

**New Hampshire  
Department of Education  
Bureau of Special Education  
Monitoring Review for Approval of  
Private Provider Special Education  
Programs**

**Cedarcrest  
Summary Report  
2017-2018**

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**Monitoring Visit Conducted on January 25, 2018  
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## Overview of the Cedarcrest School Program

The Cedarcrest School is a New Hampshire Department of Education, Bureau of Special Education Approved Program located at 91 Maple Avenue in Keene, New Hampshire. The program is approved for males and females in grades Pre-K through 12 for up to 20 students. Students enrolled in this program have primary disabilities in the areas of Autism, Intellectual Disability, Traumatic Brain Injury, Hearing Impairments, Deafness, Visual Impairments, Orthopedic Impairment, Other Health Impairments, Deafness-Blindness, Multiple Disabilities, and Developmental Delays. The Cedarcrest Center has licensures for residential and hospital facilities issued through the Department of Health and Human Services.

The school has three classrooms; an elementary classroom referred to as the “Peach Room”, an upper elementary classroom called the “Green Room”, and the “Yellow Room” for high school students.

With the underling belief that all students have the potential to learn, the staff at Cedarcrest work to ensure that each student reaches their full potential by working with students at their individual, developmental level.

Skills worked on through the educational programming at Cedarcrest School, includes academic skills, life skills, communication, and therapies. The staff believes that gaining necessary life skills and enhancing communication are essential to the success for the students at the program. Students are given the opportunities to participate in the same types of activities and events as any other student, regardless of their individual limitations. Staff engages students in meaningful activities in the areas of academics, life skills, vocational, community and therapies.

The Cedarcrest School uses the “Unique” curriculum which provides standards based interactive tools designed to meet the needs of individual students’ instructional levels. Included in this system are rigorous standards-based materials where the students can interact with differentiated, thematic units of study with text to speech. It also offers a variety of activities and multiple opportunities to demonstrate knowledge. The books, lessons, and activities are accessible on a variety of platforms, such as tablets, whiteboards and smartboards.

Cedarcrest utilizes an integrated team approach to the care and education of all students. Comprehensive teams including special educators, 1:1 assistants, physical therapists, occupational therapists, speech therapists, and nursing staff are integrated throughout each classroom.

Cedarcrest School provides a broad range of special education programming to children with significant cognitive impairments and complex medical and therapeutic needs and works closely with local area schools to include their students in appropriate activities with typical peers.

## **Noteworthy Practices and Areas in Need of Refinement**

### **Noteworthy Practices:**

During the monitoring visit, it had been revealed that the Cedarcrest School includes several practices which are noteworthy. Such practices include:

- Integrating assistive technology in all the classrooms and throughout the curriculum.
- Ensuring that each and every student is an active participant and engaged in the learning processes by allowing additional “wait time” for students to be able to process questions asked of them, formulate a response, as well as time to motor plan their movement independently in order for the student to respond without interruption from additional verbal prompts.
- Combining verbal information with visual examples, as well as providing students with multiple modes of communicating their knowledge of learned material.
- Parents and guardians are consistently involved in planning their children’s educational, social, medical, and developmental goals in addition to a comprehensive team of educators, therapists, and medical staff.
- Working in conjunction with the local schools to keep students connected to their communities through a variety of activities, and other community based outings.
- The use of the “Unique” curriculum to provide each student with lessons at their particular developmental level

### **Areas in Need of Refinement**

Areas in need of refinement are practices that have the potential to become noncompliant. Whereas these practices do not rise to the standard of noncompliance, and therefore require no corrective actions, the NHDOE believes that the practices, and potential remedies, are noteworthy to be addressed.

During the Cedarcrest School’s on-site visit the monitoring team did not identify any areas in need of refinement.

## **Overview of the Monitoring Review for Approval of Special Education Programs Process**

The Special Education Monitoring Review for Approval of Private Provider Special Education Programs process ensures that students with educational disabilities have access to; can participate in; and can demonstrate progress within the general education curriculum, thereby improving student learning. The primary focus of the monitoring review is to improve educational results and functional outcomes for all children with disabilities.

Monitoring is done on a cyclical basis. During the year prior to monitoring, the New Hampshire Department of Education (NHDOE), Bureau of Special Education (Bureau) offers training to each private provider who is involved in the monitoring process. Training encompasses writing Measurable Annual Goals, Written Prior Notice, Self-Assessment, and a topic selected by the private provider based on current need. During this time, the private provider will be given the option to include a director from outside of their Local Education Agency (LEA) area to participate in the on-site file review, as well as at least one special education administrator from another private school who has been trained in the process by the Bureau. At the beginning of the school year in which the private provider is being monitored, the private provider will send the Bureau their completed application for renewal of Bureau special education approval/nonpublic school approval in addition to the program's policy and procedure manual and any special education forms that are used by the private program. Following a review of these documents, the monitoring team will conduct an on-site review in which student files are examined for evidence of implementation of the policies and procedures through the special education process. The Bureau will also conduct a follow-up review to verify the implementation of corrective actions as defined in the summary report.

The New Hampshire Department of Education, Bureau of Special Education review members for this monitoring review included Lori Noordergraaf, Helene Anzalone, and Katherine Sisneroz, Special Education Director from the Monarch School of New England in Rochester, New Hampshire.

### **Procedures and Effective Implementation**

Each private provider must have special education procedures, and effective implementation of practices that are aligned and support the implementation of IDEA and the *New Hampshire Standards for the Education of Children with Disabilities*.

The monitoring team reviewed the following special education procedures for compliance with State and Federal regulations regarding administration, confidentiality of information, program requirements, responsibilities of private providers of special education

implementation of IEPs, behavioral interventions, RSA 126-U Limiting the use of child restraint practices in schools and treatment centers, qualifications and requirements for instructional, administrative and support personnel, change in placement or termination of enrollment, physical facilities, health and medical care, photography and audio-visual recording, and emergency planning and preparedness.

Based on the review of Cedarcrest School's special education procedures the monitoring team determined there were **no findings of noncompliance**.

### **Private Provider Curriculum and Effective Implementation**

As part of the review, the monitoring team looked for evidence that the Cedarcrest School is providing students with access to the general curriculum. The monitoring team reviewed the curriculum provided by Cedarcrest School for compliance with alternative learning standards that aligns with the general education curriculum for Kindergarten through eighth grade, pursuant to Ed 306.26(b)(1) and (2).

Based on the review of the Cedarcrest School's curriculum, the monitoring team determined that there were **no findings of noncompliance**.

### **Personnel**

The Bureau of Special Education has reviewed the Cedarcrest School personnel certifications using the New Hampshire Educator Information System. The review process was for educators employed during 2017-2018 school year.

The personnel roster that was provided by the Cedarcrest School was compared to the data in the New Hampshire Educator Information System. Each personnel member's endorsement was compared to the subject/assignment. This process was used for personnel that hold Beginning Educator Certification (BEC) and Experienced Educator Certification (EEC). If the endorsement was appropriate to the subject/ assignment then the renewal date of the endorsement was verified to ensure that the endorsement was current.

If there was a discrepancy between endorsement and the subject/assignment, the private provider was given an opportunity to verify the data. If the discrepancy could not be resolved a finding of noncompliance was made based on Personnel Standards pursuant to Ed 1114.10(a), 34 CFR 300.18, and 34 CFR 300.156.

Based on the review of the Cedarcrest School's personnel certifications, the monitoring team determined there were **no findings of noncompliance**.

## Monitoring of the Implementation of Special Education Process

Private providers are responsible for implementing the special education process in accordance with IDEA and the *New Hampshire Standards for the Education of Children with Disabilities*. The self-assessment data collection form highlights the private providers' understanding of the requirements of IDEA and the *New Hampshire Standards for the Education of Children with Disabilities* and was reviewed during the monitoring visit. Each area of compliance on the self-assessment data collection form clearly outlines whether the compliance is either a requirement of both IDEA and the *New Hampshire Standards for the Education of Children with Disabilities* or a requirement of solely the *New Hampshire Standards for the Education of Children with Disabilities*. The private provider cites the evidence of compliance in the self-assessment prior to the monitoring visit. During the monitoring visit, the monitoring team verified the evidence of compliance based on review of the student file, using the private providers' self-assessment as a resource. In the case of student specific finding(s) of noncompliance, the sending District is cited for noncompliance, as well as the private provider.

Based on this review, the Bureau of Special Education identified findings of noncompliance with IDEA and the *New Hampshire Standards for the Education of Children with Disabilities*. The findings include the citation, the area of noncompliance, and the required corrective actions, which include timelines for demonstrating correction of noncompliance. Student specific information will not be included in the report but will be provided to the private provider and, when appropriate, a district's Director of Special Education.

There are two main components to the corrective actions entitled, "*Corrective Action of Individual Instance of Noncompliance*" and "*Corrective Action Regarding the Implementation of the Regulations*". The first component, "corrective action of individual instance of noncompliance," is for any noncompliance concerning a child-specific requirement. There must be evidence that the private provider has corrected each individual case of noncompliance, unless the child is no longer placed at the program. These areas must be corrected as soon as possible with state timelines given in the report for each area. The Bureau will return to the program, typically within 3 months of the date of the report, to verify compliance for each individual instance identified in the report. The second component, "corrective action regarding the implementation of the regulations" would typically involve the private provider's participating in professional development training to appropriate personnel with regards to areas found to be in noncompliance. The Bureau will review updated data collected after the identification of noncompliance to demonstrate that the program is correctly implementing the specific requirement. This involves a follow-up on-site review of new student files, selected typically within one year of the original on-site compliance & improvement monitoring.

## Overview of the Student Specific Findings of Noncompliance

The chart below identifies the area of compliance based on student files that were reviewed by the compliance & improvement monitoring team during the onsite visit. The chart is broken down into the **compliance citations** and **area of compliance**. The compliance citations are based on the *CFR* found in the federal regulations of IDEA and the *Ed* found in the New Hampshire Standards for the Education of Children with Disabilities. The chart aligns the regulatory components to the numbered questions in the self-assessment. Regulatory components and self-assessment numbers are bolded in instances where noncompliance was noted by the compliance & improvement monitoring team.

The **review status** identifies the **number of files reviewed** for the self-assessment question as well as the number of files that were found to be in compliance. For example “5 out of 6 files demonstrated evidence that a copy of the procedural safeguards, available to the parents of a child with a disability, was given to the parent one time in the school year.” This means that 6 files were reviewed and 5 files were found to be in compliance.

In cases where there was a finding of noncompliance for a particular student, the chart identifies the **First Stage Corrective Action of Individual Instance(s) of Noncompliance**. In the case of an individual instance of noncompliance, the corrective action would generally involve the IEP team convening to resolve the finding of noncompliance. Timelines for these corrective actions are also noted. For the First Stage Corrective Actions, the Bureau will return to the private provider program within 3 months following the program receiving written notification of noncompliance (the report) to review all student files in which there were findings of noncompliance in order to verify compliance with the corrective action stated in the report.

In cases where there was a finding of noncompliance for a particular student, the next section of the chart identifies the **First Stage Corrective Action Regarding the Implementation of the Regulation**. This section informs the private provider program of any practices or procedures which need to be corrected as well as trainings for personnel to inform them of the corrections as a result of the findings of noncompliance. The required corrective action for the program and a timeline for the corrective action are also provided.

In cases where there was a finding of noncompliance for a particular student, the final section of the chart identifies the **Second Stage Corrective Action Regarding the Implementation of the Regulation**. Identified in this section will be the number of new student files that will be selected at the program to demonstrate correct implementation of the regulations for the section of the self-assessment in which noncompliance was found. For the Second Stage Corrective Actions, the Bureau will verify compliance through a subsequent on-site review of the new files within one year from the date of the report. **The total number of student files selected for the Second Stage Corrective Action Regarding the Implementation of the Regulation will not exceed the original number of files reviewed at the private provider program.**

## Findings of Noncompliance

When determining compliance, the NHDOE reviews the currently agreed upon/signed IEP at the on-site monitoring visit.

| COMPLIANCE CITATIONS  |               | AREA OF COMPLIANCE   |
|---|---------------|--|
| Ed 1114.03  |               | A. Governance  |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b> |               | <b>Review Status</b>   |
| 1.  | Ed 1114.03(a) | <b>0 out of 0</b> IEP files demonstrated evidence that the private provider has, for IEPs in which the private provider cannot provide the student with all services detailed in the IEPs, an agreed upon contract with the sending LEA for the provision of those services. <i>(Two student files have all services provided by the private provider)</i> |

| COMPLIANCE CITATIONS  |                                 | AREA OF COMPLIANCE   |
|---|---------------------------------|--|
| Ed 1114.05  |                                 | B. Record of Access; Confidentiality Requirements  |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b> |                                 | <b>Review Status</b>   |
| 2.  | 34 CFR 300.614<br>Ed 1119.01(a) | <b>2 out of 2</b> IEP files demonstrated evidence of a record of parties that have obtained access to the education records collected, maintained or used under Part B of the Act, including the name of the party, the date access was given, and the purpose for which the party is authorized to use the records. |

| COMPLIANCE CITATIONS  |  | AREA OF COMPLIANCE  |
|---|--|---|
| 34 CFR 300.323<br>Ed 1109   |  | C. Individualized Education Program   |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b> |  | <b>Review Status</b>  |
| 3.  | Ed 1109.04(a)                            | <b>2 out of 2</b> IEP files demonstrated evidence that a copy of the IEP has been provided to each teacher and service provider listed as having responsibilities for implementing the IEP. |
| 4.  | 34 CFR 300.324(b)(1)(i)<br>Ed 1109.03(d) | <b>2 out of 2</b> IEP files demonstrated evidence that the IEP was reviewed at least annually.  |
| 5.  | 34 CFR 300.323(a)<br>Ed 1109.03(d)       | <b>2 out of 2</b> IEP files demonstrated evidence that the IEP was in place at the beginning of the school year.  |

| COMPLIANCE CITATIONS  |                                       | AREA OF COMPLIANCE  |
|---|---------------------------------------|---|
| 34 CFR 300.321<br>Ed 1103.01                                      |                                       | D. IEP Team; Participants in the Special Education Process  |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b> |                                       | <b>Review Status</b>  |
| 6.  | 34 CFR 300.321(a)(1)<br>Ed 1103.01(a) | <b>2 out of 2</b> IEP files demonstrated evidence that the IEP Team included the parents of the child or adult student. |



|     |                                       |   |
|-----|---------------------------------------|---|
| 7.  | 34 CFR 300.321(a)(2)<br>Ed 1103.01(a) | <b>0 out of 0</b> IEP files demonstrated evidence that at least one regular education teacher of the child (if the child is, or may be, participating in the regular education environment) participated in the meeting ( <i>No student files included regular education teachers who were excused per 34 CFR 300.321(e).</i> )   |
| 8.  | 34 CFR 300.321(a)(3)<br>Ed 1103.01(a) | <b>2 out of 2</b> IEP files demonstrated evidence that at least one special education teacher or, where appropriate, not less than one special education provider of the child participated in the meeting.   |
| 9.  | 34 CFR 300.321(a)(4)<br>Ed 1103.01(a) | <b>2 out of 2</b> IEP files demonstrated evidence that the IEP Team included an LEA representative.   |
| 10. | Ed 1103.01(d)                         | <b>0 out of 0</b> IEP files demonstrated evidence that, if vocational, career or technical education components are being considered, the IEP team membership included an individual knowledgeable about the vocational education programs and/or career technical education being considered. ( <i>Two student files were students for whom vocational education/CTE were not considered.</i> )  |
| 11. | Ed 1103.02(a),(c), (d)                | <b>0 out of 0</b> IEP files demonstrated evidence that the parent(s) received a written invitation no fewer than 10 days before an IEP meeting which included the purpose, time, location and identification of the participants or the parent agreed in writing that the LEA could satisfy this requirement via transmittal by electronic mail <u>or</u> demonstrated evidence of written consent of the parent(s) that the notice requirement were waived [Ed 1103.02(b)]. ( <i>Two student files were students for whom the written invitation is the responsibility of the LEA.</i> ) |

| COMPLIANCE CITATIONS  |                           | AREA OF COMPLIANCE  |
|---|---------------------------|---|
| 34 CFR 300.320  |                           | E. Individualized Education Program (Present Levels of Academic Achievement and Functional Performance)   |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b> |                           | <b>Review Status</b>  |
| 12.   | 34 CFR 300.324(a)(1)(i)   | <b>2 out of 2</b> IEP files demonstrated evidence that the team considered the strengths of the child.  |
| 13.   | 34 CFR 300.324(a)(1)(iv)  | <b>2 out of 2</b> IEP files demonstrated evidence that the team considered the academic, developmental, and functional needs of the child.  |
| 14.   | 34 CFR 300.324(a)(1)(ii)  | <b>2 out of 2</b> IEP files demonstrated evidence that the concerns of the parents for enhancing the education of their child were considered.  |
| 15.   | 34 CFR 300.324(a)(1)(iii) | <b>2 out of 2</b> IEP files demonstrated evidence that the results of the initial or most recent evaluation of the child were considered.   |
| 16.   | 34 CFR 300.320(a)(1)(i)   | <b>2 out of 2</b> IEP files demonstrated evidence of a statement in the IEP that describes how the student's disability affects the student's involvement and progress in the general education curriculum.   |
| 17.   | 34 CFR 300.320(a)(4)(ii)  | <b>2 out of 2</b> IEP files demonstrated evidence of a statement in the IEP that describes how the student's disability affects non-academic areas.   |
| 18.   | 34 CFR 300.320(a)(1)(ii)  | For preschool children, <b>0 out of 0</b> IEP files demonstrated evidence of a statement in the IEP that describes how the disability affects the child's participation in appropriate activities. ( <i>Two student files were not of preschool age students.</i> ) |

| COMPLIANCE CITATIONS                                   |  | AREA OF COMPLIANCE  |
|--|--|---|
| 34 CFR 300.324(a)(2)(i)<br>Ed 1109.03(h)               |  | F. Consideration of Special Factors   |
| Self-Assessment Question Number & Regulatory Component |  | Review Status   |
| 19.  | 34 CFR 300.324(a)(2)(i)<br>Ed 1109.03(h)   | When a child's behavior impedes the child's learning or that of others, <b>0 out of 0</b> IEP files demonstrated evidence that the team considered the use of positive behavioral interventions and supports, and other strategies, to address that behavior. <i>(Two student files were not of students whose behavior impedes learning.)</i>  |
| 20.  | 34 CFR 300.324(a)(2)(ii)<br>Ed 1109.03(h)  | When a child demonstrates limited English proficiency, <b>0 out of 0</b> IEP files demonstrated evidence that the team considered the language needs of the child as those needs relate to the child's IEP. <i>(Two student files were not of students who demonstrated limited English proficiency.)</i>   |
| 21.  | 34 CFR 300.324(a)(2)(iii)<br>Ed 1109.03(h) | When a child is blind or visually impaired, <b>0 out of 0</b> IEP files demonstrated evidence that the team provided for instruction in Braille and the use of Braille unless the IEP team determined, after an evaluation of the child's reading and writing skills, needs, and appropriate reading and writing media (including an evaluation of the child's future needs for instruction in Braille or the use of Braille), that instruction in Braille or the use of Braille was not appropriate for the child. <i>(Two student files were not of blind or visually impaired students.)</i> |
| 22.  | 34 CFR 300.324(a)(2)(iv)<br>Ed 1109.03(h)  | <b>2 out of 2</b> IEP files demonstrated evidence that the IEP Team considered the communication needs of the child.  |
| 23.  | 34 CFR 300.324(a)(2)(iv)<br>Ed 1109.03(h)  | When a child is deaf or hard of hearing, <b>0 out of 0</b> IEP files demonstrated evidence that the team considered the child's language and communication needs, opportunities for direct communications with peers and professional personnel in the child's language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the child's language and communication mode. <i>(Two student files were not of deaf or hard of hearing students.)</i>  |
| 24.  | 34 CFR 300.324(a)(2)(v)<br>Ed 1109.03(h)   | <b>2 out of 2</b> IEP files demonstrated evidence that the IEP Team considered whether the child needs assistive technology devices and services.   |

| COMPLIANCE CITATIONS                                   |                   | AREA OF COMPLIANCE  |
|--|-------------------|---|
| Ed 1109.01(a)(10)                                      |                   | G. Courses of Study   |
| Self-Assessment Question Number & Regulatory Component |                   | Review Status   |
| 25.  | Ed 1109.01(a)(10) | For each student with a disability beginning at age 14 or younger, if determined appropriate by the IEP team, <b>1 out of 1</b> IEP files demonstrated evidence of a statement of the transition service needs of the student under the applicable components of the student's IEP that focuses on the student's courses of study such as participation in advanced-placement courses or a vocational education. <i>(One student file was a student aged 13 or younger who will not be turning 14 during the IEP period and no evidence the IEP team determined this is necessary.)</i> |

| COMPLIANCE CITATIONS   |  | AREA OF COMPLIANCE  |
|--|--|---|
| 34 CFR 300.320(a)(2)(i)<br>Ed 1109.01(a)   |  | H. Measurable Annual Goals; Short-term Objectives or Benchmarks   |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b>  |  | <b>Review Status</b>  |
| 26.  | 34 CFR 300.320(a)(2)(i)<br>Ed 1109.01(a)(1)    | <b>1 out of 2</b> IEP files demonstrated evidence of a statement of measurable annual goals, including academic and functional goals.<br><br>For <b>student code B</b> there was insufficient evidence demonstrating compliance with this requirement.  |
| 27.  | 34 CFR 300.320(a)(2)(i)(A)<br>Ed 1109.01(a)(1) | <b>2 out of 2</b> IEP files demonstrated evidence that the measurable annual goals meet the child's needs that result from the child's disability to enable the child to be involved in and make progress in the general education curriculum.  |
| 28.  | 34 CFR 300.320(a)(2)(i)(B)<br>Ed 1109.01(a)(1) | If there are other educational needs that result from the child's disability, <b>1 out of 1</b> IEP files demonstrated evidence that the measurable annual goals meet each of the child's other educational needs that result from the child's disability. <i>(One student file was a student who did not have other identified educational needs.)</i> |
| 29.  | Ed 1109.01(a)(6)                               | <b>2 out of 2</b> IEP files demonstrated evidence of short-term objectives or benchmarks for all children unless the parent determines them unnecessary for all or some of the child's annual goals.  |
| <p><b>First Stage Corrective Action of Student Specific Instance(s) of Noncompliance:</b> As soon as possible, but no later than 2 months of the date of this report, the private provider, in conjunction with the sending district, must amend the IEPs to include measurable annual goals.</p> <p>The NHDOE will verify this through a subsequent on-site review.</p> <p><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide training to appropriate staff to address writing measurable annual goals.</p> <p>Provide the dates, names of attendees, and a description of the trainings, which defines the private provider's procedure for complying with this specific rule, to the NHDOE within 3 months from the date of this report.</p> <p><b>Second Stage Corrective Action Regarding the Implementation of the Regulations:</b> The NHDOE will review 2 new student files at Cedarcrest School – Day Program for updated data demonstrating compliance with this requirement.</p> |  |   |

| COMPLIANCE CITATIONS  |                  | AREA OF COMPLIANCE  |
|---|------------------|---|
| Ed 1109.01(a)(8)  |                  | I. Review and Revision of IEPs (Measuring Progress)   |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b> |                  | <b>Review Status</b>  |
| 30.   | Ed 1109.01(a)(8) | <b>2 out of 2</b> IEP files demonstrated evidence that the IEP includes a statement of how the child's progress toward meeting the annual goals shall be provided to the parents. |

| COMPLIANCE CITATIONS  |   | AREA OF COMPLIANCE   |
|---|---|--|
| Ed 1114.06(b)   |   | J. Responsibilities of Private Providers of Special Education or other Non-LEA Programs in the Implementation of IEPs  |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b>   |   | <b>Review Status</b>   |
| 31.   | 34 CFR 300.325(b)<br>Ed 1109.05<br>Ed 1114.06(a); | For the purpose of initiating the process for all matters concerning possible changes and/or modification in the identification, evaluation, development and/or revision of an IEP or changes in placement of a child with a disability, <b>0 out of 0</b> IEP files demonstrated evidence that the private provider contacted the sending school district. <i>(Two student files had no changes in the child's identification, evaluation, development or revision of the IEP or placement)</i> |
| 32.   | <b>Ed 1114.06(i), (j), (k)</b>                    | <b>1 out of 2</b> IEP files demonstrated evidence that a minimum of 3 comprehensive reports per year are completed on each child with a disability enrolled in the program.<br><br>For <b>student code A</b> one of the comprehensive progress reports was missing a record of attendance.   |
| <p><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide training to appropriate staff to ensure that a minimum of 3 comprehensive reports per year, which includes a record of attendance, are completed on each child with a disability enrolled in the program.</p> <p>Provide the dates, names of attendees, and a description of the trainings, which defines the private provider's procedure for complying with this specific rule, to the NHDOE within 3 months from the date of this report.</p> <p><b>Second Stage Corrective Action Regarding the Implementation of the Regulations:</b> The NHDOE will review 2 new student files at Cedarcrest School – Day Program for updated data demonstrating compliance with this requirement.</p> |   |  |

| COMPLIANCE CITATIONS   |                      | AREA OF COMPLIANCE  |
|--|----------------------|---|
| 34 CFR 300.323(d)(2)(ii)<br>Ed 1109.03(a); Ed 1109.03(v);<br>Ed 1102.01(b) |                      | K. Accessibility of Child's IEP to Teachers and Others (General Accommodations and General Modifications)   |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b>          |                      | <b>Review Status</b>  |
| 33.  | <b>Ed 1102.01(b)</b> | If accommodations are included, <b>1 out of 2</b> IEP files demonstrated evidence that the accommodations are changes in instruction or evaluation determined necessary by the IEP team that <b>do not impact</b> the rigor, validity, or both of the subject matter being taught or assessed.<br><br>For <b>student code B</b> there was insufficient evidence demonstrating compliance with this requirement.   |
| 34.  | <b>Ed 1102.03(v)</b> | If modifications are included, <b>0 out of 1</b> IEP files demonstrated evidence that the modifications are changes in instruction or evaluation determined necessary by the IEP team <b>that impact</b> the rigor, validity, or both of the subject matter being taught or assessed. <i>(One student file was a student with no modifications.)</i><br><br>For <b>student code B</b> there was insufficient evidence demonstrating compliance with this requirement. |

**First Stage Corrective Action of Student Specific Instance(s) of Noncompliance:** As soon as possible but no later than 2 months from the date of the report, the private provider, in conjunction with the sending district, must convene the IEP teams to review the IEPs and show evidence that if accommodations are included in the IEP, they are changes in instruction or evaluation determined necessary by the IEP team that do not impact the rigor, validity, or both of the subject matter being taught or assessed, and if modifications are included in the IEP, they are changes in instruction or evaluation determined necessary by the IEP team that impact the rigor, validity, or both of the subject matter being taught or assessed.

The NHDOE will verify this through a subsequent on-site review.

**First Stage Corrective Action Regarding the Implementation of the Regulations:** Provide training to appropriate staff to ensure that accommodations are changes in instruction or evaluation determined necessary by the IEP team that **do not impact** the rigor, validity, or both of the subject matter being taught or assessed, and modifications are changes in instruction or evaluation determined necessary by the IEP team **that impact** the rigor, validity, or both of the subject matter being taught or assessed.

Provide the dates, names of attendees, and a description of the trainings, which defines the private provider's procedure for complying with this specific rule, to the NHDOE within 3 months from the date of this report.

**Second Stage Corrective Action Regarding the Implementation of the Regulations:** The NHDOE will review 2 new student files at Cedarcrest School – Day Program for updated data demonstrating compliance with this requirement.

| COMPLIANCE CITATIONS  |  | AREA OF COMPLIANCE   |
|---|--|--|
| 34 CFR 300.320(a)<br>Ed 1109.01(a)(1); 1109.04(b)                 |  | L. Definition of Individualized Education Program (Special Education and Related Services, Supplementary Aids and Services, and Program Modifications or Supports for School Personnel)  |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b> |  | <b>Review Status</b>   |
| 35.   | 34 CFR 300.320(a)(4)<br>Ed 1109.01(a)(1) | <b>2 out of 2</b> IEP files demonstrated evidence of a statement of special education.   |
| 36.   | Ed 1109.04(b)(1)                         | <b>2 out of 2</b> IEP files demonstrated written evidence documenting implementation of the IEP with regards to all special education services provided.   |
| 37.   | 34 CFR 300.320(a)(4)<br>Ed 1109.01(a)(1) | <b>2 out of 2</b> IEP files demonstrated evidence of a statement of related services.  |
| 38.   | Ed 1109.04(b)(1)                         | <b>2 out of 2</b> IEP files demonstrated written evidence documenting implementation of the IEP with regards to all related services provided.   |
| 39.   | 34 CFR 300.320(a)(4)<br>Ed 1109.01(a)(1) | <b>1 out of 1</b> IEP files demonstrated evidence of a statement of supplementary aids and services. <i>(One student file was a student for whom there was no evidence that the IEP team determined this is necessary.)</i>  |
| 40.   | Ed 1109.04(b)(2)                         | <b>1 out of 1</b> IEP files demonstrated written evidence documenting implementation of the IEP with regards to any supplementary aids and services provided. <i>(One student file was a student for whom there were no supplementary aids and services in the IEP.)</i> |
| 41.   | 34 CFR 300.320(a)(4)<br>Ed 1109.01(a)(1) | <b>1 out of 1</b> IEP files demonstrated evidence of a statement of the supports for school personnel. <i>(One student file was a student for whom there was no evidence that the IEP team determined this is necessary.)</i>  |
| 42.   | Ed 1109.04(b)(4)                         | <b>1 out of 1</b> IEP files demonstrated written evidence documenting implementation of the IEP with regards to supports for school personnel. <i>(One student file was a student for whom there were no supports for personnel in the IEP.)</i>                         |

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| 43. | 34 CFR 300.320(a)(7)<br>Ed 1109.01(a)(1) | <b>2 out of 2</b> IEP files demonstrated evidence of a projected date for the beginning of the services and modifications described in the supports and services section of the IEP.                  |
| 44. | 34 CFR 300.320(a)(7)<br>Ed 1109.01(a)(1) | <b>2 out of 2</b> IEP files demonstrated evidence of the anticipated frequency, location, and duration of those services and modifications described in the supports and services section of the IEP. |

| COMPLIANCE CITATIONS  |   | AREA OF COMPLIANCE   |
|---|---|--|
| 34 CFR 300.320(a)(5)<br>Ed 1109.01(a)(1)                          |   | M. Definition of Individualized Education Program (Justification for Non-Participation)  |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b> |   | <b>Review Status</b>   |
| 45.   | 34CFR 300.320(a)(5)<br>Ed 1109.01(a)(1) | <b>2 out of 2</b> IEP files demonstrated evidence of an explanation of the extent, if any, to which the child will not participate with nondisabled children in the regular class and in the activities described in the supports and services section of the IEP. |

| COMPLIANCE CITATIONS  |   | AREA OF COMPLIANCE  |
|---|---|---|
| 34 CFR 300.320(a)(6)<br>Ed 1109.01(a)(1)                          |   | N. Definition of Individualized Education Program (State and District Wide Assessments)   |
| <b>Self-Assessment Question Number &amp; Regulatory Component</b> |   | <b>Review Status</b>  |
| 46.   | 34 CFR 300.320(a)(6)(i)<br>Ed 1109.01(a)(1)<br>RSA 193-C<br>Ed 1114.05(k)     | <b>0 out of 0</b> IEP files demonstrated evidence of a statement of any individual appropriate accommodations that are necessary to measure the academic achievement and functional performance of the child on State and district wide assessments. <i>(Two student files were of students for whom there were no state or district wide assessments for the student's age/grade level.)</i> |
| 47.   | 34 CFR 300.320(a)(6)(ii)(A)<br>Ed 1109.01(a)(1)<br>RSA 193-C<br>Ed 1114.05(k) | When the IEP Team determines that the child must take an alternate assessment instead of a particular regular State or district wide assessment of student achievement, <b>1 out of 1</b> IEP files demonstrated evidence of a statement of why the child cannot participate in the regular assessment. <i>(One student file was of a student not taking an alternate assessment.)</i>        |
| 48.   | 34 CFR 300.320(a)(6)(ii)(B)<br>Ed 1109.01(a)(1)<br>RSA 193-C<br>Ed 1114.05(k) | When the child is taking an alternate assessment, <b>1 out of 1</b> IEP files demonstrated evidence describing why the particular alternate assessment selected is appropriate for the child. <i>(One student file was of a student not taking an alternate assessment.)</i>  |