***Massachusetts Department of***

***Elementary and Secondary Education***

*75 Pleasant Street, Malden, Massachusetts 02148-4906 Telephone: (781) 338-3000*

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| Jeffrey C. Riley  *Commissioner* |  |

July 26, 2021

Kathleen Lovenbury

Executive Director

Crystal Springs, Inc.

38 Narrows Road

Assonet, MA 02702

Re: Approved Special Education School Program Review Final Report

Crystal Springs, Inc.; Crystal Springs Residential Program

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Dear Ms. Lovenbury:

Enclosed is the Department of Elementary and Secondary Education (“Department”) Approved Special Education School Program Review Final Report containing findings based on the Program Review conducted in your program in May 2021.  
  
This report includes detailed findings describing the determinations of the Department about the implementation status of each requirement. For requirements not found to be fully implemented, you must propose to the Department a Corrective Action Plan (CAP) to bring those areas into compliance with respective statutes or regulations. You are encouraged to incorporate the corrective action activities into your program’s improvement planning process, including your professional and paraprofessional staff development plan.  
  
You may access the CAP format directly by going into the Web-based Monitoring System (WBMS) and selecting the area on the menu bar entitled “CAP/Progress Reports”. The due date for your response is **August 23, 2021,** which istwenty business days from the Final Report date. We appreciate your program’s cooperation throughout the Program Review process and look forward to reviewing your response.  
  
Once the Department receives your CAP, we will review and respond to each part. Where we disapprove any part of your proposed corrective action, we will provide an explanation and substitute our own order of corrective action, with required timelines. Progress reports may be requested, at dates to be determined by the Department, for any corrective action, and any CAP may be verified onsite by Department staff. At all these key junctures the Department will provide you with its written review, the status of any outstanding items, requests for additional information and the necessary forms, electronically via WBMS and/or email.  
 **Please note that all programs must demonstrate resolution of noncompliance identified by the Department as soon as possible but in no case later than one year from the issuance of the Department’s Final Program Review Report.**  
  
Please include with your program’s CAP a written assurance signed by you and the Chairperson of your Board of Directors. This statement must contain:

1. a description of the steps the program is taking to make the Department’s findings available to staff, parent advisory groups and the general public; and
2. an assurance that once the CAP has been reviewed by the Department, the corrective action approved or ordered by the Department will be implemented by the approved or ordered dates of completion.

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 Mid-Cycle 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 review process. Should you require any additional information, please do not hesitate to contact the Team Chairperson.

Sincerely,

Christina Belbute, Program Review Chairperson

Office of Approved Special Education Schools

Nina M. Marchese, M.Ed., Director

Office of Approved Special Education Schools

c: Timothy Kelleher, President of the Board of Directors

Richard Mancini, Crystal Springs Director of Children’s Services

Jeffrey C. Riley, Commissioner of Elementary and Secondary Education

Russell Johnston, Ph.D., Senior Associate Commissioner

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

Encl.: Final Report

Full Approval Certificate, Expiration Date: August 31, 2023

Crystal Springs Residential Program



**Crystal Springs, Inc.**

**Crystal Springs Residential Program**

**APPROVED SPECIAL EDUCATION SCHOOL**

**PROGRAM REVIEW**

**REPORT OF FINDINGS**

**Dates of Onsite Visit:** **May 24-25, 2021**

**Date of Draft Report:** **June 23, 2021**

**Date of Final Report: July 26, 2021**

**Corrective Action Plan Due: August 23, 2021**

**Department of Elementary and Secondary Education Onsite Team Members:**

**Christina Belbute, Chairperson**

**Christine Romanciewicz, Team Member**



Jeffrey C. Riley

Commissioner of Elementary and Secondary Education

**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**

**APPROVED SPECIAL EDUCATION SCHOOL PROGRAM REVIEW**

**Crystal Springs, Inc.**

**Crystal Springs Residential Program**

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#### MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

##### APPROVED SPECIAL EDUCATION SCHOOL PROGRAM REVIEW REPORT

# **OVERVIEW OF REVIEW PROCEDURES**

# **INTRODUCTION**

The Massachusetts Department of Elementary and Secondary Education (“Department”) is required under M.G.L. c. 71B, §10 to review special education programs in approved special education schools that serve publicly funded students under the provisions of Board of Elementary and Secondary Education Regulations 603 CMR 28.00 and 18.00. Each year, the Department's Office of Approved Special Education Schools (OASES) conducts onsite visits to selected approved special education school programs to verify the implementation of these programs. The selected schools for the 2019-2020 review cycle were notified in February 2019 of scheduled visits and were required to conduct a Self-Assessment using the Department's web-based monitoring system (WBMS) before the arrival of the Department's visiting team.

The statewide six-year Approved Special Education School Program Review cycle together with the Department’s Mid-cycle monitoring schedule is posted on the Department’s web site at <http://www.doe.mass.edu/oases/ps-cpr/6yrcycle.html>.

**Approved Special Education School Program Review Elements**

**Criteria:** The Program Review criteria encompass key elements drawn from 603 CMR 18.00, 28.00, 46.00 and the approved special education school program’s application for approval. They also include those required by the federal Office for Special Education Programs (OSEP) and revised requirements of the Individuals with Disabilities Education Act, 20 U.S.C. Section 1400 *et seq.* (IDEA-2004) as described in the Department's Special Education Advisories. The Office of Approved Special Education Schools (OASES), through the Desk Review, examines the Self-Assessment submission and determines which criteria will be followed up on through onsite verification activities. The Self-Assessment and Desk Review are both described below.

**Self-Assessment Phase:** This is a requirement for all agencies being monitored. It is completed in the year prior to the onsite review and covers all of the monitoring criteria. The agency is responsible for completing the Self- Assessment for each individually approved program being reviewed, which consists of:

* Agency review of documentation for required elements including document uploads.
* Agency review of a sample of student records selected.
* Agency review of a sample of staff records selected.

Upon completion of these portions of the Self-Assessment, it is submitted to the Department for review.

**Desk Review Phase:** The OASES chairperson assigned to each agency reviews the responses by the approved special education school regarding the critical elements for appropriate policies, procedures, and practices, as well as actual documents and data submissions by criteria. The student record review data, staff record review data, and explanatory comments are examined. The outcome of this review, along with 3-year trend data from the Problem Resolution System, restraint reports, restraint injuries, serious incidents and notification or prior approval from the Department through a Form 1 to the Department is used to determine the scope and nature of the Department’s onsite activities.

**Onsite Verification Phase:** This includes activities selected from the following:

* Interviews of administrative, instructional, and other staff consistent with those criteria selected for onsite verification.
* Interviews of parent representatives and other telephone interviews as requested by other parents or members of the general public.
* Review of student records and staff records: The Department selects a sample of student and staff records from those the agency reviewed as part of its self-assessment to verify the accuracy of the data. The Department also conducts an independent review of a sample of student and staff records that reflect activities conducted since the beginning of the school year. The onsite team will conduct this review, using standard Department procedures, to determine whether procedural and programmatic requirements have been implemented.
* Surveys of parents of students with disabilities: All parents of Massachusetts students with disabilities who are enrolled in the program will be emailed a survey from the Department that solicits information regarding their experiences with the agency’s implementation of special education, related services, and procedural requirements by its approved special education school programs.
* Observation of classrooms and other facilities: The onsite team visits a sample of classrooms and other school facilities used in the delivery of programs and services to determine general levels of compliance with facility and accessibility requirements.

**Team:** Depending upon the scope of onsite activities that have been identified based on the Department’s Desk Review of the agency’s Self-Assessment, a 2-3 member Department team will conduct a 3-5 day onsite Program Review.

**Report:** The report is based on a review of the written documentation regarding the operation of the school's programs and the information gathered from the Onsite Verification Phase. A Draft Report of Comments is issued via the WBMS. Agencies may respond to the factual accuracy of the report within 10 business days.

A Final Report is then issued via the WBMS and in hard copy. The findings in the Final Report note those criteria that the team found to be Implemented, Implementation in Progress, Partially Implemented or Not Implemented. Findings for each program area describe determinations of the Department about the implementation status of each requirement (criterion) reviewed. The Department’s Approved Special Education School Program Review Final Reports are posted on the Department’s web site at <http://www.doe.mass.edu/oases/ps-cpr/reports/>.

**Response:** Where criteria are found not to be fully implemented, the agency is required to propose corrective actions, within 20 business days of receipt of the Final Report, to bring those areas into compliance with the respective statutes or regulations for each affected special education school program. **Under federal *Special Education State Performance Plan* requirements pursuant to IDEA-2004, public and approved special education school programs serving disabled students must demonstrate effective resolution of noncompliance identified by the Department as soon as possible but in no case later than one year from the issuance of the Department’s Final Program Review Report.**

The Department believes that the Approved Special Education School Program Review process is a positive experience and that the Final Report is a helpful planning document for the continued development and improvement of programs and services in each approved special education school program.

# **REPORT INTRODUCTION**

A two-member team visited Crystal Springs, Inc. during the week of May 24, 2021 to evaluate the implementation of selected compliance criteria under the Massachusetts Board of Elementary and Secondary Education Regulations 603 CMR 18.00 (Program and Safety Standards for Approved Public or Private Day and Residential Special Education School Programs), 603 CMR 28.09 (Approval of Public or Private Day and Residential Special Education School Programs), 603 CMR 46.00 (Prevention of Physical Restraint and Requirements If Used), M.G.L c. 71B, the federal Individuals with Disabilities Education Act, 20 U.S.C. Section 1400 *et seq,* as amended in 2004 (IDEA--2004), and civil rights provisions that are pertinent to Approved Special Education School Programs. The team appreciated the opportunity to interview staff, to observe classroom facilities, and to review the program efforts underway.

The Department is submitting the following Approved Special Education School Program Review Report containing findings made pursuant to this onsite visit. In preparing this report the team reviewed extensive documentation regarding the operation of the school programs, together with information gathered by means of the following Department program review methods:

• Interviews of three administrative staff;

• Interviews of three teaching and educational support services staff; and

• Interviews of two childcare staff.

• Student record review: A sample of eight Massachusetts student records was selected by the Department. Student records were first examined by the school program’s staff and then verified by the onsite team using standard Department student record review procedures to make determinations regarding the implementation of procedural and programmatic requirements. An additional number of randomly selected student records were also reviewed by Department staff to ensure determinations regarding the implementation of procedural and programmatic requirements remain in effect.

• Staff record review: A sample of eight staff records was selected by the Department. Staff records were first examined by the school program’s staff and then verified by the onsite team using standard Department staff record review procedures to make determinations regarding the implementation of procedural and programmatic requirements. An additional number of randomly selected staff records were also reviewed by Department staff to ensure determinations regarding the implementation of procedural and programmatic requirements remain in effect.

• Observation of classrooms and other facilities: A sample of two instructional classrooms and other facilities used in the delivery of programs and services was visited to determine general levels of compliance with program requirements.

• Surveys of parents of students with disabilities: 55 parents of students with disabilities were sent surveys that solicited information about their experiences with the school program’s implementation of special education programs, related services and procedural requirements; eight of these parent surveys were returned to the Department for review.

The report includes findings organized under 16 specified compliance areas listed in the table of contents. The findings explain the “ratings,” or determinations by the team about the implementation status of the compliance criteria reviewed within each of these areas. The ratings indicate those criteria that were found by the team to be “Implemented,” “Implementation in Progress,” “Partially Implemented,” or “Not Implemented”. The approved special education school program must propose to the Department corrective action to bring those areas into compliance with the controlling statute or regulation. In some instances the team may have found certain requirements to be fully “Implemented” but made a specific comment on the school program’s implementation methods that also may require response from the approved special education school program.

The approved special education school program is expected to incorporate the corrective action into any program improvement plans, including the school program’s professional and paraprofessional staff development plans.

**Crystal Springs, Inc.**

**Crystal Springs Residential Program**

**SUMMARY OF COMPLIANCE CRITERIA INCLUDED IN THIS REPORT**

**REQUIRING CORRECTIVE ACTION PLAN DEVELOPMENT**

**in response to the following**

**PROGRAM REVIEW REPORT FINDINGS**

| **PROGRAM AREA** | **PARTIALLY IMPLEMENTED** | **NOT IMPLEMENTED** | **OTHER CRITERIA REQUIRING RESPONSE** |
| --- | --- | --- | --- |
| **Area 1: Demonstration of Need and Capacity** |  |  |  |
| **Area 2: Administration – Approvals, Licenses and Certificates Documentation** |  |  |  |
| **Area 4: Disclosure of Information** |  |  |  |
| **Area 5: Administration and Admissions Procedures** |  |  |  |
| **Area 6: Educational Program Requirements -- Student Learning Time** |  |  |  |
| **Area 8: Educational Program Requirements – Individualized Education Programs** |  |  |  |
| **Area 9: Educational Program Requirements -- Student Discipline and Behavior Management** |  |  |  |
| **Area 10: Educational Staffing Requirements -- Ratios** |  |  |  |
| **Area 11: Educational Staffing Requirements -- Personnel Policies** |  |  |  |
| **Area 12: Educational Staffing Requirements -- Staff Training** | 12.2 |  |  |
| **Area 13: Physical Facility and Equipment Requirements** |  |  |  |
| **Area 15: Parent and Student Involvement** |  |  |  |
| **Area 16: Health and Medical Services** |  |  |  |
| **Area 18: Student Records** |  |  |  |
| **Area 19: Anti-Hazing** |  |  |  |
| **Area 20: Bullying Prevention and Intervention** |  |  |  |

**NOTE THAT ALL OTHER CRITERIA REVIEWED BY THE DEPARTMENT THAT ARE NOT MENTIONED ABOVE HAVE RECEIVED AN “IMPLEMENTED” OR “NOT APPLICABLE or NOT RATED” RATING.**

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| **DEFINITION OF TERMS**  **FOR THE RATING OF EACH COMPLIANCE CRITERION** | | |
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| **Implemented** | | The requirement or criterion is substantially met. |
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| **Implementation in Progress** | This rating is used for criteria containing new or updated legal requirements and means that the agency has implemented any old requirements contained in the criterion and is training staff or beginning to implement the new requirements in such a way that the onsite team anticipates that the new requirements will be implemented by the end of the school year. | |
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| **Partially Implemented** | | The requirement, in one or several important aspects, is not entirely met. |
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| **Not Implemented** | | The requirement is totally or substantially not met. |
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| **Not Applicable or Not Rated** | | The requirement does not apply to the approved special education school program. |

**Crystal Springs, Inc.**

**Crystal Springs Residential Program**

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| **AREA 1: DEMONSTRATION OF NEED AND CAPACITY** |

| **CRITERION**  **NUMBER** |  |
| --- | --- |
|  | **Legal Standard** |
| 1.2 Program & Student Descriptions, Program Capacity  28.09(2)(a)(2);  28.09(2)(b)(2, 3, 7) | A narrative is provided that describes:   1. Identified population of students to be served; 2. Ages of students; 3. Educational characteristics; and 4. Behavioral characteristics.   **NOTE:** Program and Student Description must be consistent with ESE’s most recent approval of the program. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 2: ADMINISTRATION - LEGAL AND FINANCIAL DOCUMENTATION** |

| **CRITERION**  **NUMBER** |  |
| --- | --- |
|  | **Legal Standard** |
| 2.2 Approvals, Licenses, Certificates of Inspection 28.09(5)(b); 28.09(6)(b);  7 CFR 210.3 | The program has current licenses, approvals, and certificates of inspection by state and local agencies.   1. Safety Inspection. The program shall have an appropriate certificate of inspection from the Department of Public Safety or the local building inspector for each building to which students have access. 2. Fire Inspection. The program shall obtain a written report of an annual fire inspection from the local fire department. 3. Local Board of Health permit (certificate to be obtained at least twice a year). |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
| --- | --- |
|  | **Legal Standard** |
| 2.3  EEC Licensure  102 CMR 3.00  **(Residential Programs only)** | The residential program has a current, full license from the Department of Early Education and Care (EEC) (per 102 CMR 3.00). |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 4: DISCLOSURE OF INFORMATION** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 4.2 Public Information and Postings  28.09(6)(b), (d) and (e) | The following information must be publicly posted:   * Current DESE approval certificate; and * Current EEC License if applicable.   The following information must be readily available:   * First aid procedures; * Emergency procedures; and * Emergency telephone numbers. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 4.4 Advance Notice of Proposed Program/  Facility Change  18.00;  28.09 (5)(c) | The program must submit all Form 1 requests through the Web-based Monitoring System (WBMS). Additional instructions and guidance can be found in the WBMS.  Prior to any substantial change to the program or physical plant, the program provides written notification of intent to change to the Department. Notice shall be given with sufficient time to allow the Department to assess the need for the proposed change and the effects of such change on the educational program. The program must also provide written notification to the Department of any sudden and/or unexpected changes that may impact the overall health or safety of students and/or the delivery of services required by IEPs. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 4.5 Immediate Notification  18.03(10); 18.05(7);  28.09(12) (a, b) | Pursuant to applicable regulations and agency policy this school is hereby providing immediate electronic notification to ESE for ANY student enrolled in its program (Massachusetts Student, Out-of-State Student or Privately Funded Student) concerning incidents that occur during **SCHOOL HOURS ONLY, except for EMERGENCY TERMINATIONS which is for both school and residential hours.**   1. The death of any student; (Immediate verbal and written notification to the student’s parents/guardians and school district); 2. The filing of a 51-A report with Department of Children and Families (DCF) OR a complaint filed with the Disabled Persons Protection Commission (DPPC), against the school or a school staff member, for abuse or neglect of any student; 3. Any action taken by a federal, state, or local agency that might jeopardize the school’s approval with ESE (i.e. federal or state investigation; closure of intake); 4. Any legal proceeding brought against the school or its employee(s) arising out of circumstances related to the care or education of any of its students; 5. The hospitalization of a student (including out-patient emergency room visits) due to physical injury at school or previously unidentified illness, accident or disorder which occurs while the student is in the program; 6. A student run from the program; and 7. Any other incident of a serious nature that occurs to a student or staff in the program. (Some examples include: any police involvement, any media involvement, weapons, fire setting, alcohol or drug possession or use while in the program).   **FOR BOTH SCHOOL AND RESIDENTIAL HOURS:**   1. The emergency termination of a student pursuant to 28.09(12)(b). |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 5: ADMINISTRATION AND ADMISSION PROCEDURES** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 5.1 Student Admissions  18.05(1)(b)(3); 18.05(2-3);  28.09(11);  MGL Ch. 71B, Sec. 2 | The program develops and implements a written admissions policy that includes the following:   1. A statement that the program maintains a copy of its policies and procedures manual on site; 2. A statement that the program provides written notice to the parents of enrolled students that copies of its policies and procedures manual are available upon request; 3. A statement that the Physical Restraint Policy and Procedures are made available to parents of enrolled students; 4. A statement that all newly enrolled students must be found eligible for special education and on an approved Individualized Education Program; 5. Admission criteria; 6. Admission procedures; 7. Information required from referring school districts as part of the application process; 8. Procedures followed to determine whether the student will be admitted; 9. A statement that prior to admission documentation is required from a licensed physician of a complete physical examination of the student not more than twelve (12) months before admission; 10. A statement that in the event of emergency placements, the program shall make provisions for a complete examination of the student within 30 days of admission; and 11. A statement that prior to admission, and upon request, the Director of the program or designee will be available to the parents, student and the public school for an interview. The interview shall include an explanation of the program’s purpose and services, policies regarding student and parent rights including student records, the health program including the procedures for providing emergency health care, and the procedure for termination of a student. The interview will allow for the opportunity for the student and parents to see the facilities, meet the staff members and to meet enrolled students. |

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| Rating: Implemented |
| Response Required: No |

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| AREA 6: EDUCATIONAL PROGRAM REQUIREMENTS –STUDENT LEARNING TIME |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 6.1 Daily Instructional Hours/  6.4 School Days Per Year  27.04; 27.05(2); 28.09(9)(a) | The program ensures that each student is scheduled to receive a minimum of the following instructional hours unless otherwise approved by DESE or a student’s IEP provides otherwise:   * Elementary – A total of:   + 10 month program – 900 hours   + 11 month program – 990 hours   + 12 month program – 1080 hours * Secondary – A total of:   + 10 month program – 990 hours   + 11 month program –1089 hours   + 12 month program – 1188 hours   The program ensures that, unless a student’s IEP provides otherwise, each elementary school student is scheduled for at least 900 hours of structured learning time a year and each secondary school student is scheduled for at least 990 hours of structured learning time a year (including physical education for all students, required by M.G.L. c. 71, § 3), within the required school year schedule. Where the approved special education school program operates separate middle schools, at the beginning of the school year it designates each one as either elementary or secondary.  **NOTE**: The program ensures that its structured learning time is time during which students are engaged in regularly scheduled instruction, learning or assessments within the curriculum of core subjects and other subjects as defined in 603 CMR 27.02. The program’s structured learning time may include directed study (activities directly related to a program of studies, with a teacher available to assist students); independent study (a rigorous, individually designed program under the direction of a teacher, assigned a grade and credit); technology-assisted learning; presentations by persons other than teachers; school-to-work programs; and statewide student performance assessments. The hours spent in any type of structured learning time must be verified by the approved special education school program. Where the program counts independent study or a school-to-work program as structured learning time, it has guidelines that explain clearly how hours spent by students are verified.  All programs are run for the following minimum number of days (exclusive of weekends, holidays and vacations):   * 10 month program - 180 days * 11 month program - 198 days * 12 month program - 216 days   Before the beginning of each school year, the program sets a school year schedule for each program. This schedule must contain the number of school days per year DESE approved the program to operate and include at least five additional school days to account for unforeseen circumstances (i.e., snowstorms, flood, etc.) |

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| Rating: Implemented |
| Response Required: No |

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| AREA 8: EDUCATIONAL PROGRAM REQUIREMENTS –INDIVIDUALIZED EDUCATION PROGRAMS |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 8.4 Program Modifications and Support Services for English Language Learners (ELLs)  M.G.L. c. 71A; Title VI of the Civil Rights Act of 1964 | The program shall develop a written plan to implement necessary program modifications and support services to identify and effectively serve English language learners (ELLs). Such program modifications and support services comply with applicable state law (M.G.L. c. 71A) and federal law (Title VI).   * The program must acknowledge it is responsible to serve ELLs. * The program must affirm its willingness to accept ELL students into its program. * The student must be afforded the same opportunity to access and participate in the program’s services, activities and other benefits as all other students; and * Unless the student’s IEP specifies otherwise, the student must receive:   + sheltered content instruction from a trained and qualified teacher; and   + additional instruction in English as a Second Language by a certified ESL teacher. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
| --- | --- |
|  | **Legal Standard** |
| 8.5 Current IEP & Student Roster  28.09(5)(a) | The program has on file a current IEP for each publicly funded Massachusetts student that has been issued by the responsible public school district and consented to and dated by the student’s parent(s)/guardian(s) or student, when applicable. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
| --- | --- |
|  | **Legal Standard** |
| 8.8 IEP – Progress Reports  28.07(3);  34 CFR 300.320(a)  (3)(i, ii) | Progress Reports and Content   1. Progress reports must reflect the IEP goals and objectives most recently issued by the responsible school districts and consented to by the parents/guardians/students. 2. Parents/guardians/students shall receive reports on the students’ progress towards reaching the goals and objectives set in the IEPs most recently issued by the responsible school districts and consented to by the parents/guardians/students; and 3. Progress reports must be sent to the parents/guardians/students, public school districts and state agencies, as applicable, by the approved special education school program. |

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| Rating: Implemented |
| Response Required: No |

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| AREA 9: EDUCATIONAL PROGRAM REQUIREMENTS –STUDENT DISCIPLINE AND BEHAVIOR SUPPORT |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 9.1 Policies and Procedure for Behavior Support  18.03(7)(b)(2) 18.05(5); 28.09(11); 46.00 | The program develops and implements a written behavior support policies and procedures consistent with new regulations under 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention.  Behavior support policies shall be reviewed annually and be provided to program staff and made available to parents of enrolled students. The behavior support policies shall include:   1. Methods for preventing student violence; 2. Methods for preventing self-injurious behavior and suicide; 3. A description and explanation of the program’s alternatives to physical restraint; 4. A description of the program’s training requirements for staff; 5. A description of the program’s reporting requirements and follow-up procedures; 6. A description including timelines of the program’s procedure for receiving and investigating complaints regarding behavior support policies; 7. A description of the procedures to be followed for implementing the behavior support reporting requirements; 8. A description of the program’s procedure for making both oral and written notification to the parent; and 9. A procedure for the use of time-out.   **NOTE:** Meals shall not be withheld as a form of punishment or behavior management. No student shall be denied or unreasonably delayed a meal for any reason other than medical prescriptions.  **NOTE:** While approved special education school programs are required to adhere to all regulations in 603 CMR 46.00 “Prevention of Physical Restraint and Requirements If Used”, the Department is reviewing only the elements included under the “Requirements” column at this time.  **NOTE:** Behavior support training must be provided to all program staff within the first month of the school year regarding the behavior support policies and the requirements when such procedures are implemented.  OR  For employees hired after the school year begins, behavior support training must be provided and completed within one month of the date of hire of the employee. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 9.1(a) Student Separation Resulting from Behavior Support  18.05(5)(i);  46.04(1)(j) | If the program’s behavior support policies and procedures result in a student separating from the group or program activities, it shall include:   1. A requirement that students shall be continuously observed by a staff member and staff shall be with the student or immediately available to the student at all times; 2. A procedure for obtaining principal approval of time-out for more than 30 minutes based upon the individual student’s continuing agitation; and 3. A requirement that time out shall cease as soon as the student has calmed.   NOTE: While approved special education school programs are required to adhere to all regulations in 603 CMR 46.00 “Prevention of Physical Restraint and Requirements If Used”, the Department is reviewing only the elements included under the “Requirements” column at this time. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 9.4 Physical Restraint  18.05(5); 46.00 | The program shall have a written policy on the use of physical restraint and administer physical restraint in accordance with the requirements of 603 CMR 46.00.  The program administers physical restraint only in emergency situations of last resort when needed to protect a student and/or 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. Physical restraint policies, procedures and training of all staff must include these requirements.  Physical restraint policies and procedures must include the following:   1. Methods for engaging parents and students in discussions about restraint prevention and use; 2. A description and explanation of the method of physical restraint used by the program in an emergency situation; 3. A statement prohibiting seclusion, medication restraint, mechanical restraint and prone restraint unless permitted under 603 CMR 46.03(1)(b); 4. Physical restraint shall be used only in emergency situations of last resort, after other lawful and less intrusive alternatives have failed or been deemed inappropriate; 5. A description of the program’s procedure for conducting periodic review of data and documentation on the program’s use of restraint; 6. A description of the program's training requirements for all staff; 7. A description of the intensive training for staff who serve as restraint resources for the program; 8. Reporting requirements and follow-up procedures for reports to parents/guardians and to the Department; 9. A procedure for receiving and investigating complaints regarding restraint practices, including timelines; and 10. The principal or director or his/her designee shall maintain an on-going record of all reported instances of physical restraint, which shall be made available for review by the parent/guardian or the Department upon request.   **NOTE:** A residential educational program must comply with ESE restraint requirements under 603 CMR 46.00 during school hours and EEC restraint requirements under 102 CMR 3.00 during residential hours.  **NOTE:** A program within a program or facility subject to M.G.L. c. 123 or Department of Mental Health Regulations must comply with the restraint requirements of M.G.L. c. 123, 104 CMR 27.12 or 104 CMR 28.05, where applicable.  **NOTE:** While approved special education school programs are required to adhere to all regulations in 603 CMR 46.00 “Prevention of Physical Restraint and Requirements If Used”, the Department is reviewing only the elements included under the “Requirements” column at this time.  **NOTE:** Physical restraint training must be provided to all program staff within the first month of the school year regarding restraint prevention and the requirements when restraint is used.  OR  For employees hired after the school year begins, physical restraint training must be provided and completed within one month of the date of hire of the employee. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 9.7 Terminations  18.05(7); 28.09(12)(b) | The program develops and implements a written termination policy that includes provisions regarding both Planned Terminations and Emergency Terminations.  The policy must include the following:   * **Planned Terminations**: The program shall notify the public school district of the need for an IEP review meeting and provides notice of this meeting to all appropriate parties ten (10) days in advance of the intended date of the meeting. The purpose of the meeting will be to develop a clear and specific termination plan for the student that shall be implemented in no less than thirty (30) days unless all parties agree to an earlier termination date. * **Emergency Terminations**: In circumstances where the student presents a clear and present threat to the health and safety of him/herself or others, the program shall follow the procedures required under 603 CMR 28.09(12)(b) and immediately notify the Department of Elementary and Secondary Education.   The program shall not terminate the enrollment of any student, even in emergency circumstances, until the enrolling public school district is informed and assumes responsibility for the student. At the request of the public school district, the program shall delay termination of the student for up to two calendar weeks to allow the public school district the opportunity to convene an emergency Team meeting or to conduct other appropriate planning discussions prior to the student's termination from the special education school program. With the mutual agreement of the program and the public school district, termination of enrollment may be delayed for longer than two calendar weeks. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 10: EDUCATIONAL STAFFING REQUIREMENTS - RATIOS** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 10.1 Staffing for Instructional Groupings  28.06(6)(d);  28.09(7)(e) | The program shall have instructional groupings that do not exceed 1) the approved ESE Student: Licensed Educator Ratio and 2) the approved ESE Student: Licensed Educator and Aide Ratio.  Student: Licensed Educator Ratio is defined as the number of licensed special education teachers, licensed regular education teachers or licensed related service providers to the number of students within an instructional group.  Student: Licensed Educator and Aide Ratio is defined as the number of licensed special education teachers, licensed regular education teachers or licensed related service providers, and the number of aides (teacher aide, paraprofessional, direct care staff, behaviorist) to the number of students within an instructional group.  **NOTE:** If a program chooses, they may include the dates of birth for each student on the block schedules for criterion 10.1 which would satisfy the documentation requirements for both criteria 10.1 and 10.2. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 10.2 Age Range  28.06(6)(f, g) | The program shall ensure that the ages of the youngest and oldest child in any instructional grouping shall not differ by more than forty-eight months (4 years).  Prior to exceeding the forty-eight month timeframe, an Alternative Compliance Waiver (<http://www.doe.mass.edu/oases/sa-nr/default.html>) must be requested and approved by the Department.  **NOTE:** If a program chooses, they may include the dates of birth for each student on the block schedules for criterion 10.1 which would satisfy the documentation requirements for both criteria 10.1 and 10.2. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 11: EDUCATIONAL STAFFING REQUIREMENTS - PERSONNEL POLICIES** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.1 Personnel Policies and Procedures Manual  18.05(11); 18.05(11)(c)  (1); 28.09(7); 28.09(11)(a);  M.G.L. c. 71, § 38R; 42 U.S. Code § 16962; ESE Advisory on CORI revised 5/7/07; 603 CMR 26.00 as amended by Chapter 199 of the Acts of 2011 | The program shall develop and implement a written personnel policies and procedures manual that describes:   1. Criteria and procedures for hiring. This must include the school’s Criminal Offender Record Information (CORI) policy regarding CORI checks on employees, volunteers, interns and transportation providers whose responsibilities bring them into direct and unmonitored contact with students (upon initial hire and every three years thereafter). [**NOTE:** A residential program licensed by EEC does not need to conduct independent CORI checks where those checks have been done through EEC]; 2. Procedures for Criminal History Record Information (CHRI); 3. Procedures for evaluation of staff; and 4. A statement of equal employment/educational opportunities in regard to race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.2 Administrative Responsibility  18.05(11)(a, b) | The program shall designate one person who will have administrative responsibility over the operation of the program.  The administrator or designee shall be on the premises at all times during school hours while the program is in operation. All staff on duty shall know who is responsible for administration of the program at any given time. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.3 Educational Administrator Qualifications  28.09(5)(a); 28.09(7)(a);  603 CMR 44.00 | At least one staff member shall be designated as the educational administrator for the program. Such person shall be assigned to supervise the provision of special education services in the program and to ensure that the services specified in each student’s IEP are delivered. The educational administrator shall either possess licensure as a special education administrator or possess all of the following:   * License as a special educator; * A minimum of a master's degree in special education or a related field; and * A minimum of one year of administrative experience. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.4 Teachers  (Special Education Teachers and General Education Teachers)  18.05(11)(f); 28.09(5)(a); 28.09(7)(b, c); 34 CFR 300.321 | The program must ensure that all teaching staff have teaching licenses appropriate to meet the needs of the population being served pursuant to the requirements of 603 CMR 7.00 and, additionally, must adhere to the following requirements:   * To the extent that unlicensed staff is providing special education services, such services shall be designed or supervised by a licensed special educator; and * To the extent that general education teachers are providing special education services, they shall do so in coordination with the licensed special education teacher.   The number of special education teachers and the number of general education teachers must correspond with the most recently approved DESE Staffing Plan. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.5  Related Services Staff  28.09(7)(d) | All staff providing or supervising the provision of related services (including medical personnel identified in criterion 16.2 Physician Consultation, 16.3 Nursing, as well as all consultants) shall be appropriately certified, licensed or registered in their professional areas. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.6 Master Staff Roster  28.09(7) | The program maintains a master list of ALL staff for every position within the program. The staff positions must correspond to the most recent approved ESE Staffing Plan. This list must include job titles along with their corresponding Uniform Financial Report (UFR) titles, UFR numbers and full-time equivalents (FTEs). This list may include, but is not limited to:   * Administrators * Special education teachers * General education teachers * Related service providers * Registered Nurses * Direct care workers * Direct care supervisors * Clerical and maintenance staff * Psychologists * Social workers * Program support * Consultants   **NOTE:** In addition, identify any other positions not included in the most recently approved DESE Staffing Plan (e.g., 1:1 paid for by school district or additional positions funded by the agency).  **NOTE:**  Any changes/discrepancies from the last most recently approved DESE Staffing Plan (through approval of Form 1, Extraordinary Relief, Special Circumstances, Program Reconstruction) must be included and documented in the far right column on the Master Staff Roster. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 11.12 Equal Access  Mass. Const. amend. Art. 114; M.G.L. c. 76, § 5; 603 CMR 26.00, as amended by chapter 199 of the Acts of 2011; Title VI: 42 U.S.C.  2000d; 34 CFR 100.3(a), (b); Title IX: 20 U.S.C.  1681 and 34 CFR 106; Section 504: 29 U.S.C. 794 and 34 CFR 104; Title II: 42 U.S.C. 12132 and 28 CFR 35.130; ESEA, Part C, § 721 | The program provides all students with equal access to services, facilities, activities and benefits regardless of race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 12: EDUCATIONAL STAFFING REQUIREMENTS - STAFF TRAINING** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 12.1 New Staff Orientation and Training  18.05(11)(g, i); 28.09(7)(f) | The program shall develop and implement a written plan for new staff orientation and training that is consistent with the needs of the student population and includes an orientation and training program which includes the following:   * Program’s philosophy, * Organization, * Program, * Practices, * Goals, * ESE required topics (12.2 a-g), and * Provisions for orientation of interns or volunteers must be made, if applicable. If not applicable, please indicate so.   **NOTE:** New staff may must receive restraint training within one month of hire and shall not use restraint until training has been completed. New staff may not have direct care duties with students until all mandated training topics have been covered. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 12.2 In-Service Training Plan and Calendar  18.03(3);  18.03(10);  18.05(9)(e)  (1);  18.05(9)(f)  (3)(c);  18.05(9)(f)  (9)(d);  18.05(9)(i);  18.05(10);  18.05(11)(h);  28.09(7)(f);  28.09(9)(b);  28.09(10);  Title VI: 42 U.S.C. 2000d; 34 CFR 100.3;  EEOA: 20 U.S.C. 1703(f); Title IX: 20 U.S.C. 1681; 34 CFR 106.31-106.42;  M.G.L. c. 76, § 5; 603 CMR 26.00 as amended by Chapter 199 of the Acts of 2011; M.G.L. c. 71, §§ 37O (e)(2) | All staff, including new employees, must participate in annual in-service training on average at least two hours per month. Provisions for annual in-service training of interns and volunteers must be made, if applicable. If not applicable, please indicate so.  The following topics are required in-service training topics and must be provided annually to all staff:   1. Reporting abuse and neglect of students to the Department of Children and Families and/or the Disabled Persons Protection Commission; 2. Student discipline and behavior support procedures; 3. Program’s use of physical restraints; 4. Runaway policy; 5. Emergency procedures including, but not limited to, evacuation drills, emergency drills, utilization of the alarm system and evacuations in instances of fire or natural disaster; 6. Civil rights responsibilities (discrimination and harassment) regarding race, color, sex, gender identity, religion, national origin, sexual orientation, disability and homelessness; 7. Bullying prevention and intervention; 8. Medication administration, if applicable; 9. Discussion of medications students are currently taking and their possible side effects; 10. Transportation safety (for staff with transportation-related job responsibilities); and 11. Student record policies and confidentiality issues.   The following additional topics are required in-service training topics and must be provided annually to all teaching staff:   * How the learning standards of the Massachusetts Curriculum Framework are incorporated into the program’s instruction; and * Procedures for inclusion of all students in Massachusetts Comprehensive Assessment System (MCAS) testing and/or alternate assessments. |

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| Rating: Partially Implemented |
| Response Required: Yes |
| Department of Elementary and Secondary Education Findings: *While a review of the program's In-Service Training Plan and Calendar policy and procedure documentation indicated all staff are offered on average at least two hours of training per month and typically participate in annual in-service mandated trainings, staff interviews and staff records indicated that not all staff received all mandated in-service trainings annually.* |

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| **AREA 13: PHYSICAL FACILITY AND EQUIPMENT REQUIREMENTS** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 13.2 Description of Physical Facility  18.04;  28.09(8) | Classroom Space:  Each room or area that is utilized for the instruction of students shall be adequate with respect to the number of students, size and age of students and students’ specific educational needs, physical capabilities and educational/vocational activities.  Other facilities used by students:   * All areas, including but not limited to, floors, ceilings and walls, are clean, well maintained and free from safety hazards; and * Approved special education school programs shall provide the facilities, textbooks, equipment, technology, materials, and supplies needed to provide the special education and related services specified on the IEPs of enrolled students. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 13.4 Physical Facility/  Architectural Barriers  18.04(8); Mass/ Const. amend. Art. 114;  Section 504:  29 U.S.C. 794 and 34 CFR 104.21, 104.22; Title II: 42 U.S.C. 12132; 28 CFR 35.149, 35.150 | The program shall assure that students with limited mobility have access, free from barriers to their mobility, to those areas of the buildings and grounds to which such access is necessary for the implementation of the IEPs for such students. All programs receiving federal funds shall meet the requirements of Section 504 of the Rehabilitation Act of 1973.  A program which enrolls students requiring wheelchairs shall have at least one entrance without steps and wide enough for a wheelchair, for each building utilized in carrying out the IEPs for such students.  If any part of the program is not accessible to students with limited physical mobility, a plan and timetable shall be provided that describes how the program will make all programs and appropriate buildings accessible. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 13.7 Library/  Resources  18.04(6)(b) | In addition to the regular instructional area, the program shall have a variety of materials appropriate to the age and abilities of the students enrolled, and available to all enrolled students. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 15: PARENT AND STUDENT INVOLVEMENT** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 15.1 Parental Involvement and Parents’ Advisory Group  18.05(4)(a) | The program shall have a written plan for involving parents and shall have a Parents’ Advisory Group that shall advise the program on matters that pertain to the education, health and safety of the students in the program.  The program shall designate a staff person to support the Parents’ Advisory Group. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 15.3 Information to be Translated into Languages Other Than English  28.07(8); 46.06(3)  M.G.L. c. 76, § 5; 603 CMR 26.02(2);  Title VI; EEOA: 20 U.S.C. 1703(f) | When students have parents or guardians with limited English language skills, the program ensures that important school information is sent to them in a timely manner and provided to them in a language that they understand, either through written translations of documents or through oral interpreters. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 15.5 Parent Consent and Required Notification  28.02(4);  18.05(8); 18.05(9)(f)(1); 18.05 (9)(j); M.G.L. c. 71, § 32A | The program shall develop and implement policy and procedures to work with school districts to obtain the following consents:  **Annual Consent:**   * Emergency medical treatment * Medication Administration (when applicable)   **Annual Notification:**   * Behavior Support Policies and Procedures * Bullying Prevention and Intervention Plan   **When applicable:**   * Notification to parents/guardians pursuant to Parental Notification Law M.G.L. c. 71, § 32A concerning curriculum that primarily involves human sexual education or human sexuality issues. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 15.8 Registering Complaints and Grievances –Parents, Students and Employees  18.05(1)(b)  (16); 603 CMR 26.00, as amended by Chapter 199 of the Acts of 2011;  Title IX: 20 U.S.C. 1681 and 34 CFR 106.8; Section 504: 29 U.S.C. 794 and 34 CFR 104.7; Title II: 42 U.S.C. 12132 and 28 CFR 35.107 | * The approved special education school program shall develop, implement and make available to parents/guardians and, when applicable, students a set of written procedures that may be used to register complaints regarding the student’s education and care at the school that includes specific timelines and the appeals process. * The approved special education school program must adopt and publish grievance procedures for students providing for prompt and equitable resolution of complaints alleging discrimination based on legally protected categories (race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness) that includes specific timelines and the appeals process. * The approved special education school program must adopt and publish grievance procedures foremployees providing for prompt and equitable resolution of complaints alleging discrimination based on legally protected categories (race, color, sex, gender identity, religion, national origin, sexual orientation, disability or homelessness) that include specific timelines and the appeals process. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 16: HEALTH AND MEDICAL SERVICES** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.2 Physician Consultation  18.05(9)(a)  M.G.L c. 71, §§ 53, 53A, and 53B | The program shall have a licensed physician available for consultation.  **NOTE:** School Physician means a physician appointed by a School Committee or Board of Health in accordance with M.G.L c. 71, §§ 53, 53A, and 53B or, in the case of an approved special education school program, by the Board of Trustees. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.3 Nursing  18.05(9)(b);  M.G.L. c. 112  M.G.L. c. 71, §§ 53,53A,and 53B | The program shall have a Registered Nurse available depending upon the health care needs of the program’s population. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.7 Preventive Health Care  18.05(9)(g)(1); 18.05(9)(g)(4) | The program shall describe in writing a plan for the preventive health care of students:   * 603 CMR 18.05(9)(g)(1) Dental   The program, in cooperation with the student's parent(s)/guardian(s) and/or human service agency, which is responsible for payment, shall make provision for each student to receive an annual comprehensive dental examination.   * 603 CMR 18.05(9)(g)(1) Physical   The program, in cooperation with the student's parent(s)/guardian(s) and/or human service agency which is responsible for payment, shall make provision for each student to receive an annual comprehensive medical examination. The program shall require a written report from the physician(s) of the results of the examination and any recommendation and/or modification of the student's activity.   * The program shall provide a locked, secure cabinet to keep all toxic substances, medications, sharp objects and matches out of the reach of students. Toxic substances must be labeled with contents and antidote. Medications and medical supplies should not be locked in the same cabinet as other toxic substances.   **NOTE**: A newly enrolled student must have a documented physical within one year prior to their entrance to the program or the program must coordinate with the parents/guardians for the student to obtain a physical examination within 30 days of admission. |

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| Rating: Implemented |
| Response Required: No |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 16.11 Student Allergies  18.05(9)(h) | The program shall develop and implement written policy and procedures for protecting a student from exposure to foods, chemicals, or other materials to which they are allergic, as stated by their physician/medical assessment. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 18: STUDENT RECORDS** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 18.1 Confidential-ity of Student Records  23.07(1);  28.09(5)(a); 28.09(10); M.G.L. c. 71, § 34H | Programs shall keep current and complete files for each publicly funded enrolled Massachusetts student and shall manage such files consistent with the Massachusetts Student Record Regulations of 603 CMR 23.00 and M.G.L. c. 71, § 34H.   * A log of access shall be kept as part of each student’s record. If parts of the student record are separately located, a separate log shall be kept with each part. The log shall indicate all persons who have obtained access to the student record, stating:   + the name, position and signature of the person releasing the information;   + the name, position and, if a third party;   + the affiliation if any, of the person who is to receive the information;   + the date of access;   + the parts of the record to which access was obtained; and   + the purpose of such access. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 19: ANTI-HAZING** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 19 Anti-Hazing  M.G.L. c. 269, §§ 17 through 19 | * The program director of each school program serving secondary school age students issues a copy of M.G.L. c. 269 §§ 17 through 19, to every student enrolled full-time, and every student group, student team, or student organization, including every unaffiliated student group, student team, or student organization; * A copy of the school program's anti-hazing disciplinary policy that has been approved by the program's Board of Directors.   By October 1st of each year:   * Each school program serving secondary school age students files, at least annually, a report with the Department certifying:   1. Its compliance with its responsibility to inform student groups, teams, or organizations, and every full-time enrolled student, of the provisions of M.G.L. c. 269 §§ 17 through 19;   2. Its adoption of a disciplinary policy with regard to the organizers and participants of hazing; and   3. That the hazing policy has been included in the student handbook or other means of communicating school program policies to students. |

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| Rating: Implemented |
| Response Required: No |

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| **AREA 20: BULLYING PREVENTION AND INTERVENTION** |

| **CRITERION**  **NUMBER** |  |
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|  | **Legal Standard** |
| 20 Bullying Prevention and Intervention  M.G.L. c. 71, s. 37H, as amended by Chapter 92 of the Acts of 2010; M.G.L. c. 71, s. 37O(d), (e)  (IDEA-97) | * Employee handbooks/policies and procedures must contain relevant sections of the Bullying Prevention and Intervention Plan relating to the duties of faculty and staff and relevant provisions addressing the bullying of students by a school staff member. * Each year all approved special education school programs must provide parents/guardians annual written notice of the student-related sections of the Bullying Prevention and Intervention Plan. * Each year all approved special education school programs must provide all staff with annual written notice of the Bullying Prevention and Intervention Plan. * All approved special education school programs must implement, for all school staff, professional development that includes developmentally appropriate strategies to prevent bullying incidents; developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents; information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim and witnesses to the bullying; research findings on bullying, including information about specific categories of students who have been shown to be particularly at risk for bullying in the school environment; information on the incidence and nature of cyber-bullying; and internet safety issues as they relate to cyber-bullying. |

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| Rating: Implemented |
| Response Required: No |

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