***Massachusetts Department of***

***Elementary and Secondary Education***

75 Pleasant Street, Malden, Massachusetts 02148-4906 Telephone: (781) 338-3700

*TTY: N.E.T. Relay 1-800-439-2370*

December 4, 2014

Mr. Daniel DiMezza, Executive Director

Summit Academy

15 Jamesbury Drive

Worcester, MA 01609

Re: Mid-cycle Review and Verification of previous Program Review Corrective Action Plan

 A - Summit Academy - Day Program

Dear Mr. DiMezza:

Enclosed is the Department of Elementary and Secondary Education’s (“Department”) Mid-cycle Review Report based upon the Mid-cycle Review conducted in your private school program in November 2014. This Mid-cycle Review Report contains the Department's findings regarding the implementation status and effectiveness of corrective steps taken in response to your previous Program Review Report issued on June 12, 2012. This report also includes a report on the status of implementation for new state or federal special education requirements enacted since your program’s last Program Review.

We are pleased to indicate that the Department has found your program’s approved Corrective Action Plan to be substantially implemented and effective in remedying the previously identified noncompliance issue. Additionally, we have determined that your program is in substantial compliance with the selected Mid-cycle Review criteria as well as any new state or federal special education requirements enacted since your last Program Review. You and your entire staff are to be congratulated for your efforts in implementing all necessary improvements. Your program will now receive an updated status of “Full Approval.” This approval shall remain in effect for three (3) years and will be contingent upon continued compliance with all regulations contained within 603 CMR 28.00 “Special Education Regulations” and 603 CMR 18.00 “Program And Safety Standards For Approved Public Or Private Day And Residential Special Education School Programs.” The Department may change this approval status at any point during this three-year period if circumstances arise that warrant such a change.

The Department will notify you of your program’s next regularly scheduled Program Review several months before it is to occur. At this time we anticipate the next routine monitoring visit to occur sometime during the 2017-2018 school year, unless the Department determines that there is some reason to schedule this visit earlier.

**Please be advised that the attached Department Approval Certificate must be conspicuously posted in a public place within the program as required by 603 CMR 28.09.**

Your staff's cooperation throughout these follow-up monitoring activities is appreciated. Should you require additional clarification of information included in our report, please do not hesitate to contact the Onsite Team Chairperson.

Sincerely,

Helen Murgida, Mid-cycle Review Chairperson

Program Quality Assurance Services

Darlene Lynch, Director

Program Quality Assurance Services

c: Mitchell D. Chester, Ed.D., Commissioner of Elementary and Secondary Education

Encl.: Mid-cycle Review Report

Full Approval Certificate, Expiration Date: August 31, 2018

 Summit Academy - Day Program

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|  | ESE Logo | **MID-CYCLE REVIEW REPORT****Summit Academy****MCR Onsite Dates:** **11/04/2014 - 11/05/2014****Programs under review for the agency:****A - Summit Academy - Day Program**  |
|   |  | Mitchell D. Chester, Ed.D.Commissioner of Elementary and Secondary Education |
| **MID-CYCLE REVIEW REPORT** |

| **PS Criterion #2.2 - Approvals, Licenses, Certificates of Inspection** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that there were current approvals, licenses and certificates of inspection for all buildings used by the students. |

| **PS Criterion #2.3 - EEC Licensure (Residential Programs Only)** |
| --- |
| **Rating:** |
| Not Applicable |
| **Basis for Findings:** |
| This program is a day program, therefore this criterion is not applicable. |

| **PS Criterion #6.1 - Daily Instructional Hours** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that all students were scheduled to receive the required number of instructional hours. |

| **PS Criterion #6.4 - School Days Per Year** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that the required number of school days was offered to all students. |

| **PS Criterion #8.5 - Current IEP & Student Roster** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and student records indicated that there was a current IEP for each enrolled Massachusetts student that had been issued by the responsible public school district and consented to by the student's parent or student, when applicable, or documentation indicating the program's efforts to obtain such. |

| **PS Criterion #8.8 - IEP - Progress Reports** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| At the time of the 2011 Program Review, documentation, student record reviews and interviews indicated that two progress reports dated 2/14/12 and 4/12/12 had been issued, however, past progress reports were not documented and not all progress reports indicated progress toward students' annual goals as required.In the Mid-cycle Review, documentation, a review of student records and interviews indicated that all progress reports were documented and indicated progress toward students' annual goals as required. |

| **PS Criterion #11.3 - Educational Administrator Qualifications** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that the Educational Administrator possessed the required qualifications to serve in this position. |

| **PS Criterion #11.4 - Teachers (Special Education Teachers and Regular Education Teachers)** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation submitted in the self assessment indicated that the teaching staff were appropriately licensed or had been granted an appropriate waiver. |

| **PS Criterion #11.5 - Related Services Staff** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that the staff providing or supervising the provision of related services were appropriately certified, licensed or registered in their professional areas. |

| **PS Criterion #11.6 - Master Staff Roster** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated the Master Staff roster contained the name, program job title, corresponding Uniform Financial Report (UFR) title number and full-time equivalent (FTE) for all staff. The Master Staff Roster also accurately corresponded to the last approved program budget. |

| **PS Criterion #11.12 - Equal Access** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that all students were provided with equal access to services, facilities, activities and benefits regardless of race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness. |

| **PS Criterion #12.1 - New Staff Orientation and Training** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| At the time of the 2011 Program Review, staff interviews revealed that new staff orientation occurred, but documentation and staff records revealed that not all staff were fully trained prior to being assigned direct care duties with students, and new staff orientation was not consistently documented.In the Mid-cycle Review, interviews, documentation, and staff records indicated that new staff participated in an orientation-training program that included the program's philosophy, organization, program, practices, goals and all mandated trainings listed under criterion 12.2 a-e prior to being assigned direct care duties with students. |

| **PS Criterion #12.2 - In-Service Training Plan and Calendar** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| At the time of the 2011 Program Review, documentation and staff records revealed that staff in-service training was not consistently documented and interviews revealed that some staff were unclear whether they received training in all required topics.In the Mid-cycle Review, documentation and staff records revealed that all required in-service trainings were consistently documented and staff interviews revealed that they received training in all required topics. |

| **PS Criterion #14.2 - Food and Nutrition** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that the program participates in the National School Lunch Program which ensures that breakfast and lunch are made available to publicly-funded students with disabilities as they would have access to such meals in their sending school district and a copy of the written plan describing the methods for purchase, storage, preparations and serving of food as well as the name and title of the person responsible for oversight of the purchase, storage, and preparations were submitted. |

| **PS Criterion #15.3 - Information to be Translated into Languages Other Than English** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| During the 2011 Program Review, documentation, student record review, and interviews revealed that the program did not provide important school information to a parent with limited English skills in a timely manner in a language that they understood either through written translations of documents or through interpreters.In the Mid-cycle Review, documentation, student record review, and interviews revealed that the program provided important school information to a parent with limited English skills in a timely manner in a language that they understood either through written translations of documents or through interpreters. |

| **PS Criterion #16.7 - Preventive Health Care** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| At the time of the 2011 Program Review, documentation, student record review, and interviews revealed that not all students had evidence of dental examinations, and vision, hearing, and postural screenings.In the Mid-cycle Review, documentation, student record review, and interviews revealed that all students had evidence of dental examinations, and vision, hearing, and postural screenings. |

| **PS Criterion #19 - Anti-Hazing** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of student records and interviews indicated that a copy of the anti-hazing legislation was received by all secondary school age students. Interviews also indicated that the program's anti-hazing disciplinary code approved by the Board of Directors had been distributed to all secondary school age students. |

| **PS Criterion #20 - Bullying Prevention and Intervention** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the student admissions materials/handbook was updated to conform to the updated amended Bullying Prevention and Intervention Plan ("Plan") and was consistent with the amendments to the Massachusetts anti-bullying law, including making clear that a member of the school staff may be named the "aggressor" or "perpetrator" in a bullying report. There was evidence of staff, students, and parents/guardians having been annually notified in writing of the Plan and a professional development plan was in place for all staff, with evidence of its implementation provided. |