

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

**Crotched Mountain School
Summary Report
2015-2016**

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**Monitoring Visit Conducted on January 26, 2016
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Overview of the Crotoned Mountain School Program

The Crotoned Mountain School is a New Hampshire Department of Education, Bureau of Special Education Approved Program located in Greenfield, New Hampshire. The program is approved for grades K through 12 for up to 106 students (both in state and out of state students). Students enrolled in this program have primary disabilities in the areas of Autism, Deaf-Blindness, Deafness, Developmental Delay, Emotional Disturbance, Hearing Impairments, Intellectual Disability, Multiple Disabilities, Orthopedic Impairment, Other Health Impairments, Specific Learning Disability, Speech-Language Impairments, Traumatic Brain Injury, and Visual Impairments. The Crotoned Mountain School offers a regular High School Diploma. The Crotoned Mountain Rehabilitation Center has licensures for residential and hospital facilities issued through the Department of Health and Human Services.

At Crotoned Mountain School, importance is set around ensuring that all students receive the services they need to be most successful. Crotoned Mountain School actively seeks out and attains technology services that eliminates learning obstacles and enables all students to participate in the classroom.

The leadership team at Crotoned Mountain School consists of the principal, two assistant principals, and an operations director.

The program's mission is to "maintain a clear vision of supporting learners at every opportunity by building on their strengths and embracing their personal choices while creating a community of mutual respect and support."

The purpose for the program is "create and cultivate an environment where interpersonal relationships form the foundation for learning using a values-centered approach with three major touchstones; Mastery, Chemistry, and Delivery."

The Crotoned Mountain School's handbook outlines their Gentle Teaching model. This model emphasizes the importance set on gaining an understanding of the student's behavior in order to assist in the projected outcome of skill acquisition and deceleration of challenging behavior. This process includes developing bonds of trust between the students and staff.

According to the Crotoned Mountain School Handbook, and as evidenced during the monitoring on-site review, the program demonstrates a strong, valuable connection between students and staff. Classroom teachers work in collaboration with speech therapists, occupational therapists, physical therapists, BCBA clinicians, behaviorists, social workers, and psychologists, to create an environment where students can be most successful through recognizing and building upon strengths, as well as weaknesses.

Noteworthy Practices and Areas in Need of Refinement

Noteworthy Practices

During the monitoring visit, it had been revealed that the Crotched Mountain School includes several practices in their teaching, lessons, and expectations which are noteworthy. Such practices include:

- Using a three-tiered curriculum to meet the student's needs through providing assistance with creating the foundations for learning before accessing the general curriculum. This method creates a unique learning path for each student that ranges from developing basic life skills to achieving a high school diploma in preparation for college.
- Integrating technology in the classroom and throughout the curriculum.
- Building upon students' strengths and knowledge while strengthening areas of weakness.
- Combining verbal information with visual examples, as well as providing students with multiple modes of communicating their knowledge of learned material.
- The program's transition curriculum has outlined units with specific lessons organized by warm-up and specific activities based on objectives. Each lesson details the essential goals, enduring understanding, essential questions, skills and knowledge acquisition, learning activities, and assessment. The overall culminating assessment for each student is a transition portfolio that captures all that has been learned throughout participation in the transition program.
- Parents and guardians are intimately involved in planning their children's educational, social, and developmental goals.
- Working in conjunction with the School Districts to keep students connected to their communities.
- The implementation of new, integrated assistive technologies that allow students in the classroom to use their individual devices to participate in lessons using Smart Technologies, Google Education and a web-based eye gaze program.

Areas in Need of Refinement

During the monitoring visit, it had been revealed that the Crotched Mountain School had a couple areas in need of refinement. The NHDOE identified these areas, and potential remedies. Whereas these practices do not rise to the standard of noncompliance, and therefore require no corrective actions, the NHDOE believes that the areas in need of refinement are noteworthy to be addressed.

- During the Monitoring Review, the Team discovered that the policy and procedure manual format may lead to a misperception as to the intended audience for this manual. The policies and procedures are written to include a scope, objective, and a procedure which creates confusion as to whether the policies and procedures are for the school, as required by the Administrative Rules for Children with Disabilities, or for the entire Crotched Mountain facility, which would include the residential and hospital. The NHDOE recommends that Crotched Mountain School have policies and procedures which are specific to just the school.
- During the Monitoring Review, the Team discovered two IEPs which were signed by the LEA and the parent; however the “Accept IEP” check box was not filled in. Crotched Mountain School should consider developing a procedure to ensure that IEPs received from districts contain all the required components.

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, Janelle Cotnoir, and Amy Jenks from the Department of Education and Kevin Murphy, Special Education Director from Strafford Learning Center.

Policies, Procedures, and Effective Implementation

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

The monitoring team reviewed the following policies and 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 the Crotched Mountain School policies and procedures manual, 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 Crotched Mountain School is providing students with access to the general curriculum. The monitoring team reviewed the grades Kindergarten through 12 curriculum provided by Crotched Mountain School for compliance with learning areas in Arts Education, English/Language Arts, Health Education, Physical Education, Family & Consumer Science, Information & Communications Technologies, Mathematics, Science, Social Studies, and Technology Education, pursuant to Ed 306.261(b)(1)and(2) & Ed 306.27(c).

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

Personnel

The Bureau of Special Education has reviewed the Crotched Mountain School personnel certifications using the New Hampshire Educator Information System. The review process was for educators employed during 2015-2016 school year.

The personnel roster that was provided by the Crotched Mountain 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 Crotched Mountain School's personnel certifications, the monitoring team determined there were **six findings of noncompliance**.

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
34 CFR 300.18; 34 CFR 300.156; Ed 1114.10(a)	Personnel Standards
<p>Corrective Action regarding the Implementation of the Regulations: The Crotched Mountain School must provide the NHDOE with evidence that resolves the findings of noncompliance for no Teacher/Consultant in the following content areas:</p> <ul style="list-style-type: none"> • Information & Communication Technology, • Reading & Writing Specialist/Teacher, • Mathematics, • Family & Consumer Science, • Technology Education, and • Business Education <p>Provide the names and endorsements of certified staff or consultants for the content areas to the NHDOE as soon as possible but no later than 6 months from the date of this report.</p>	

Crotched Mountain School was notified of the concerns listed above, via email, on January 29, 2016. Staff specific information was included in the email.

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 Rules 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 Rules 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 Rules for the Education of Children with Disabilities* or a requirement of solely the *New Hampshire Rules 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 Rules 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 Rules 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 is 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. During the compliance review visit, there were **2 files** which could not be reviewed, as there was no parent and/or LEA signature indicating consent/approval of the provisions of the IEP; therefore all areas were deemed out of compliance.

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
34 CFR 300.323; 34 CFR 300.324 Ed 1109	Individualized Education Program
<p>6 out of 8 files demonstrated evidence of a currently agreed upon/signed IEP by both the parent and the LEA.</p> <p>For student files A & I, there was insufficient evidence demonstrating compliance with this requirement.</p> <p>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 this report, the Crotched Mountain School must ensure that a currently agreed upon/signed IEP by both the parent and the LEA is in place for <u>students A & I</u>. A completed <i>Self-Assessment Data Collection Form</i> will need to be completed by the Crotched Mountain School prior to the subsequent on-site review.</p> <p>The NHDOE will verify compliance utilizing the <i>Self-Assessment Data Collection Form</i> through a subsequent on-site review.</p> <p>First Stage Corrective Action Regarding the Implementation of the Regulations: Provide training to appropriate staff to ensure that IEPs include the signature of the parent, or where appropriate, student, and a representative of the LEA indicating approval of the provisions of the IEP.</p> <p>Provide the dates, names of attendees, and a description of the training, which defines Crotched Mountain School's procedure for complying with this specific rule, to the NHDOE within 3 months from the date of this report.</p>	

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1114.03		A. Governance
Self-Assessment Question Number	Regulatory Component	Review Status
1.	Ed 1114.03(a)	6 out of 6 IEPs demonstrated evidence that the private provider has provided students with

		disabilities all services detailed in their IEPs.
2.	Ed 1114.03(d)	6 out of 6 IEPs demonstrated evidence that the private provider has appointed a person to act as chief administrator with authority to manage the affairs of the program.
3.	Ed 1114.03(g)	6 out of 6 IEPs demonstrated evidence that the private provider has kept on permanent file a current list of the names and addresses of all members of the program's board of directors.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1114.05		B. Program Requirements
Self-Assessment Question Number	Regulatory Component	Review Status
4.	Ed 1114.05(f)	6 out of 6 IEPs demonstrated evidence that the private provider has only accepted students with disabilities for which the program is approved.
5.	Ed 1114.05(h)	6 out of 6 IEPs demonstrated evidence that the private provider has an established system of routine communication among all staff members of the program who provide direct services to a child, including both instructional and residential services; all staff members involved in providing direct services to a child with a disability participated in the process of planning for that child, and all staff shall know the contents of that child's IEP and all other reports and evaluations, as appropriate to their role and responsibilities.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.614 Ed 1119.02(a)		C. Record of Access; Confidentiality Requirements
Self-Assessment Question Number	Regulatory Component	Review Status
6.	34 CFR 300.614 Ed 1119.02(a)	6 out of 6 IEPs 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.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.504(a)		D. Procedural Safeguards
Self-Assessment Question Number	Regulatory Component	Review Status
7.	34 CFR 300.504(a)	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.
<p>For student file B, there was no evidence that a copy of the procedural safeguards was given to the parent one time in the school year.</p> <p>First Stage Corrective Action regarding the Individual Instance of Noncompliance: As soon as possible, but no later than 2 months from the date of this report, provide evidence that a copy of the procedural safeguards was given to the parent one time in the school year.</p> <p>The NHDOE will verify this through a subsequent on-site review.</p> <p>First Stage Corrective Action regarding the Implementation of the Regulations: Provide training to appropriate personnel for ensuring 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.</p> <p>Provide the dates, names of attendees, and a description of the training, which defines the Crotched Mountain School's procedure for complying with this specific rule, to the NHDOE within 3 months from the date of this report.</p> <p>Second Stage Corrective Action Regarding the Implementation of the Regulations: The Bureau will select 2 new files for updated data demonstrating compliance with this requirement and will verify the evidence through a subsequent on-site review.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.323 Ed 1109		E. Individualized Education Program
Self-Assessment Question Number	Regulatory Component	Review Status
8.	Ed 1109.04(a)	6 out of 6 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.
9.	34 CFR 300.324(b)(1)(i) Ed 1109.03(d)	6 out of 6 IEP files demonstrated evidence that the IEP was reviewed periodically but not less than annually.
10.	34 CFR 300.323(a) Ed 1109.03(1)	6 out of 6 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 Ed 1103.01		F. IEP Team; Participants in the Special Education Process
Self-Assessment Question Number	Regulatory Component	Review Status
11.	34 CFR 300.321(a)(1) Ed 1109.01(a)	5 out of 5 IEP files demonstrated evidence that the IEP Team included the parents of the child.
12.	34 CFR 300.321(a)(2) Ed 1103.01(a)	0 out of 6 IEP files demonstrated evidence that at least one regular education teacher of the child participated in the meeting.
13.	34 CFR 300.321(a)(3) Ed 1103.01(a)	6 out of 6 IEP files demonstrated evidence that at least one special education teacher or special education provider of the child participated in the meeting.
14.	34 CFR 300.321(a)(4) Ed 1103.01(a)	6 out of 6 IEP files demonstrated evidence that the IEP Team included an LEA representative.
15.	1114.05(d)	6 out of 6 IEP files demonstrated evidence that the private provider of special education cooperated with the LEA by making staff available to participate in IEP meetings at mutually agreeable times and places.
16.	Ed 1103.02(a)(b)	5 out of 6 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. 0 out of 1 of those IEP files demonstrated evidence of written consent of the parent(s) that the notice requirements were waived {Ed 1103.02(b)}.

For **student files B, C, E, F, H, & J**, there was no evidence that at least one regular education teacher of the child participated in the meeting. For **student file F**, there was no 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. **0 out of 1** of those IEP files demonstrated evidence of written consent of the parent(s) that the notice requirements were waived {Ed 1103.02(b)}.

First Stage Corrective Action Regarding the Implementation of the Regulations: Provide trainings to appropriate staff for ensuring that the IEP team included at least one regular education teacher of the child and that at least a 10 day notice is given to the parent before an IEP meeting, which includes the purpose, time, location and identification of the participants, and when not possible, that staff follow through with obtaining the written consent of the parent that the notice requirement is waived.

Provide the dates, names of attendees, and a description of the training, which defines the Crotched Mountain School'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 Bureau will select 2 new files for updated data demonstrating compliance with this requirement and will verify the evidence through a subsequent on-site review.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320		G. Individualized Education Program (Present Levels of Academic Achievement and Functional Performance)
Self-Assessment Question Number	Regulatory Component	Review Status
17.	34 CFR 300.324(a)(1)(i)	6 out of 6 IEPs demonstrated evidence that the team considered the strengths of the child.
18.	34 CFR 300.324(a)(1)(iv)	6 out of 6 IEPs demonstrated evidence that the team considered the academic, developmental, and functional needs of the child.
19.	34 CFR 300.324(a)(1)(ii)	6 out of 6 IEPs demonstrated evidence that the concerns of the parents for enhancing the education of their child were considered.
20.	34 CFR 300.324(a)(1)(iii)	6 out of 6 IEPs demonstrated evidence that the results of the initial or most recent evaluation of the child were considered.
21.	34 CFR 300.320(a)(1)(i)	5 out of 6 IEPs 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.
22.	34 CFR 300.320(A)(4)(ii)	6 out of 6 IEPs demonstrated evidence of a statement in the IEP that describes how the student's disability

		affects non-academic areas.
23.	34 CFR 300.320(a)(1)(ii)	For preschool children, 0 out of 0 IEPs demonstrated evidence of a statement in the IEP that describes how the disability affects the child's participation in appropriate activities.
<p>For student file H, there was no 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.</p> <p>First Stage Corrective Action regarding the Individual Instance of Noncompliance: As soon as possible, but no later than 2 months from the date of this report, the Crotched Mountain School, in conjunction with the sending District, must convene the IEP teams to review the IEPs and show evidence of a statement that describes how the child's disability affects the student's involvement and progress in the general education curriculum.</p> <p>The NHDOE will verify this through a subsequent on-site review.</p> <p>First Stage Corrective Action regarding the Implementation of the Regulations: Provide training to appropriate staff to include in student's IEP a statement that describes how the child's disability affects the student's involvement and progress in the general education curriculum.</p> <p>Provide the dates, names of attendees, and a description of the training, which defines the Crotched Mountain School's procedure for complying with this specific rule, to the NHDOE within 3 months from the date of this report.</p> <p>Second Stage Corrective Action Regarding the Implementation of the Regulations: The Bureau will select 2 new files for updated data demonstrating compliance with this requirement and will verify the evidence through a subsequent on-site review.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.324(a)(2)(i) Ed 1109.03(h)		H. Consideration of Special Factors
Self-Assessment Question Number	Regulatory Component	Review Status
24.	34 CFR 300.324(a)(2)(i)	When a child's behavior impedes the child's learning or that of others, 4 out of 4 IEP demonstrated evidence that the team considered the use of positive behavioral interventions and supports, and other strategies, to address that behavior.
25.	34 CFR 300.324(a)(2)(ii)	When a child demonstrates limited English proficiency, 0 out of 0 IEP demonstrated evidence that the team considered the language needs of the

		child as those needs relate to the child's IEP.
26.	34 CFR 300.324(a)(2)(iii) Ed 1109.03(h)	When a child is blind or visually impaired, 0 out of 0 IEPs 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.
27.	34 CFR 300.324(a)(2)(iv) Ed 1109.03(h)	6 out of 6 IEPs demonstrated evidence that the IEP Team considered the communication needs of the child.
28.	34 CFR 300.324(a)(2)(iv) Ed 1109.03(h)	When a child is deaf or hard of hearing, 1 out of 1 IEPs 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.
29.	34 CFR 300.324(a)(2)(v) Ed 1109.03(h)	6 out of 6 IEPs 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)		I. Courses of Study
Self-Assessment Question Number	Regulatory Component	Review Status
30.	Ed 1109.01(a)(10)	For each student with a disability beginning at age 14 or younger, if determined appropriate by the IEP team, 4 out of 5 IEPs 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.
For student file J , there was no 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.

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 this report, the Crotched Mountain School, in conjunction with the sending District, must convene the IEP teams to review the IEPs and show evidence that the IEP includes 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.

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 for each student with a disability beginning at age 14 or younger, if determined appropriate by the team, the IEP includes 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.

Provide the dates, names of attendees, and a description of the training, which defines the Crotched Mountain School'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 select 2 new student files at the Crotched Mountain School for updated data demonstrating compliance with this requirement.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a)(2)(i) Ed 1109.01(a)		J. Measurable Annual Goals; Short-term Objectives or Benchmarks
Self-Assessment Question Number	Regulatory Component	Review Status
31.	34 CFR 300.320(a)(2)(i) Ed 1109.01(a)(1)	3 out of 6 IEPs demonstrated evidence of a statement of measurable annual goals, including academic and functional goals.
32.	34 CFR 300.320(a)(2)(i)(A) Ed 1109.01(a)(1)	6 out of 6 IEPs 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.
33.	34 CFR 300.320(a)(2)(i)(B) Ed 1109.01(a)(1)	If there are other educational needs that result from the child's disability, 5 out of 5 IEPs demonstrated evidence that the measurable annual goals meet each of the child's other educational needs that result from

		the child's disability.
34.	Ed 1109.01(a)(6)	6 out of 6 IEPs 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>Three goals were selected for review for each student file, for a total of 18 goals reviewed. For student files B, H, & I three goals were missing a present level; one goal was missing a condition/situation; three goals were missing how often the goal would be measured; one goal was missing how well the student would perform the goal; two goals were missing how consistently the student would need to perform the goal at the stated level of proficiency; and two goals were missing how the goal would be measured.</p> <p>First Stage Corrective Action regarding the Individual Instances of Noncompliance: As soon as possible, but no later than 2 months of the date of this report, the Crotched Mountain School, 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>First Stage Corrective Action regarding the Implementation of the Regulations: Provide training to appropriate staff to address writing measurable annual goals.</p> <p>Provide the dates, names of attendees, and a description of the training, which defines the Crotched Mountain School's procedure for complying with this specific rule, to the NHDOE within 3 months from the date of this report.</p> <p>Second Stage Corrective Action Regarding the Implementation of the Regulations: The Bureau will select 2 new files for updated data demonstrating compliance with this requirement and will verify the evidence through a subsequent on-site review.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1109.01(a)(8)		K. Review and Revision of IEPs (Measuring Progress)
Self-Assessment Question Number	Regulatory Component	Review Status
35.	Ed 1109.01(a)(8)	6 out of 6 IEPs 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)		L. Responsibilities of Private Providers of Special Education or other Non-LEA Programs in the Implementation of IEPs
Self-Assessment Question Number	Regulatory Component	Review Status
36.	Ed 1114.06(a); Ed 1109.05	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, 2 out of 2 files demonstrated evidence that the private provider contacted the sending school district.
37.	Ed 1114.06(g)	6 out of 6 files demonstrated evidence that the private provider of special education has maintained progress information for each child with a disability on an ongoing basis in accordance with 34 CFR 300.600(b)(1).
38.	Ed 1114.06(h)	6 out of 6 files demonstrated evidence that a mid-year review and annual evaluation of the child's progress relative to the written IEP was conducted by the sending LEA and the private provider.
39.	Ed 1114.06(j)	6 out of 6 files demonstrated evidence that a minimum of 3 comprehensive reports per year are completed on each child with a disability enrolled in the program.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.323(d)(2)(ii) Ed 1109.03(a); Ed 1109.03(v); Ed 1102.01(b)		M. Accessibility of Child's IEP to Teachers and Others (General Accommodations and General Modifications)
Self-Assessment Question Number	Regulatory Component	Review Status
40.	34 CFR 300.323(d)(2)(ii) Ed 1109.03(a)	6 out of 6 IEPs demonstrated evidence that each teacher and provider has been informed of the specific accommodations, modifications, and supports that must be provided for the child in accordance with the IEP.

41.	Ed 1102.01(b)	If accommodations are included, 5 out of 6 IEPs demonstrated evidence that the accommodations are changes in instruction or evaluation determined necessary by the IEP team that do not impact the rigor and/or validity of the subject matter being taught or assessed.
42.	Ed 1102.03(v)	If modifications are included, 0 out of 6 IEPs demonstrated evidence that the modifications are changes in instruction or evaluation determined necessary by the IEP team that impacts the rigor and validity or rigor or validity, of the subject matter being taught or assessed.

For **student file E**, there was no evidence that the accommodations are changes in instruction or evaluation determined necessary by the IEP team that do not impact the rigor and/or validity of the subject matter being taught or assessed. For **student files B, C, E, F, H, & J**, there was no evidence that the modifications are changes in instruction or evaluation determined necessary by the IEP team that impacts the rigor and validity or rigor or validity, of the subject matter being taught or assessed.

First Stage Corrective Action regarding the Individual Instances of Noncompliance:

As soon as possible, but no later than 2 months from the date of this report, the Crotched Mountain School, in conjunction with the sending District, must convene the IEP teams to review the IEPs and show evidence that, if accommodations are included, they are changes in instruction or evaluation determined necessary by the IEP team that **do not impact** the rigor and/or validity of the subject matter being taught or assessed, and if modifications are included, they are changes in instruction or evaluation determined necessary by the IEP team **that impacts** the rigor and validity or rigor or validity, 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 trainings 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 and/or validity of the subject matter being taught or assessed and that the modifications are changes in instruction or evaluation determined necessary by the IEP team **that impacts** the rigor and validity, or, rigor or validity of the subject matter being taught or assessed.

Provide the dates, names of attendees, and a description of the trainings, which defines the Crotched Mountain School'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 select 3 new student files for updated data demonstrating compliance with this requirement.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a) Ed 1109.01(a)(1); 1109.04(b)		N. Definition of Individualized Education Program (Special Education and Related Services, Supplementary Aids and Services, and Program Modifications or Supports for School Personnel)
Self-Assessment Question Number	Regulatory Component	Review Status
43(a).	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	6 out of 6 IEPs demonstrated evidence of a statement of special education.
43(b).	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	6 out of 6 IEPs demonstrated evidence of a statement of related services.
43(c).	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	2 out of 2 IEPs demonstrated evidence of a statement of supplementary aids and services.
43(d).	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	2 out of 2 IEPs demonstrated evidence of a statement of the program modifications.
43(e).	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	2 out of 2 IEPs demonstrated evidence of a statement of the supports for school personnel.
44.	34 CFR 300.320(a)(7) Ed 1109.01(a)(1)	6 out of 6 IEPs demonstrated evidence of a projected date for the beginning of the services and modifications described in the supports and services section of the IEP.
45.	34 CFR 300.320(a)(7) Ed 1109.01(a)(1)	6 out of 6 IEPs demonstrated evidence of the anticipated frequency, location, and duration of those services and modifications described in the supports and services section of the IEP.
46.	Ed 1109.04(b)(1)	6 out of 6 IEP files demonstrated written evidence documenting implementation of the IEP with regards to all special education services provided.
47.	Ed 1109.04(b)(1)	6 out of 6 IEP files demonstrated written evidence documenting implementation of the IEP with regards to all related services provided.
48.	Ed 1109.04(b)(2)	2 out of 2 IEP files demonstrated written evidence documenting implementation of the IEP with regards to any supplementary aids and services provided.

49.	Ed 1109.04(b)(3)	2 out of 2 IEP files demonstrated written evidence documenting implementation of the IEP with regards to program modifications
50.	Ed 1109.04(b)(3)	2 out of 2 demonstrated written evidence documenting implementation of the IEP with regards to supports for school personnel.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a)(5) Ed 1109.01(a)(1)		O. Definition of Individualized Education Program (Justification for Non-Participation)
Self-Assessment Question Number	Regulatory Component	Review Status
51.	34CFR 300.320(a)(5) Ed 1109.01(a)(1)	2 out of 6 IEPs 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.
<p>For student files B, C, E, & H, there was no evidence 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.</p> <p>First Stage Corrective Action regarding the Individual Instances of Noncompliance: As soon as possible, but no later than 2 months of the date of this report, the Crotched Mountain School, in conjunction with the sending District, must amend the IEPs to include the explanation of the extent, if any, to which the child did not participate with nondisabled children in the regular class and in the activities described in the supports and services section of the IEP.</p> <p>The NHDOE will verify this through a subsequent on-site review.</p> <p>First Stage Corrective Action regarding the Implementation of the Regulations: Provide training to appropriate staff to address the 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.</p> <p>Provide the dates, names of attendees, and a description of the training, which defines the Crotched Mountain School's procedure for complying with this specific rule, to the NHDOE within 3 months from the date of this report.</p> <p>Second Stage Corrective Action Regarding the Implementation of the Regulations: The Bureau will select 4 new student files for updated data demonstrating compliance with this requirement and will verify that this procedure has been developed through a follow up on-site review.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a)(6) Ed 1109.01(a)(1)		P. Definition of Individualized Education Program (State and District Wide Assessments)
Self-Assessment Question Number	Regulatory Component	Review Status
52.	34 CFR 300.320(a)(6)(i) Ed 1109.01(a)(1) RSA 193-C; Ed 1114.05(k)	2 out of 2 IEPs 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.
53.	34 CFR 300.320(a)(6)(ii)(A) Ed 1109.01(a)(1) RSA 193-C; 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, 3 out of 4 IEPs demonstrated evidence of a statement of why the child cannot participate in the regular assessment.
54.	34 CFR 300.320(a)(6)(ii)(B) Ed 1109.01(a)(1) RSA 193-C; Ed 1114.05(k)	When the child is taking an alternate assessment, 3 out of 4 IEPs demonstrated evidence describing why the particular alternate assessment selected is appropriate for the child.
<p>For student file E, there was no evidence of a statement of why the child cannot participate in the regular assessment when the IEP Team determined that the child must take an alternate assessment instead of a particular regular State or district wide assessment of student achievement. For student file E, there was no evidence describing why the particular alternate assessment selected is appropriate for the child.</p> <p>First Stage Corrective Action regarding the Individual Instances of Noncompliance: As soon as possible, but no later than 2 months from the date of the report, the Crotched Mountain School, in conjunction with the District, must convene the IEP Team to amend the IEP to include a statement of why the child cannot participate in the regular assessment when the IEP Team determined that the child must take an alternate assessment instead of a particular regular State or district wide assessment of student achievement and a description of why the particular alternate assessment selected is appropriate for the child.</p> <p>The NHDOE will verify this through a subsequent on-site review.</p> <p>First Stage Corrective Action regarding the Implementation of the Regulations: Provide trainings to appropriate personnel for ensuring that the IEP includes a statement of why the child cannot participate in the regular assessment when the IEP Team determined that the child must take an alternate assessment instead of a particular regular State or district wide assessment of student achievement and a description of why the particular alternate assessment selected is appropriate for the child.</p>		

Provide the dates, names of attendees, and a description of the trainings, which defines the Crotched Mountain School'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 Bureau will select 2 new student files for updated data demonstrating compliance with this requirement and will verify the evidence through a subsequent on-site review.