

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

**Enriched Learning Center
Summary Report
2017-2018**

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**Monitoring Visit Conducted on March 7, 2018
Report Date: April 27, 2018**

Overview of the Enriched Learning Center Program

The Enriched Learning Center, located at 26 Exchange Street, Berlin, NH is a New Hampshire Department of Education, Bureau of Special Education Approved Program. The program is approved for grades 1 through 12 for up to 20 students (both in state and out of state students). Students enrolled in this program have primary disabilities in the areas of Autism, Emotional Disturbance, Multiple Disabilities, Other Health Impairments, Specific Learning Disability, and Speech-Language Impairments. The Enriched Learning Center offers a regular High School Diploma and also provides the option for students to receive their “home” high school diploma through collaboration with the sending school district when students prefer this option. The Enriched Learning Center, Summer Program is approved for up to twelve students with disabilities in grades 1-12.

The Enriched Learning Center’s mission is “to foster social, emotional and educational development in students by engaging each individual’s strengths and interests in order to prepare students for graduation, transition back to the public school or the community.” It provides a safe, non-punitive environment where students receive a balanced education that focuses equally on academic, vocational and social skills.

The Enriched Learning Center’s guiding principles and beliefs are grounded in focusing treatment and educational programming is based on the cognitive, behavioral, physical and social-emotional needs of the students. Its core beliefs focus on ensuring programming that promotes a sense of community, individual responsibility, and individual achievement. The Enriched Learning Center places an emphasis on facilitating family involvement and employing a variety of evidence-based strategies, including Applied Behavioral Analysis, Cognitive Behavioral Therapy, Motivational Interviewing and Motivational Enhancement Theory, Reality Therapy and Choice Theory. The program’s behavior management emphasizes positive behavior supports, crisis management and problem-solving. At the Enriched Learning Center, each student is viewed as an individual and is allowed to use their strengths to access the available educational opportunities. An emphasis is placed on preparing students to develop and achieve post-secondary transitional goals and plans.

The primary purpose of The Enriched Learning Center is to provide a comprehensive array of programming for both boys and girls who are diagnosed with developmental, social, and emotional disabilities. Services include: behavioral interventions, education, vocational preparation, recreation, community services, case management and specialized treatment services, including individual and group counseling.

The leadership team at the Enriched Learning Center consists of the School Director and the Special Education Administrator.

The Enriched Learning Center staff work collaboratively with the program’s behavior consultant and with one another to provide a positive learning environment in which social expectations are consistently modeled and reinforced, as evidenced during the monitoring on-site review.

Noteworthy Practices and Areas in Need of Refinement

Noteworthy Practices

During the monitoring visit, it was revealed that the Enriched Learning Center includes several practices in their teaching, lessons, and expectations which are noteworthy. Such practices include:

- The program sets expectations for family involvement in the students' education which includes weekly correspondence, consultation regarding behavioral intervention, education, behavior and crisis intervention, informing families of program substance misuse policies so that they can encourage students to follow them and promotion of a family commitment to ensuring students' emotional health, educational success and successful transition to independent living.
- Promotion of overall student wellness is embedded in the program as evidenced by acceptable food guidelines, substance abuse/prevention programs and general behavioral guidelines for socially acceptable behavior which are detailed in the student handbook, inclusion of social emotional learning and mindfulness through the "Every Day Social Emotional Learning" curriculum in all classrooms, the recognition of the need for physical activity to be built into the daily schedule through sensory breaks and through daily "active" classes including yoga, breathing techniques and movement, and weekly adventure trips for students who have exhibited good behavior and academic performance during the week.
- The program has cultivated positive relationships within the community and has engaged students in collaboration with a local cycling club which provides bikes for students, teaches basic bike mechanics and includes students in trail maintenance. Additionally, students participate in regular food drives in conjunction with the Salvation Army that benefits the community.
- Transition, including those from Enriched Learning Center back to the sending school district and from school to post-secondary school and work settings, is a priority as evidenced by the collaborative relationship with school districts, vocational rehabilitation and approved Department of Labor work sites.
- Classrooms are supportive and structured to not only address student academic needs, but also to teach social, behavioral and emotional strategies. Teachers promote, model and expect adherence to acceptable social interaction and behavior and display behavioral expectations such as the "Pause, Own It and Practice" charts which enable students to process and monitor their responses to various situations that arise in the moment on a regular basis in class and in life.

- The overall learning environment presents as safe, respectful, friendly, positive and productive. A mutual respect is evident between students and staff as is a sense of pride in both individual and group accomplishments.
- The “Respect, Support and Participation” positive behavior system, which was developed with student input, uses a list of individual behaviors that students need to exhibit in order to be considered respectful, supportive and fully participatory in their daily school experience. Students are able to earn points for each positive behavior exhibited at the end of each class period. This is evaluated by both staff and student self-evaluation. This approach encourages self-regulation and self-determination.

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 significant enough to be addressed.

During the Enriched Learning Center’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 identified in the summary report.

The New Hampshire Department of Education, Bureau of Special Education review members for this monitoring review included Helene Anzalone and Lori Noordergraaf.

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 the Enriched Learning Center’s special education procedures the monitoring team determined there were **2 findings of noncompliance**.

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
1. Ed 1114.18(f)	Health and Medical Care
Finding of Noncompliance: In reviewing Enriched Learning Center’s special education procedures the monitoring team was unable to find a procedure that the program shall use to immediately notify the local law enforcement agency in the case of an accident injuring a child.	
Corrective Action Regarding the Implementation of the Regulations: Enriched Learning Center must revise its special education procedures to reflect the procedure that the program shall use to immediately notify the local law enforcement agency in the case of an accident injuring a child. Provide the revised procedures and the method the provider used to inform staff of the revision to the NHDOE within 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
2. Ed 1114.18(g)	Health and Medical Care
Finding of Noncompliance: In reviewing Enriched Learning Center’s special education procedures, the monitoring team was unable to find a procedure that the program shall use to immediately notify the local law enforcement agency in the case of the death of a child.	

Corrective Action regarding the Implementation of the Regulations: Enriched Learning Center must revise its special education procedures to reflect the procedure that the program shall use to immediately notify the local law enforcement agency in the case of the death of a child. Provide the revised procedures and the method the provider used to inform staff of the revision to the NHDOE within 6 months from the date of this report.

Private Provider Curriculum and Effective Implementation

As part of the review, the monitoring team looked for evidence that the Enriched Learning Center is providing students with access to the general curriculum. Curriculum at the Enriched Learning Center is tied to New Hampshire state curriculum standards and mirrors the coursework expectations of the Berlin School District and other sending school districts, and is therefore compliant in ensuring access to the 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 Enriched Learning Center's curriculum, the monitoring team determined that there were **no findings of noncompliance**.

Personnel

The Bureau of Special Education has reviewed the Enriched Learning Center's 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 Enriched Learning Center 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 Enriched Learning Center's personnel certifications, the monitoring team determined there were **8 findings of noncompliance** in one area.

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 Enriched Learning Center did not provide evidence that they have certified teachers or consultants in the following content areas, resulting in 8 findings of noncompliance:</p> <ul style="list-style-type: none"> • Information & Communication Technology, • Library Media Specialist, • Music, • Life Science(HS), • Physical Science (HS), • Technology Education, • World Languages and • Business Education 	
<p>Corrective Action regarding the Implementation of the Regulations: Enriched Learning Center must hire or contract with teachers that currently hold appropriate credentials in each area listed above.</p> <p>Provide the full legal names as they appear on their credentials and endorsements of each certified staff or consultant for each of the content areas above to the NHDOE as soon as possible but no later than 6 months from the date of this report.</p>	

Enriched Learning Center was notified of the concerns listed above during the compliance visit on March 7, 2018.

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 within stated 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 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.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1114.03		A. Governance
Self-Assessment Question Number & Regulatory Component		Review Status
1.	Ed 1114.03(a)	0 out of 0 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
Self-Assessment Question Number & Regulatory Component		Review Status
2.	34 CFR 300.614 Ed 1119.01(a)	2 out of 2 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; Ed 1109		C. Individualized Education Program
Self-Assessment Question Number & Regulatory Component		Review Status
3.	Ed 1109.04(a)	0 out of 2 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. For student codes A & B there was insufficient evidence demonstrating compliance with this requirement.
4.	34 CFR 300.324(b)(1)(i); Ed 1109.03(d)	2 out of 2 IEP files demonstrated evidence that the IEP was reviewed at least annually.
5.	34 CFR 300.323(a); Ed 1109.03(d)	2 out of 2 IEP files demonstrated evidence that the IEP was in place at the beginning of the school year.
<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 private provider must show evidence that a copy of the IEP has been provided to each teacher and service provider listed as having responsibilities for implementing 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 ensure that copies of IEPs are provided to each teacher and service provider listed as having responsibilities for implementing the IEP.</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>Second Stage Corrective Action Regarding the Implementation of the Regulations: The NHDOE will review 2 new student files at Enriched Learning Center for updated data demonstrating compliance with this requirement.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.321; Ed 1103.01		D. IEP Team; Participants in the Special Education Process
Self-Assessment Question Number & Regulatory Component		Review Status
6.	34 CFR 300.321(a)(1); Ed 1103.01(a)	2 out of 2 IEP files demonstrated evidence that the IEP Team included the parents of the child or adult student.
7.	34 CFR 300.321(a)(2); Ed 1103.01(a)	2 out of 2 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.

8.	34 CFR 300.321(a)(3); Ed 1103.01(a)	2 out of 2 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); Ed 1103.01(a)	2 out of 2 IEP files demonstrated evidence that the IEP Team included an LEA representative.
10.	Ed 1103.01(d)	0 out of 0 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)	2 out of 2 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)].

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320		E. Individualized Education Program (Present Levels of Academic Achievement and Functional Performance)
Self-Assessment Question Number & Regulatory Component	Review Status	
12.	34 CFR 300.324(a)(1)(i)	2 out of 2 IEP files demonstrated evidence that the team considered the strengths of the child.
13.	34 CFR 300.324(a)(1)(iv)	2 out of 2 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)	2 out of 2 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)	2 out of 2 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)	2 out of 2 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)	2 out of 2 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, 0 out of 0 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) 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); Ed 1109.03(h)	When a child's behavior impedes the child's learning or that of others, 2 out of 2 IEP files demonstrated evidence that the team considered the use of positive behavioral interventions and supports, and other strategies, to address that behavior.
20.	34 CFR 300.324(a)(2)(ii); Ed 1109.03(h)	When a child demonstrates limited English proficiency, 0 out of 0 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); Ed 1109.03(h)	When a child is blind or visually impaired, 0 out of 0 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>(No child was blind or visually impaired of the files reviewed.)</i>
22.	34 CFR 300.324(a)(2)(iv); Ed 1109.03(h)	2 out of 2 IEP files demonstrated evidence that the IEP Team considered the communication needs of the child.
23.	34 CFR 300.324(a)(2)(iv); Ed 1109.03(h)	When a child is deaf or hard of hearing, 0 out of 0 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>(No child was deaf or hard of hearing of the files reviewed.)</i>
24.	34 CFR 300.324(a)(2)(v); Ed 1109.03(h)	2 out of 2 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, 0 out of 1 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> For student code A 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 this report, the private provider must convene the IEP teams to review the IEPs and provide evidence that for each student with a disability beginning at age 14 or younger, if determined appropriate by the IEP 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.

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 IEP 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 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 3 new student files at Enriched Learning Center for updated data demonstrating compliance with this requirement.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a)(2)(i) Ed 1109.01(a)		H. Measurable Annual Goals; Short-term Objectives or Benchmarks
Self-Assessment Question Number & Regulatory Component		Review Status
26.	34 CFR 300.320(a)(2)(i); Ed 1109.01(a)(1)	0 out of 2 IEP files demonstrated evidence of a statement of measurable annual goals, including academic and functional goals. For student codes A & B there was insufficient evidence demonstrating compliance with this requirement.
27.	34 CFR 300.320(a)(2)(i)(A); Ed 1109.01(a)(1)	2 out of 2 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); Ed 1109.01(a)(1)	If there are other educational needs that result from the child's disability, 2 out of 2 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.
29.	Ed 1109.01(a)(6)	2 out of 2 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.

First Stage Corrective Action of Student Specific Instance(s) of Noncompliance: As soon as possible, but no later than 2 months of the date of this report, the private provider must amend the IEPs to include measurable annual goals.

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 address writing measurable annual goals.

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 Enriched Learning Center for updated data demonstrating compliance with this requirement.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1109.01(a)(8)		I. Review and Revision of IEPs (Measuring Progress)
Self-Assessment Question Number & Regulatory Component		Review Status
30.	Ed 1109.01(a)(8)	2 out of 2 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
Self-Assessment Question Number & Regulatory Component		Review Status
31.	34 CFR 300.325(b); Ed 1109.05; 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, 1 out of 1 IEP files demonstrated evidence that the private provider contacted the sending school district. <i>(One student file had no changes in the child's identification, evaluation, development or revision of the IEP or placement)</i>
32.	Ed 1114.06(i), (j), (k)	0 out of 2 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. For student codes A & B there was insufficient evidence demonstrating compliance with this requirement.
First Stage Corrective Action Regarding the Implementation of the Regulations: Provide training to appropriate staff to ensure that a minimum of 3 comprehensive reports per year are completed on each child with a disability enrolled in the program. 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 Enriched Learning Center for updated data demonstrating compliance with this requirement.		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.323(d)(2)(ii) Ed 1109.03(a); Ed 1109.03(v); Ed 1102.01(b)		K. Accessibility of Child's IEP to Teachers and Others (General Accommodations and General Modifications)
Self-Assessment Question Number & Regulatory Component		Review Status
33.	Ed 1102.01(b)	If accommodations are included, 2 out of 2 IEP files demonstrated evidence that the 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.

34.	Ed 1102.03(v)	If modifications are included, 0 out of 0 IEP files demonstrated evidence that the 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. <i>(Two student files were students with no modifications.)</i>
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COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a) 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)
Self-Assessment Question Number & Regulatory Component		Review Status
35.	34 CFR 300.320(a)(4); Ed 1109.01(a)(1)	2 out of 2 IEP files demonstrated evidence of a statement of special education.
36.	Ed 1109.04(b)(1)	0 out of 2 IEP files demonstrated written evidence documenting implementation of the IEP with regards to all special education services provided. For student codes A & B there was insufficient evidence demonstrating compliance with this requirement.
37.	34 CFR 300.320(a)(4); Ed 1109.01(a)(1)	1 out of 1 IEP files demonstrated evidence of a statement of related services. <i>(One student file was a student for whom there was no evidence that the IEP team determined this is necessary.)</i>
38.	Ed 1109.04(b)(1)	1 out of 1 IEP files demonstrated written evidence documenting implementation of the IEP with regards to all related services provided. <i>(One student file was a student for whom there were no related services in the IEP.)</i>
39.	34 CFR 300.320(a)(4); Ed 1109.01(a)(1)	0 out of 0 IEP files demonstrated evidence of a statement of supplementary aids and services. <i>(Two student files were students for whom there was no evidence that the IEP team determined this is necessary.)</i>
40.	Ed 1109.04(b)(2)	0 out of 0 IEP files demonstrated written evidence documenting implementation of the IEP with regards to any supplementary aids and services provided. <i>(Two student files were students for whom there were no supplementary aids and services in the IEP.)</i>
41.	34 CFR 300.320(a)(4); Ed 1109.01(a)(1)	1 out of 1 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)	0 out of 1 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> For student code A there was insufficient evidence demonstrating compliance with this requirement.
43.	34 CFR 300.320(a)(7); Ed 1109.01(a)(1)	2 out of 2 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); Ed 1109.01(a)(1)	2 out of 2 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.

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 private provider will provide documentation for evidence of the implementation of special education services provided, and supports provided for school personnel.

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 for ensuring that there is written evidence documenting implementation of the IEP with regards to all special education services provided, and supports provided for school personnel implementing the IEP.

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 Enriched Learning Center for updated data demonstrating compliance with this requirement.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a)(5) Ed 1109.01(a)(1)		M. Definition of Individualized Education Program (Justification for Non-Participation)
Self-Assessment Question Number & Regulatory Component		Review Status
45.	34CFR 300.320(a)(5); Ed 1109.01(a)(1)	2 out of 2 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) Ed 1109.01(a)(1)		N. Definition of Individualized Education Program (State and District Wide Assessments)
Self-Assessment Question Number & Regulatory Component		Review Status
46.	34 CFR 300.320(a)(6)(i); Ed 1109.01(a)(1); RSA 193-C; Ed 1114.05(k)	2 out of 2 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.
47.	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, 0 out of 0 IEP files demonstrated evidence of a statement of why the child cannot participate in the regular assessment. <i>(Two student files were of students not taking an alternate assessment.)</i>
48.	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, 0 out of 0 IEP files demonstrated evidence describing why the particular alternate assessment selected is appropriate for the child. <i>(Two student files were of students not taking an alternate assessment.)</i>