roster information to identify any required follow-up. Additionally, DESE reviews all supporting documentation relative to each criterion included in the Program Monitoring Standards.

DESE reviews the policies and procedures each Program provides for compliance with all required elements of the related criteria. DESE also reviews the Program’s responses to questions that are included for each criterion in the review and staff and student records selected by the Program for potential onsite review of verified records. Questions in staff and student record review correlate to criteria included in the review of information and are based on requirements for Program policies, procedures, practices, and documentation.

The Desk Review may result in a list of criteria that DESE determines to be in noncompliance. Any such identified criteria are submitted to the Program during the onsite planning meeting with the option for pre-finding correction. A criterion with the opportunity for pre-finding correction is an area of identified noncompliance, which the Program can correct before DESE makes a written finding. The program has the opportunity to provide evidence that the noncompliance has been corrected. DESE will then verify the correction of noncompliance by confirming individual correction, if applicable, and systemic correction, generally within three months of identification, to clearly verify the correct implementation of the applicable requirements for each area. If DESE verifies any noncompliance remedied through pre-finding correction, it will be noted in the Program or Mid-cycle Review Final report.

When the Desk Review does not result in clearly identified noncompliance, criteria may need further data review during the onsite review to confirm compliance or noncompliance with the applicable requirements.

## **Onsite Planning Meeting**

Following completion of the Desk Review, an agenda is created for the Onsite Planning meeting. The purpose of the Onsite Planning meeting with Program staff is to review:

* Scheduling and logistics for the onsite visit,
* Questions regarding applicable requirements,
* Facility/residence tour logistics,
* Protocol for record review,
* Schedule for staff interviews,
* Questions, clarifications, and scheduling modifications, and
* Pre-finding corrections.

Prior to the onsite monitoring visit, DESE conducts an Onsite Planning meeting with Programs to review any elements of the Desk Review that raised compliance concerns. At this point, the Program has one opportunity to resubmit the updated and/or additional documentation to DESE to demonstrate compliance. Examples of elements that may require correction include, but are not limited to:

* Updates to policies and procedures.
* Additional documents that align with policies/procedures (e.g., training calendar, drill log).
* Updated credentials for teachers and/or related service providers.
* Updated information regarding students’ most recent IEP (e.g., parent[[3]](#footnote-4) signature and implementation date).

The Program must submit all additional documentation and update staff or student rosters approximately three weeks prior to the onsite review. DESE will review any additional documentation provided as well as updated staff and student information to determine if the noncompliance identified through the Desk Review process was corrected or if further onsite review of data is required. If the Program provides sufficient evidence for any element under review, DESE will verify the correction of noncompliance by verifying individual correction, if applicable, and systemic correction, generally within three months of identification, to confirm the correct implementation of the applicable requirements for each area. If DESE verifies that any criterion identified for pre-finding correction has been fully corrected within the required timeframe, no written finding of noncompliance will be issued to the Program on that specific criterion. Any noncompliance remedied through pre-finding correction will be noted in the Program or Mid-cycle Review Final report. If the Program is deemed not to have provided sufficient documentation and information, DESE will issue a written finding of noncompliance.

## **Parent/Guardian Information Session**

DESE will host information sessions three times a year for parents and family members of students enrolled in the Program under review. These sessions will align with onsite visits. During the sessions, DESE staff will explain the review process, discuss timelines and expectations, and provide any necessary clarifications.

**Notifications and Surveys**

DESE provides a notification letter template (available in various languages) for Programs to distribute to parents, family members, school districts, and/or state agencies directly involved with a student in the Program regarding the upcoming review. The notification letter describes the general review process, including access through website links to resources such as DESE’s monitoring criteria and reports/corrective action plans from previous reviews. The letter also provides information on the process for sharing feedback through a Program/Mid-cycle Review survey through a link or QR code that can be accessed using various means, including a cell phone or tablet. Additionally, DESE includes information in the notification letter about other options for contacting DESE, including setting up a phone call or virtual meeting. A direct link to the survey, available in various languages, is also e-mailed to parents and family members of students currently attending the Program using a survey engine. DESE uses email addresses submitted by the Programs to send out the survey. The purpose of the survey is to gather feedback and experiences with the Program to help determine how well the Program is meeting selected state and federal requirements.

DESE creates a report in the survey engine application to evaluate Program-focused responses from respondents prior to the onsite portion of the review. Survey data can inform observations, record review, and/or general follow-up within the review process. These data points may also flag a possible area of noncompliance or support a finding of noncompliance. Key themes from the survey data collection are shared with the Program during the exit meeting as points for consideration, reflection, confirmation, or potential change. The survey response data is also evaluated by DESE annually to identify themes and potential areas of refinement for the review process, Program needs, and DESE’s continuous improvement. The survey questions are reviewed and updated, if appropriate, at least every three years. Key themes from surveys are shared with the Program.

# Engagement Phase

## **Onsite Review**

An onsite review is conducted following the completion of the initial data review and review of pre-finding corrections. The onsite review aims to gather additional data to determine the Program’s level of compliance with the requirements being reviewed. During the onsite portion of the review, the review chair and one or two additional DESE staff members continue the Data Review to confirm pre-finding corrections and gather further information regarding selected criteria in the review. Based on the number of students the Program is approved to serve, DESE selects a sample of student and/or staff records to verify the accuracy of previously submitted information and evaluate trends. DESE’s student record selection is designed in a manner intended to reflect the diversity of the student population served by the Program.

DESE also conducts an independent review of a sample of additional records relating to currently enrolled students and/or employed staff that were not included in the Program’s Data Review. DESE conducts this review using standard procedures to determine whether the relevant requirements have been met.

### **Documentation Reviewed Onsite**

**Student Records**

Based on relevant review criteria, DESE reviews documents, including but not limited to:

* IEPs,
* Progress reports,
* Documentation of notifications and consents from parents and Local Educational Agencies (LEAs) regarding applicable policies and procedures,
* Incident reports, including restraint reports, if applicable, and
* Current, signed contracts with the sending school district (or documentation of the efforts to secure signed contracts).

**Staff Records**

Based on the relevant review criteria, DESE reviews documents, including but not limited to:

* Staff credentials, including any relevant licenses,
* Verification of background checks and fingerprint checks,
* Documentation of required training, and
* Evidence of implementation of the Program’s internal procedure for performance evaluations.

DESE may review any other records it deems appropriate for the purposes of its monitoring and the Program’s compliance with the applicable requirements.

**Student Separation Documentation**

For Programs with a behavior support policy that results in a student being separated in a room apart from the group or Program activities, DESE reviews the spaces designated for such purposes. Additionally, DESE reviews documentation for all student separations recorded by the Program for compliance with the applicable requirements.

**Restraint Documentation**

While onsite, DESE reviews the Program’s weekly restraint log and evidence of the required monthly review of restraints. In accordance with the requirements of [603 CMR 46.00](https://www.doe.mass.edu/lawsregs/603cmr46.html), Program administrators are expected to conduct a weekly review of restraint data to identify students who have been restrained multiple times during the week. If such students are identified, the principal is required to convene one or more review teams to assess each student’s progress and needs. DESE reviews documentation relating to the weekly review to verify that it includes: a review and discussion of the written restraint reports submitted by staff and any comments provided by the student and/or parent; an analysis of circumstances leading up to each restraint, including time of day, day of week, antecedent events, and individuals involved; consideration of factors that may have contributed to escalation of behaviors; alternatives to restraint including de-escalation techniques and interventions, with the goal of reducing or eliminating the use of restraint in the future; and an agreement on a written plan of action by the Program.

Regardless of the number of restraints, every Program must conduct a monthly review of school-wide restraint data. While onsite, DESE reviews the Program’s monthly restraint review documentation to verify that Program administrators are including the following required elements during these reviews: consideration of the patterns of use of restraints by similarities in time of day, day of the week, or individuals involved, the number and duration of restraints, and the number and type of injuries, if any, resulting from the use of restraint. All Programs must submit their restraint data to DESE in accordance with the requirements in [603 CMR 46.06](https://www.doe.mass.edu/lawsregs/603cmr46.html?section=06). DESE makes certain restraint data available to the public on its website in accordance with DESE’s data publication rules.

## **Onsite Review Team**

The onsite review team tours academic spaces to confirm approved student-to-staff ratios, supervision of students, and implementation of approved policies and procedures. While onsite, Programs may have a student ambassador share information about the Program and their experience in the Program. DESE may collect data from the tour to inform other onsite review activities.

During the onsite review, the DESE team observes all spaces students utilize to determine if they meet certain health and safety requirements. To do this, DESE reviews the following:

* Current health and safety licenses, permits, and inspections,
* Cleanliness and safety of the facility,
* Access to procedures regarding student allergies and emergencies, and
* Posted emergency information.

While onsite, DESE team members conduct classroom observations during instructional time to note student-to-staff ratios, implementation of behavior support policies, and the engagement of students in attendance. DESE staff may interact with students during the classroom observations and tours of the Program. DESE staff coordinate classroom observations with the Program to observe a variety of student experiences and learning styles. The outcome of the classroom observations may be used to inform staff and leadership interview questions.

**Staff Interviews**

DESE conducts interviews of administrators, instructional staff, related service providers, and other direct care staff to ascertain the level of consistency with which the relevant procedures and policies enacted by the Program are understood and implemented.

# Close Out Phase

## ***Reports***

The **Draft Report** is a draft of the Final Report to be issued by DESE to the Program. It is based on a review of the information gathered during the Discovery and Engagement Phases and specifically identifies findings of noncompliance. Within ten business days of receipt, the Program may respond to DESE regarding the factual accuracy of the Draft Report. The response must include supporting documentation that upholds any identified discrepancy. The Draft Report is only issued for Program Reviews and not Mid-Cycle Reviews.

After making any necessary edits to the Draft Report, DESE issues the **Final Report**. The Final Report includes findings organized under four specified compliance areas: (1) Policies and Procedures, (2) Staff, (3) Student, and (4) Buildings and Facilities. The findings explain the ratings or determinations by DESE about the implementation status of the compliance criteria reviewed within each area. The ratings indicate those criteria that were found by the monitoring team to be “Implemented,” “Implemented Response Required,” “Implementation in Progress,” “Partially Implemented,” or “Not Implemented”. The Final Report will also list any area of noncompliance remedied through the pre-finding correction process. Upon issuance, the Final Report is made available to the public on the DESE website.

Website Links:

[Approved Special Education Agencies Review Reports](https://www.doe.mass.edu/oases/ps-cpr/reports/)

[Approved Special Education Agencies Mid-Cycle Review Reports](https://www.doe.mass.edu/oases/ps-cpr/reports/followup.html)

[Collaborative Programs -- Program Review Reports](https://www.doe.mass.edu/oases/crs/reports/)

[Collaborative Programs -- Mid-Cycle Review Reports](https://www.doe.mass.edu/oases/crs/reports/followup.html)

## **Certificates of Approval**

Certificates of Approval (Full Approval, Provisional Approval, and Probationary Approval) are issued to Programs following each Program and Mid-Cycle Review, as appropriate, based on the level of compliance with relevant review criteria. Additionally, a new Certificate of Approval may be issued because of changes made to the Program or as a result of Targeted Monitoring (described below) that result in new or additional findings of noncompliance. In accordance with its regulations, DESE utilizes the following three approval statuses for Programs:

**Full Approval Status**

For Approved Special Education Programs or Collaborative Approved Public Day Programs that substantially meet requirements, DESE issues a Certificate of Full Approval. Full Approval will remain in effect for three school years and will expire on August 31st of the third school year. However, DESE may change the approval status of the Program at any point during this three-year period if circumstances arise that warrant such a change. Full Approval status is contingent upon continued compliance with the applicable requirements, including but not limited to [603 CMR 28.00](https://www.doe.mass.edu/lawsregs/603cmr28.html) (Massachusetts Special Education Regulations), [603 CMR 18.00](https://www.doe.mass.edu/lawsregs/603cmr18.html) (Program and Safety Standards for Approved Public or Private Day and Residential Special Education School Programs Regulations), and [603 CMR 46.00](https://www.doe.mass.edu/lawsregs/603cmr46.html) (Prevention of Physical Restraint and Requirements If Used Regulations).

**Provisional Approval Status**

For Approved Special Education Programs or Collaborative Approved Public Day Programsthat do not meet all requirements for Full Approval and the Program demonstrates the ability to implement the goals and objectives of each enrolled student’s IEP, DESE may issue Provisional Approval effective for a period not to exceed six months. If provisional approval is granted, the Department indicates the specific conditions that must be met within the six-month Provisional Approval status. Once the applicable requirements are met by the Program, DESE may issue Full Approval Status for the Program for the remainder of the review cycle. DESE determines that the Program met the applicable requirements through various means, such as a review of staff records, student records, facility tours, classroom observations, staff interviews, or other means DESE deems appropriate.

**Probationary Approval Status**

At any time, DESE may place an Approved Special Education Program or Collaborative Approved Public Day Program on Probationary Approval if it becomes aware of conditions that compromise the Program's ability to provide a safe, healthy and appropriate educational environment. In such circumstances, DESE provides written notice of the Probationary Approval status to the Program, the circumstances that caused DESE to take such action, and the actions necessary to correct the problem. Please refer to [603 CMR 28.09(4)](https://www.doe.mass.edu/lawsregs/603cmr28.html?section=09) for a detailed explanation of standards and procedures relating to Probationary Status.

When, in DESE's judgment, conditions at an Approved Special Education Program or Collaborative Approved Public Day Program threaten the health or safety of the students in the Program, acceptance of any additional eligible students (intake) may be prohibited and DESE will establish a time not to exceed 14 days within which the Program must correct the identified issues.

If DESE determines conditions at an Approved Special Education Program or Collaborative Approved Public Day Program compromise the Program's ability to provide an appropriate education but do not threaten the health and safety of the students, DESE can establish a deadline of up to 90 days by which the Program must correct the identified issues. As part of this process, DESE determines if it is necessary to close student intake during this period. DESE will not close intake for more than 60 days in any 12-month period without a full review of the approval status of the Approved Special Education Program or Collaborative Approved Public Day Program.

Within two school days of receipt of notice from DESE placing Approved Special Education Program or Collaborative Approved Public Day Program on Probationary Approval, the Program must provide notification to the parents of all enrolled Massachusetts students, all Massachusetts school districts with enrolled students, and officials of Massachusetts human service agencies or agencies of other states with responsibility for any students at the Program. Notification must state that the Program has been assigned probationary status, that intake is closed, if applicable, and the reasons for such status.

At the end of the time period for corrective action or when the issue giving rise to probationary status is resolved, whichever is sooner, DESE may reinstate the full approval status of the Approved Special Education Program or Collaborative Approved Public Day Program, change the approval status to provisional, or withdraw approval. DESE will provide written notification of its action to the Program. Within one month of receipt of a written request for reconsideration of any DESE action in relation to probationary status, DESE will consider the request and make a formal written response. At its discretion, DESE may hold a hearing on the facts, make site visits, or issue an alternative remedy.

DESE gives public notice on its website when it has determined that an Approved Special Education Program or Collaborative Approved Public Day Program must be placed on Probationary Approval***.***

## **Follow Up**

DESE will make a finding for any confirmed area of noncompliance. The Program will identify the appropriate corrective action(s), subject to approval by DESE, following either the Program Review or Mid-Cycle Review. The corrective action(s) will result in verification of 100% regulatory compliance with all identified findings, including: (1) correction of any child-specific noncompliance; (2) correction of any systemic noncompliance; and (3) correction of any noncompliance in policy, procedure, and practice.

Verification of resolution of noncompliance may require DESE to review additional data or information. Evidence of correction may include, but is not limited to:

* Description of root cause analysis,
* New or revised policies, procedures, or practices,
* Updated handbook or notification information,
* Updated templates or internal/external communications,
* Dissemination of information to the school community (e.g., parent, staff, or both),
* Correction of child-specific noncompliance *(Must be completed at first progress report),*
* Updated checklists and timelines,
* Meeting or training agendas,
* Training materials,
* Training attendance sheets and trainer information,
* Data tracking documents,
* Student or staff lists, and/or
* Internal monitoring processes.

In addition, all Programs must submit a written assurance signed by the executive director and the chairperson of the Board of Directors regarding their commitment to implementing any identified corrective actions. This commitment includes making DESE’s findings available to staff, parent advisory groups, and the general public, as well as following the ordered dates of progress report completion.

### **Technical Assistance Meeting for Corrective Action Plans**

The Program has twenty (20) business days to submit the proposed corrective action plan (CAP). Within one week following the issuance of a Program Review Final Report that includes findings of noncompliance, the review chairperson contacts the Program to discuss the Program’s proposed CAP to DESE. The purpose of the proposed CAP is for the Program to identify actions it plans to take to correct each finding of noncompliance and describe how it intends to maintain compliance over time. During the technical assistance meeting, DESE reviews the components of the proposed CAP and required elements for the Program to provide.

Upon receipt of the proposed CAP, DESE reviews and approves it if it includes all of the required elements. If it does not, DESE either partially approves or disapproves the proposed CAP and then issues the CAP with improvement requirements specified by DESE.

### **Progress Reports**

For all areas of noncompliance, Programs are required to complete Progress Reports to demonstrate effective resolution of noncompliance identified by DESE as soon as possible but in no case later than one year from DESE’s identification of the non-compliance. Programs describe and provide evidence to DESE indicating what they have done to remedy noncompliance. DESE requests that this information is comprehensive, detailing dates, roles and responsibilities, tracking mechanisms and a clear understanding of the root cause of noncompliance to confirm noncompliance is addressed systemically. If an area of noncompliance is not fully resolved by one of the scheduled submission dates, DESE will review and note what has been corrected, identify the areas of improvement sustained, while providing additional expectations for full resolution. If needed, DESE will provide additional structured guidance. This process is iterative between the Program and DESE until all areas of noncompliance have been approved as corrected.

### **Unannounced Visits**

As part of its ongoing monitoring process, DESE conducts unannounced visits as a follow-up to a Corrective Action Plan and related Progress Reports to determine whether Programs are maintaining and sustaining compliance. DESE plans and documents the visits. Data reviewed during the unannounced visit is based on previous confirmed findings of noncompliance and evidence documented in approved Progress Reports.

Unannounced visits may include a tour of the facility, classroom observations, record reviews, staff interviews, and documentation review based on required elements of the Progress Reports. The collected data is reviewed by DESE and discussed in a debrief meeting with OASES. Finally, if applicable and appropriate, DESE sends a letter to the Program within 60 days of the unannounced visit to describe any required additional information/visits, action steps, and/or change in Program approval.

Upon receipt of any letter from DESE that identifies noncompliance, the Program must respond to DESE with any corrective action(s) required to bring those areas into compliance with state or federal requirements. In some instances, DESE may have found certain requirements to be fully “Implemented” but made a specific comment on the Program’s implementation methods that also may require a response from the Program. Programs must demonstrate effective resolution of noncompliance identified by DESE as soon as possible but in no case later than one year from DESE’s identification of the non-compliance.

# Ongoing Review and Monitoring

In addition to integrated monitoring reviews, DESE collects and monitors multiple types of information and data relating to Programs throughout the year. This includes the following: restraints occurring during school hours, certain communications with EEC, reports of abuse and neglect, PRS complaints and decisions, Bureau of Special Education Appeals decisions and rulings, corrective action reports, and notifications to the Department regarding incidences and changes to the Program. OASES liaisons contact Programs to seek additional information and clarification and follow up with targeted monitoring (described below) as needed.

## **Targeted Monitoring**

If DESE identifies a potential area of noncompliance outside of the regular cyclical monitoring review through continuous data review or other sources, then due diligence is completed to gather relevant information to make a determination. Follow up with the Program may include but is not limited to:

* Request for submission of relevant policies/procedures and/or documentation; and
* Announced or unannounced onsite visit(s) to gather additional information:
	+ Staff and/or student record review,
	+ Interviews with relevant staff,
	+ Facility/classroom observations, and/or
	+ Document review if necessary.

Upon a review of all relevant data and information, DESE determines what, if any, follow-up is required. If DESE identifies noncompliance, a written notification of noncompliance (finding) is issued to the Program. The finding must be provided in a timely manner but no longer than three months after DESE determines noncompliance. If corrective action is required, DESE also determines if Program approval status should be updated based upon the areas of noncompliance identified. Any areas of noncompliance are documented in writing and must be corrected by the Program as soon as possible and in no case later than one year after the identification of the noncompliance.

## **Coherence, Collaboration and Data Sharing Across DESE Units**

As part of the Department’s general supervision system, OASES shares relevant data and information regarding Programs and students with other units within DESE to help inform their internal practices and other activities. Approximately monthly, OASES provides a report of the following data to DESE’s Public School Monitoring unit:

* Unsigned IEPs,
* Placement documents, and/or
* Contracts from public school districts.

OASES collaborates with DESE’s Problem Resolution Systems unit regarding complaints filed against Programs. Data relevant to an open complaint may include but is not limited to:

* Current corrective action plans,
* Previous findings of noncompliance,
* Previous complaints reviewed by OASES, and/or
* Outcome of onsite visits, including any unannounced visits.

OASES also shares other data and information with other units at the Department as it deems appropriate.

IT Solution

In May 2022, DESE began working with a vendor to upgrade our monitoring IT solution to provide an improved monitoring system for integrating data collection/review, streamlining required processes, and providing for easier and faster communication. The team developed the Communication Hub and Monitoring Portal (CHAMP) which not only modernized data collection but also decreased duplicative work and enabled a streamlined method of communication between DESE, LEAs, and Programs. The CHAMP software allows Programs to maintain DESE approved policies and procedures and any requests for approval updates in a clearinghouse for consistent continuity and access for all DESE applications/processes/future reviews. Programs use CHAMP to submit action forms including notifications, required incident reports and requests for approval to make changes to a Program.

Communicating with OASES

There are several ways to contact OASES with questions or concerns; individuals can send an email or call the office directly. OASES Liaisons are available between 8:45 a.m. and 5:00 p.m. every business day at the following contact information:

Office of Approved Special Education Schools
Main Telephone: 781-338-3700
TTY: N.E.T. Relay: 1-800-439-2370
Fax: 781-338-3710

Email: OASES1@mass.gov

# Glossary of Terms

# The following is a glossary of terms used in this document.

1. **OASES** refers to DESE’s **Office of Approved Special Education Schools**, which approves day and residential programs, implements the Department's compliance monitoring of such Programs, and provides technical assistance to Program personnel and the public regarding the implementation of certain requirements.
2. The **Bureau of Special Education Appeals** **(BSEA)** conducts due process hearings and issues rulings and decisions concerning eligibility, evaluation, placement, individualized education programs (IEPs), provision of special education, and procedural protections for students with disabilities. More information about the BSEA is available at: [Bureau of Special Education Appeals | Mass.gov](https://www.mass.gov/orgs/bureau-of-special-education-appeals).
3. **Cohort Model** refers to an assigned group of Program reviews within a monitoring cycle (fall, winter, spring).
4. **Communication Hub and Monitoring Portal (CHAMP)** is the software platform that supports DESE’s monitoring of Programs.
5. **Corrective Action Plan** **(CAP)** refers to actions Programs must complete to achieve compliance with the applicable legal requirements.
6. **Criteria** is a set of required elements based on certain state and federal laws, regulations, and policies, which all Programs approved by OASES need to follow for initial approval and implement in an ongoing manner.
7. **Day** means calendar day unless otherwise indicated consistent with [34 C.F.R. § 300.11](https://www.law.cornell.edu/cfr/text/34/300.11#:~:text=%C2%A7%20300.11%20Day%3B%20business%20day%3B%20school%20day.%20%28a%29,as%20in%20%C2%A7%20300.148%20%28d%29%20%281%29%20%28ii%29%29.%20%28c%29). (Day may also refer to a program type that serves students during weekday school hours and does not have a residential component.)
8. **Department or DESE** refers to the Massachusetts Department of Elementary and Secondary Education.
9. **Desk Review** is a step in the discovery phase of the monitoring process when DESE staff analyze a variety of data points including but not limited to school information, staff information, student information, policies and procedures, and adherence to criteria included in the OASES program monitoring standards.
10. **FAPE** means free appropriate public education under the Individuals with Disabilities Education Act (IDEA) and state law. Eligible students are entitled to FAPE.
11. **Finding of Noncompliance** is made when it is determined that a district, school, program, or other entity did not or is not following the applicable legal requirements.
12. **Full Approval Status** signifies that a Program substantially meets required areas of compliance and the Program is in good standing. For more information, please see the Certificates of Approval section of this document.
13. **General Supervision** **System** is described in detail in the [State General Supervision Responsibilities Under Parts B and C of the IDEA - Monitoring, Technical Assistance, and Enforcement, OSEP QA 23-01](https://sites.ed.gov/idea/idea-files/guidance-on-state-general-supervision-responsibilities-under-parts-b-and-c-of-the-idea-july-24-2023/) document.
14. **Individuals with Disabilities Education Act (IDEA)** is the federal law that affords protections to eligible students with disabilities, including but not limited to, the right to receive a free appropriate public education (FAPE) in the least restrictive environment (LRE).
15. **LEA** refers to the local educational agency, such as the public school district, vocational school, or virtual school.
16. **Mid-cycle Review** is the monitoring stage of a Program, which is completed 3 years after the full Program Review and includes a subset of criteria, including any criteria that had a finding in the previous Program Review.
17. **Program Review** is the monitoring stage of a Program, which happens every 6 years.
18. **PRS** refers to the Department's **Problem Resolution System**, which is the Department’s office responsible for handling state complaints in accordance with federal and state requirements.
19. **PSM** refers to the Department’s **Office of Public School Monitoring**, which is the office responsible for conducting integrated monitoring reviews in public schools.
20. **OASES Chairpersons** are OASES staff who serve as the lead team member during reviews of Programs.
21. **OASES Monitoring Specialists** are OASES staff who conduct reviews of Programs. They also serve as liaisons to Programs to provide guidance and technical assistance. Monitoring Specialists may serve as a team chairperson or team member during a review.
22. **Pre-finding Correction** is when the Program provides updated documentation as evidence of correction for areas of noncompliance identified during the desk review portion of a Program or Mid-cycle Review. Generally, OASES will follow-up and verify correction within three months of noncompliance identification and this may coincide with the onsite portion of the review process. Any noncompliance remedied through pre-finding correction will be noted in the final report.
23. **Probationary Approval Status** is described in the Department’s regulations at [603 CMR 28.09(4)](https://www.doe.mass.edu/lawsregs/603cmr28.html?section=09). For more information, please also see the Certificates of Approval section of this document.
24. **Provisional Approval** is described in the Department’s regulations at [603 CMR 28.09(3)(b)](https://www.doe.mass.edu/lawsregs/603cmr28.html?section=09). For more information, please also see the Certificates of Approval section of this document.
25. **Residential** is a type of ASES program that includes the student living on campus as well as attending school.
26. **Special education** shall mean specially designed instruction to meet the unique needs of the eligible student or related services necessary to access the general curriculum and shall include the programs and services set forth in state and federal special education law and regulations.
27. **Targeted Monitoring** is monitoring that occurs outside of the regular cyclical monitoring review process to address significant concerns related to implementation of requirements in a specific Program.
28. **Technical Assistance** is guidance and clarification provided to Programs by OASES including but not limited to implementation of special education laws, regulations, policies, procedures, and effective practices.
1. For the purpose of this document, Approved Special Education School (ASES) means a Massachusetts private day or residential school, which has applied to, and received approval from the Department according to the requirements in 603 CMR 28.09. [↑](#footnote-ref-2)
2. For the purpose of this document, Educational Collaborative (Collaborative) means a program approved by the Department as an educational collaborative under 603 CMR 50.03(1) and approved as a public day program under 603 CMR 28.09 or providing special education services in a substantially separate classroom integrated in a public school building. [↑](#footnote-ref-3)
3. “Parent” shall mean father, mother, legal guardian, person acting as a parent of the child, foster parent, or educational surrogate parent appointed in accordance with federal law. [↑](#footnote-ref-4)