***Massachusetts Department of***

***Elementary and Secondary Education***

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| Jeffrey C. Riley*Commissioner* |  |

December 5, 2019

Dr. Craig Latham

Executive Director

New England Adolescent Research Institute, Inc.

201 East Street

Northampton, MA 01027

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

 A - NEARI Day Program

Dear Dr. Latham,

Enclosed is the Department of Elementary and Secondary Education (“Department”) Approved Special Education School Mid-cycle Review Report containing findings based on the onsite visit conducted in your approved special education program in November 2019.

This report includes detailed findings describing the determinations of the Department about the implementation status of each requirement. Please note that all requirements were found to be fully implemented; therefore, your program does not need to develop a corrective action plan.

At this time, the Department requests that you send to us a separate statement signed by you and the Chairperson of your Board of Directors which describes the steps the program is taking to make the findings of the Department available to staff, parent groups and the general public. Please go into the Web-based Monitoring System (WBMS) and upload your program’s statement that has been signed by you and the chairperson of your Board of Directors into Additional Documents. You can do this by accessing: > MCR > Self-Assessment > Additional Documents.

The approval certificate enclosed with this correspondence shall remain in effect until August 31, 2023, and will be contingent upon continued compliance with all regulations contained within 603 CMR 28.00 “Special Education Regulations,” 603 CMR 18.00 “Program And Safety Standards For Approved Public Or Private Day And Residential Special Education School Programs,” and 603 CMR 46.00 “Prevention of Physical Restraint and Requirements If Used.” The Department may change this approval status at any point during this three-year period if circumstances arise that warrant such a change.

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

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 2022-2023 school year, unless the Department determines that there is some reason to schedule this visit earlier.

In closing, we would like to extend our thanks to the administration and staff who shared their time and thoughts so generously during the preparation and onsite phases of the visit. Should you require any additional information, please do not hesitate to contact the Onsite Team Chairperson.

Sincerely,

Megan Bowie, M.Ed., Chairperson

Office of Approved Special Education Schools

Nina M. Marchese, M.Ed., Director

Office of Approved Special Education Schools

c: Marea Wexler, President of the Board of Directors

 Jeffrey C. Riley, Commissioner of Elementary and Secondary Education

 Russell Johnston, Ph.D., Senior Associate Commissioner

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

Encl.: Mid-cycle Review Report

Full Approval Certificate, Expiration Date: August 31, 2023

 NEARI Day Program

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|  | Massachusetts Department of Elementary and Secondary Education logo | **MID-CYCLE REVIEW REPORT****New England Adolescent Research Institute, Inc.****MCR Onsite Dates:** **11/06/2019 - 11/07/2019****Programs under review for the agency:****A - NEARI Day Program**  |
|   |  | Jeffrey C. RileyCommissioner of Elementary and Secondary Education |
| **MID-CYCLE REVIEW REPORT** |

| **PS Criterion #1.2 - Program & Student Descriptions, Program Capacity** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that the Program & Student Description included a narrative that describes the identified population served, ages of students, and educational and behavioral characteristics of students served. |

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

| **PS Criterion #4.5 - Immediate Notification** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and student records indicated that the policy on Immediate Notification Regarding Serious Incidents met the current requirements and included notification to appropriate parties of such incidents, as well as the person responsible for oversight. A review of student records showed that the program maintains copies of all incidents regarding students. |

| **PS Criterion #6.1 - Daily Instructional Hours/6.4 School Days Per Year** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that all students were scheduled to receive the required number of instructional hours per year, and that the required number of school days per year was scheduled for all students. |

| **PS Criterion #8.5 - Current IEP & Student Roster** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and review of student records indicated that there was a current Individualized Education Program (IEP) for each enrolled Massachusetts student that had been issued by the responsible public school district and consented to by the student's parent or the student, when applicable. In student records where an IEP was found not to be current, there was documentation of the program's efforts to obtain a current IEP from the responsible school district. |

| **PS Criterion #9.1 - Policies and Procedure for Behavior Support** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the program has developed and is implementing written Policies and Procedures for Behavior Support consistent with the regulations under 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. Behavior Support Policies and Procedures are reviewed annually, and are provided to staff annually and made available to parents of enrolled students. |

| **PS Criterion #9.1(a) - Student Separation Resulting from Behavior Support** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the policies and procedures regarding Student Separation Resulting from Behavior Support include that a student must be continuously observed by a staff member at all times, that staff shall be with the student or immediately available to the student at all times, that procedures are in place for obtaining principal approval of the student separation for more than 30 minutes based upon the student's continuing agitation, and that student separation shall cease as soon as the student has calmed. |

| **PS Criterion #9.4 - Physical Restraint** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the program administers physical restraints only in emergency situations of last resort when needed to protect a student and/or a member of the school community from assault or imminent, serious, physical harm and with extreme caution in order to prevent or minimize any harm to the student as a result of the use of physical restraint. A review of student records and staff interviews indicated that Physical Restraint Policies and Procedures were consistent with requirements under 603 CMR 46.00. |

| **PS Criterion #11.1 - Staff Policies and Procedures Manual** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that the program implements personnel policies and procedures that include the following: criteria and procedures for hiring, Criminal Offender Record Information, Criminal History Record Information fingerprint requirements, staff evaluation, discipline of staff, the handling of staff complaints, a plan for using volunteer and/or intern services and a statement of equal access for employment and/or educational opportunities. |

| **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 General Education Teachers)** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that the teaching staff were appropriately licensed or had been granted an appropriate waiver for the 2018-2019 school year. |

| **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 that at the time of the Mid-Cycle Review, the Master Staff Roster contained the names, program job titles, corresponding Uniform Financial Report (UFR) title numbers and full-time equivalents (FTE) for all staff. The Master Staff Roster also accurately corresponded to the most recently approved DESE staffing plan. |

| **PS Criterion #12.1 - New Staff Orientation and Training** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the program has a written plan for New Staff Orientation and Training that includes all mandated trainings prior to staff being assigned direct care duties with students, and that such training was documented in staff records. |

| **PS Criterion #12.2 - In-Service Training Plan and Calendar** |
| --- |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the program has an In-Service Training Plan and Calendar that shows that staff receive training in all mandated training topics annually, that the program has a plan for staff to participate in outside training opportunities, and that staff receive an average of two hours of training for each month the school is in session. In addition, such training was documented in staff records. |