

**Whitney Academy, Inc.**

## Whitney Academy Intensive Residential Program

**Program Review Report**

**Onsite Visit: November 14, 2022**

**Draft Report Issued: December 23, 2022**

**Final Report Issued: January 09, 2023 Corrective Action Plan Due: February 07, 2023**

**Department of Elementary and Secondary Education Onsite Team Members: Lynda Womack, Chairperson**

**Christina Belbute, Team Member**



Jeffrey C. Riley

Commissioner of Elementary and Secondary Education

Approval for special education day and residential school programs operating in Massachusetts is contingent upon meeting the requirements of 603 CMR 28.09, “Approval of Public and Private Day and Residential Special Education School Programs,” 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.” Approval by the Department does not relieve special education day and residential school programs of their obligation to comply with other applicable state or federal statutory or regulatory requirements or with requirements set forth in their contracts with referral sources. The Department may change the approval status at any point during this three-year period if circumstances arise that warrant such a change.

For special education day and residential school programs that do not meet all requirements for Full Approval, the Department may issue a Provisional Approval effective for a period not to exceed 6 months, provided that the Department has determined that the health and safety of the students are protected and the program demonstrates the ability to implement the goals and objectives of each enrolled student’s IEP. During this period, the special education day or residential school program must submit progress reports that addresses the issues that did not meet approval requirements.

For a special education day or residential school programs that substantially meets all requirements evaluated during the review the Department will issue a Full Approval. Full Approval will remain in effect for three school years and will expire on August 31st of the third school year.

Whitney Academy Intensive Residential Program

**Provisional Approval**

Expires: July 06, 2023

### 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 18.00, 28.09 and 46.00. 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 schools participating in this review cycle were notified in May 2022 of the dates of the onsite visits and were required to conduct a Self-Assessment using the Department's Communication Hub and Monitoring Portal (CHAMP) approximately five months prior to the onsite portion of the review.

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

Website at [http://www.doe.mass.edu/oases/ps-cpr/6yrcycle.html.](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, 28.09, 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. Through the Desk Review the OASES chairperson 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 for the onsite review and covers all of the Department selected 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, the agency submits the Self-Assessment 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 submitted for each criterion. The OASES chairperson also reviews student record data, staff record data, and explanatory comments. 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 Prior Notification 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 with administrative, instructional, and other staff consistent with those criteria selected for verification. Telephone interviews as requested by parents, guardians 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 Department monitoring team will conduct this review using standard Department procedures to determine whether procedural and programmatic requirements have been implemented.

Observation of classrooms and other facilities: The team observes a sample of classrooms and other school facilities used in the delivery of programs and services to determine general levels of compliance with program requirements.

**Team:** Depending upon the scope of follow-up activities that have been identified based on the Department’s Desk Review of the agency’s Self-Assessment, a two-to-three-member Department team will conduct a two to five day Program Review.

**Final Report:** A Final Report is then issued via the CHAMP. The Final Report includes findings organized under 4 specified compliance areas. The findings explain the “ratings,” or determinations by the Department about the implementation status of the compliance criteria reviewed within each of these areas. The ratings indicate those criteria that were found by the OASES monitoring team to be “Implemented,” “Implementation in Progress,” “Partially Implemented,” or “Not Implemented.”

**Response:** The approved special education school program must propose to the Department corrective action to bring each area not found to be “Implemented” into compliance with the required 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.

**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.**

### REPORT INTRODUCTION

A 2-member team conducted a visit to Whitney Academy, Inc. during the week of 11/14/2022 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) and 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 2 leadership staff; Interviews of 2 related services staff; Interviews of 2 teaching staff; and Interviews of 2 direct care staff.

Student record review: A sample of 6 Massachusetts student records was selected by the Department. Student records were first examined by the school program’s staff and then verified by the OASES monitoring 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 the OASES monitoring team to ensure determinations regarding the implementation of procedural and programmatic requirements remain in effect.

Staff record review: A sample of 7 staff records was selected by the Department. Staff records were first examined by the school program’s staff and then verified by the OASES monitoring 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 the OASES monitoring team staff to ensure determinations regarding the implementation of procedural and programmatic requirements remain in effect. Observation of classrooms and other facilities: A sample of instructional classrooms and other facilities used in the delivery of programs and services was observed to determine general levels of compliance with program requirements.

The report includes findings organized under 5 specified compliance areas. 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", ”Implemented Response Required,“ "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 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.

##### 1. Summary of Compliance Criteria Included In This Report Requiring Corrective Action Plan Development In Response to the Following Program Review Report Findings

**Implemented**

The requirement is totally or substantially met

##### Implemented Response Required

The requirement is met, but the Agency is required to provide additional information.

##### 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.

##### Partially Implemented

The requirement, in one or several important aspects, is not entirely met.

##### Not Implemented

The requirement is totally or substantially not met.

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| **Policies and Procedures** |
| **Criteria** | **Implemented** | **Implemented Response Required** | **Implementation In Progress** | **Partially Implemented** | **Not Implemented** |
| **1.2 Program & Student Descriptions, Program Capacity** | All |  |  |  |  |
| **3.1(d) Evacuation and Emergency Procedures** | All |  |  |  |  |
| **4.4 Advance Notice of Proposed Program/Facility Change** | All |  |  |  |  |
| **4.5 Immediate Notification** | All |  |  |  |  |
| **6.1 Daily Instructional Hours/6.4 School Days Per Year** | All |  |  |  |  |
| **8.4 Program Modifications and Support Services for English** | All |  |  |  |  |
| **9.7 Terminations** | All |  |  |  |  |
| **11.1 Staff Policies and Procedures Manual** | All |  |  |  |  |
| **11.12 Equal Access** | All |  |  |  |  |
| **12.1 New Staff Orientation and Training** |  |  |  | Whitney Academy Intensive Residential Program |  |

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| --- | --- | --- | --- | --- | --- |
| **12.2 In-Service Training Plan and Calendar** |  |  |  |  | Whitney Academy Intensive Residential Program |
| **15.1 Parental Involvement and Parents' Advisory Group** | All |  |  |  |  |
| **15.5 Parent Consent and Required Notification** | All |  |  |  |  |
| **15.8 Registering Complaints and Grievances-Parents, Students and Employees** | All |  |  |  |  |
| **16.7 Preventive Health Care** | All |  |  |  |  |

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| **Staff** |
| **Criteria** | **Implemented** | **Implemented Response Required** | **Implementation In Progress** | **Partially Implemented** | **Not Implemented** |
| **10.1 Staffing for Instructional Groupings** | All |  |  |  |  |
| **11.2****Administrative Responsibility** | All |  |  |  |  |
| **11.3 Educational Administrator Qualifications** | All |  |  |  |  |
| **11.4 Teachers (Special Education Teachers and General Education Teachers)** | All |  |  |  |  |
| **11.5 Related Services Staff** | All |  |  |  |  |
| **11.6 Staff Roster** | All |  |  |  |  |
| **11.10 Supervision of Direct Care Day and Residential Staff** |  |  |  |  | Whitney Academy Intensive Residential Program |
| **16.2 Physician Consultation** | All |  |  |  |  |
| **16.3 Nursing** | All |  |  |  |  |

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| **Student** |
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| **Criteria** | **Implemented** | **Implemented Response Required** | **Implementation In Progress** | **Partially Implemented** | **Not Implemented** |
| **5.2(a) Contracts** | All |  |  |  |  |
| **8.5 Current IEP & Student Roster** |  |  |  | Whitney Academy Intensive Residential Program |  |
| **8.8 IEP - Progress Reports** | All |  |  |  |  |
| **10.2 Age Range** | All |  |  |  |  |
| **15.3 Information to be Translated into Languages Other Than English** | All |  |  |  |  |
| **16.11 Student Allergies** | All |  |  |  |  |
| **18.1****Confidentiality of Student Records** | All |  |  |  |  |
| **19 Anti-Hazing** | All |  |  |  |  |

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| **Buildings/Facilities** |
| **Criteria** | **Implemented** | **Implemented Response Required** | **Implementation In Progress** | **Partially Implemented** | **Not Implemented** |
| **2.2 Approvals, Licenses, Certificates of Inspection** | All |  |  |  |  |
| **2.3 EEC Licensure (Residential Programs Only)** | All |  |  |  |  |
| **4.2 Public Information and Postings** | All |  |  |  |  |
| **13.2 Description of Physical Space** | All |  |  |  |  |
| **13.4 Physical Facility/Architectural Barriers** | All |  |  |  |  |

\*Criterion was not previously included in the standard review cycle, but was reviewed during the Onsite visit.

#### Policies and Procedures

**Requirements**

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 ensures an understanding of the school’s philosophy, organization, program, practices and goals. The program shall describe in writing its plan for using volunteer services and how they shall be provided appropriate orientation, training and supervision.

The written plan must also include evidence that each new staff has received the DESE mandated training topics (12.2 a-g).

**NOTE:** New staff 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.

**Legal Standards**

[18.05(11)(g, i)](https://www.doe.mass.edu/lawsregs/603cmr18.html?section=05); [28.09(7)(f)](https://www.doe.mass.edu/lawsregs/603cmr28.html?section=09); [46.04(2)](https://www.doe.mass.edu/lawsregs/603cmr46.html?section=04)

**Confirmed Findings**

**12.1 New Staff Orientation and Training**

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| **Applies To** | **Rating** | **Response Required** | **Finding Description** |
| Whitney Academy Intensive Residential Program | Partially Implemented | Yes | Interviews indicated that not all staff and volunteers who work directly with students received the required orientation trainings. Additionally, new staff orientation and training was not clearly documented in all staff records; therefore, the Department was not able to verify that staff and volunteers received all mandated orientation trainings. |

##### 12.2 In-Service Training Plan and Calendar

**Requirements**

All staff, including new employees, interns and volunteers, must participate in annual inservice training on average at least two hours per month. The following topics are required inservice 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 Evacuation Drills and 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 inservice training topics and must be provided annually to all teaching staff:

How the learning standards of the Massachusetts Curriculum Frameworks are incorporated into the program’s instruction and Procedures for inclusion of all students in MCAS testing and/or alternate assessments.

**Legal Standards**

[28.09(7)(f)](https://www.doe.mass.edu/lawsregs/603cmr28.html?section=09); [28.09(9)(b)](https://www.doe.mass.edu/lawsregs/603cmr28.html?section=09); [28.09(10);](https://www.doe.mass.edu/lawsregs/603cmr28.html?section=09)

[18.03(3)](https://www.doe.mass.edu/lawsregs/603cmr18.html?section=03); [18.05(9)(e)(1)](https://www.doe.mass.edu/lawsregs/603cmr18.html?section=05); [18.05(10);](https://www.doe.mass.edu/lawsregs/603cmr18.html?section=05) [18.05(11)(h)](https://www.doe.mass.edu/lawsregs/603cmr18.html?section=05)

[Title VI: 42 U.S.C. 2000d](https://www.hhs.gov/civil-rights/for-individuals/special-topics/needy-families/civil-rights-requirements/index.html#%3A~%3Atext%3DTitle%20VI%20of%20the%20Civil%20Rights%20Act%20of%201964%2C%2042%2Cor%20other%20Federal%20financial%20assistance); [34 CFR 100.3](https://www2.ed.gov/policy/rights/reg/ocr/edlite-34cfr100.html#S3); [EEOA: 20 U.S.C. 1703(f)](https://www.govinfo.gov/app/details/USCODE-2015-title20/USCODE-2015-title20-chap39-subchapI-part2-sec1703); [Title IX: 20 U.S.C. 1681](https://www.govinfo.gov/content/pkg/USCODE-2019-title20/html/USCODE-2019-title20-chap38-sec1681.htm); [34 CFR 106.31-106.42](https://www2.ed.gov/policy/rights/reg/ocr/edlite-34cfr106.html); [M.G.L. c. 76, § 5](https://malegislature.gov/laws/generallaws/parti/titlexii/chapter76/section5); [603 CMR](https://www.doe.mass.edu/lawsregs/603cmr26.html?section=05) [26.00](https://www.doe.mass.edu/lawsregs/603cmr26.html?section=05)

**Confirmed Findings**

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| **Applies To** | **Rating** | **Response Required** | **Finding Description** |
| Whitney Academy Intensive Residential Program | Not Implemented | Yes | Interviews indicated that not all staff received the required annualin-service training. Additionally, required annual in-service training was not clearly documented in all staff records; therefore, the Department was not able to verify that staff received all mandated annual in-service training. |

#### Staff

**Requirements**

Each program shall provide ongoing and regular supervision of all direct care workers by someone who has supervisory and administrative responsibility within the program.

Regularly scheduled conferences must occur between direct care workers and supervisors; and between teachers, direct care workers and other educational personnel.

**Legal Standards**

[18.03(4)](https://www.doe.mass.edu/lawsregs/603cmr18.html?section=03)

**Confirmed Findings**

**11.10 Supervision of Direct Care Day and Residential Staff**

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| **Applies To** | **Rating** | **Response Required** | **Finding Description** |
| Whitney Academy Intensive Residential Program | Not Implemented | Yes | While a review of documentation indicated the policy and procedures for Supervision of Direct Care and Residential Staff included all required elements, individual supervision was not clearly documented in all staff records; therefore, the Department was not able to verify that staff received required supervision. |

**Student**

**Requirements**

The program has on file a current IEP for each enrolled Massachusetts student that has been issued by the responsible public school district and consented to and dated by the student’s parent(s) (or student, when applicable).

**Legal Standards**

[28.09(5)(a)](https://www.doe.mass.edu/lawsregs/603cmr28.html?section=09)

**Confirmed Findings**

**8.5 Current IEP & Student Roster**

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| **Applies To** | **Rating** | **Response Required** | **Finding Description** |
| Whitney Academy Intensive Residential Program | Partially Implemented | Yes | A review of documentation and student records and interviews indicated that not all student records contained a signed and dated placement form (form PL-1) indicating the current placement. |



WHITNEY ACADEMY, INC.

# Whitney Academy Intensive Residential Program

an approved private special education program operated pursuant to 603 CMR 18.00, 28.09, and 46.00 is granted

# Provisional Approval

This approval status expires on July 06, 2023 and is a result of a Program Review conducted in the 2022-2023 school year. The next expected Mid-cycle Review will be conducted in the 2025-2026 school

year.

**Program-Specific Information**

**Main Address:** 85 Dr Braley Rd., East Freetown, MA 02717

**Program Type:** Residential Program

**Number of Months in Session:** 12 months

**Approved Student: Licensed Educator Ratio:** 4:1

**Approved Student: Licensed Educator: Aide Ratio:** 7:1:1

**Program Rate Based on:** 45 students

**DESE Approved Student Enrollment:** 45 students

## Issued by the Office of Approved Special Education Schools:

Lynda Womack, Educational Specialist Joanne K. Morris, M.Ed., Supervisor

Date Issued: January 09, 2023

Nina M. Marchese, M.Ed., Director