Massachusetts Department of Elementary and Secondary Education

*75 Pleasant Street, Malden, Massachusetts 02148-4906 Telephone: (781) 338-3000 TTY: N.E.T. Relay 1-800-439-2370*

Jeffrey C. Riley

*Commissioner*

November 4, 2021

John Nash Executive Director

Franciscan Hospital for Children 30 Warren Street

Boston, MA 02135

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

A - Kennedy Day Program Dear Mr. Nash:

Enclosed is the Department of Elementary and Secondary Education (“Department”) Approved Special Education School Mid-cycle Review Report containing findings based on the virtual Mid-cycle Review conducted in your approved special education program in October 2021.

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, 2025 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 2024-2025 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 virtual review process. Should you require any additional information, please do not hesitate to contact the Team Chairperson.

Sincerely,

Megan Bowie, Chairperson

Office of Approved Special Education Schools

Nina M. Marchese, M.Ed., Director

Office of Approved Special Education Schools

c: James Mandell, Chairman of the Board of Directors

Jeffrey C. Riley, Commissioner of Elementary and Secondary Education Russell Johnston, Ph.D., Senior Associate Commissioner

Joanne Morris, Supervisor, Office of Approved Special Education Schools

Encl.: Mid-cycle Review Report

Full Approval Certificate, Expiration Date: August 31, 2025 Kennedy Day Program

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| DESE logo  **MID-CYCLE REVIEW REPORT**  **Franciscan Hospital for Children MCR Onsite Dates: 10/19/2021**  **Programs under review for the agency: A - Kennedy Day Program**  State Seal of Massachusetts |
| Jeffrey C. Riley  Commissioner of Elementary and Secondary Education |

**MID-CYCLE REVIEW REPORT**

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| **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. |

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| **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. |

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| **PS Criterion #3.1(d) - Evacuation and Emergency Procedures** |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and interviews indicated that the program has developed and  implemented Evacuation and Emergency Procedures that comply with 603 CMR 18.05(10). |

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| **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. |

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| **PS Criterion #5.2(a) - Contracts** |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of student records indicated the program maintained a signed written contract for each enrolled student consistent with the requirements of 603 CMR 28.06(3)(f). |

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| **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. |

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| **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. |

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| **PS Criterion #9.7 - Terminations** |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation and staff interviews indicated that the program has developed and implements a written termination policy that includes provisions related to planned and  emergency termination, and that the policy is compliant with regulatory requirements. |

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| **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. |

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| **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 2021-2022 school year. |

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| **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. |

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| **PS Criterion #11.6 - Staff Roster** |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| A review of documentation indicated that at the time of the Mid-Cycle Review, the Staff Roster contained the names, program job titles, corresponding Uniform Financial Report (UFR) title  numbers and full-time equivalents (FTE) for all staff. The Staff Roster also accurately corresponded to the most recently approved DESE staffing plan. |

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| **PS Criterion #11.10 - Supervision of Direct Care Day and Residential Staff** |
| **Rating:** |
| Implemented |
| **Basis for Findings:** |
| Review of documentation and interviews indicated the program provided regular supervision of all direct care workers by someone who has supervisory and administrative responsibility within the program and regularly scheduled conferences occurred between direct care workers and supervisor and between teachers, direct care workers and other educational  personnel. |