

**New Hampshire  
Department of Education  
Bureau of Student Support**

**SPECIAL EDUCATION COMPLIANCE &  
IMPROVEMENT MONITORING REVIEW  
REPORT**

**Epsom School District  
2018-2019**

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Compliance & Improvement Monitoring Visit  
Conducted on November 1, 2018  
**Report Date: February 5, 2019**

## **Overview of the Special Education Compliance & Improvement Monitoring Process**

New Hampshire has a responsibility, under federal law, to have a system of general supervision that monitors the implementation of the Individuals with Disabilities Education Act (IDEA) by school districts. The general supervision system is accountable for enforcing IDEA, New Hampshire Statutes, and the New Hampshire Standards for the Education of Children with Disabilities (NH Standards) and for ensuring continuous improvement. As stated in section 616 of 2004 amendments to the IDEA, "The primary focus of Federal and State monitoring activities described in paragraph (1) shall be on -

- (A) Improving educational results and functional outcomes for all children with disabilities; and
- (B) Ensuring that States meet the program requirements under this part, with a particular emphasis on those requirements that are most closely related to improving educational results for children with disabilities."

There are eight components that comprise New Hampshire's (NH) general supervision system. It is important to note that although the components are separate, the components connect, interact and articulate requirements to form a comprehensive system. The general supervision system for NH has the following components:

- State Performance Plan (SPP)
- Policies, Procedures, and Effective Implementation
- Data on Processes and Results
- Targeted Technical Assistance and Professional Development
- Effective Dispute Resolution
- Integrated Monitoring Activities
- Improvement, Correction, Incentives and Sanctions
- Fiscal Management

The Special Education Compliance & Improvement Monitoring review is one method that the New Hampshire Department of Education (NHDOE), Bureau of Student Support (Bureau) utilizes to implement the general supervision system. The Special Education Compliance & Monitoring review is comprised of:

- Special Education Procedures and Effective Implementation
- District Special Education Forms and Effective Implementation
- Special Education Personnel
- Program Visits
- Identification of Recommended Preventive Actions
- Monitoring of Special Education Process
- Improvement, Correction, Assistance, and Enforcement

The intent of the Compliance & Improvement Monitoring review is to improve student outcomes for students with IEPs by:

- Ensuring districts understand and are implementing special education requirements in accordance with the New Hampshire Standards for the Education of Children

with Disabilities, New Hampshire State Statutes, and the Individuals with Disabilities Act (IDEA); and

- Improving special education procedures, and practices.
- Identifying and supporting correction of noncompliance, consistent with Office of Special Education Programs (OSEP) Memo 09-02.

The Bureau followed a standard process to select districts to participate in the Special Education Compliance & Improvement Monitoring review. Each district was sorted into one of six cohort groups based on size using the current October 1<sup>st</sup> fall enrollment. The Bureau utilized a multi-data approach which aligns with the OSEP differentiated monitoring approach to determine the district in each cohort group with the highest need based on the District Determinations; the State Performance Plan (SPP) Indicators: (4B) Suspension/Expulsion, (5A) Education Environments, (6A) Preschool Environments, (11) Child Find, and (12) Early Childhood Transition; and state special education complaints.

Once a district was selected, the Bureau contacted the district to discuss the Special Education Compliance & Improvement Monitoring review with the school administration. The Epsom School District was selected through this process. The Epsom School District is comprised of one school: the Epsom Central School with a grade span of K-8. The Epsom School District is also responsible for students in preschool who attend the SAU TLC Preschool. Additionally, Epsom is responsible for students in grades 9 through 12 who attend Pembroke Academy. The NHDOE reviewed files for Epsom students in Kindergarten through 8<sup>th</sup> grade at The Epsom Central School, for Epsom preschool students at the SAU 53 TLC Preschool program located at the Pembroke Hill School and for Epsom students in grades 9 through 12 at Pembroke Academy.

The Bureau also provided targeted professional development regarding the Special Education Compliance & Improvement Monitoring review process and completion of the self-assessment data collection form. The district was provided with a list of 16 students with disabilities representative of the schools based on grade level, disability, gender, special education program, and case manager. At the time of the selection of students, the information entered into the New Hampshire Special Education Information System (NHSEIS) indicated that there was one student enrolled in charter schools. During the onsite visit, the monitoring team selected a total of 10 of the 16 student files to review.

The monitoring visit conducted on November 1, 2018 consisted of NHDOE team members and one visiting special education administrator verifying district-identified evidence on the self-assessment data collection form. While the district completed the entire self-assessment, 5 out of the 10 files reviewed covered Parts 1 & 3 (encompassing questions 1-2 and 31-64) and the remaining 5 files that were reviewed covered Parts 2 & 4 (encompassing questions 3-30 and 65-70).

The district fall enrollment for October 1, 2017 showed that there was a total of 430 students enrolled in the Epsom School District which had a grade span of Kindergarten through 12<sup>th</sup> grade. The district data profiles for October 1, 2017 indicated that there were 92 students in the Epsom School District who were identified with disabilities.

The district was encouraged to invite their special education staff as well as related service providers and regular education staff, if appropriate, to attend the review. For the staff who attended the review, this provided another targeted professional development opportunity. Staff members were provided the opportunity to learn about implementing IDEA, New Hampshire Statutes, and the New Hampshire Standards for the Education of Children with Disabilities and to engage in a professional discussion of best practices for ensuring improved outcomes for students with disabilities.

The NHDOE review members for this Compliance & Improvement Monitoring review included: Amy Jenks and Rebecca Fredette. The special education administrator participating in this Compliance & Improvement Monitoring review was Kathryn Duncan, Director of Student Services in the Candia School District.

### **Special Education Procedures and Effective Implementation**

Each district must have special education procedures and effective implementation of practices that are aligned and support the implementation of IDEA, New Hampshire Statutes, and the New Hampshire Standards for the Education of Children with Disabilities. As part of the special education Compliance & Improvement Monitoring review, the NHDOE reviewed the district's special education procedures plan for compliance.

The NHDOE reviewed the district's special education procedures plan for the following components.

- Procedures based on the current New Hampshire Standards for the Education of Children with Disabilities pursuant to Ed 1101.01
- Procedures for handling confidential information pursuant to Ed 1126.02(b)(3)(a):
  - Confidentiality Requirements pursuant to Ed 1119.01
- Due process guarantees pursuant to Ed 1126.02(b)(3)(b):
  - Referral and Disposition of Referral pursuant to Ed 1106.01 Process; Provision of FAPE
  - Procedural Safeguards pursuant to Ed 1120.05(c) Parent Refusal of Consent; Initiation of Due Process Hearings by LEA
  - Administrative Due Process Hearing Procedure pursuant to:
    - Ed 1123.02(a) Sequence of an Administrative Due Process Hearing
    - Ed 1123.03(a) Filing a Due Process Hearing Complaint
- Least restrictive environment processes pursuant to Ed 1126.02(b)(3)(c):
  - Placement of Children with Disabilities pursuant to:
    - Ed 1111.01 Placement in the Least Restrictive Environment
    - Ed 1111.02 Continuum of Alternative Educational Environments
    - Ed 1111.03 Placement Decisions
    - Ed 1111.04 Home Instruction of School-Age Children with Disabilities
- Child find activities pursuant to Ed 1126.02(b)(3)(d):
  - Child Find pursuant to:
    - Ed 1105.01(b) Responsibilities of the Local Education Agency

- Ed 1105.02 LEA Child Find Program
- Ed 1105.03 Child Find For Children Placed in Homes for Children, Health Care Facilities, or State Institutions
- Ed 1105.04 Child Find for Children Currently Receiving Family Centered Early Supports and Services
- Non-discriminatory testing practices pursuant to Ed 1126.02(b)(3)(e):
  - Evaluation Procedures pursuant to 34 CFR 300.304 (c)(1)(i), (ii) Other evaluation procedures
- IEPs pursuant to Ed 1126.02(b)(3)(f):
  - The Individualized Education Program pursuant to Ed 1109.06(a) Monitoring and Annual Review of IEPs

Based on the review of the Epsom School District’s special education procedures plan, the NHDOE determined there were **3 findings of noncompliance** that must be corrected as soon as possible but no later than six months from the date of this report.

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
1. Ed 1119.01	Confidentiality Requirements
<p><b>Finding of Noncompliance:</b> When the monitoring team was verifying the evidence of compliance, the special education procedures plan described the district’s policy for complying with the state adopted special education policy under “Procedures for Handling Confidential Information” regarding special education retention of records. Although some components of the record retention policy had been updated the district policy is unclear. The district is responsible for ensuring that the policies and procedures are current with recent changes in IDEA, NH Statutes, and NH Standards.</p>	
<p><b>Corrective Action Regarding the Implementation of the Regulations:</b> The Epsom School District must revise its special education procedures plan to clearly reflect the districts procedures for retention and destruction of records as well as how school staff was informed of the new practice within 6 months of the date of this report.</p>	
<p>Provide the revised Epsom School District Special Education Procedures to the NHDOE for subsequent review for verification of compliance, as well as the evidence of how school staff was informed of the new practice to the NHDOE as soon as possible but no later than 6 months from the date of this report.</p>	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
2. Ed 1106	Referral and Disposition of Referral
<p><b>Finding of Noncompliance:</b> When the monitoring team was verifying the evidence of compliance, the special education procedures plan you did not list who referrals are provided to if a student is not attending the traditional public school per Ed 1106. The district is responsible for ensuring that the policies and procedures are current with recent changes in IDEA, NH Statutes, and NH Standards.</p>	
<p><b>Corrective Action Regarding the Implementation of the Regulations:</b> The Epsom School District must revise its special education procedures plan to reflect who individuals would submit a referral to if the child does not attend the traditional public school, as well as how school staff is informed of the new practice within 6 months of the date of this report.</p>	
<p>Provide the revised Epsom School District Special Education Procedures Plan to the NHDOE for subsequent review for verification of compliance, as well as the evidence of how school staff was informed of the new practice to the NHDOE as soon as possible but no later than 6 months from the date of this report.</p>	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
3. 34 CFR 300.304	Evaluation Procedures
<p><b>Finding of Noncompliance:</b> When the monitoring team was verifying the evidence of compliance, the special education procedures plan the district did not indicate that their assessments and other evaluation materials are selected and administered so as not to be discriminatory on a racial or cultural basis as required by Ed 1107, 34 CFR 300.304 (c)(i) &amp; (ii). The district is responsible for ensuring that the policies and procedures are current with recent changes in IDEA, NH Statutes, and NH Standards.</p>	
<p><b>Corrective Action Regarding the Implementation of the Regulations:</b> The Epsom School District must revise its special education procedures plan to reflect that your assessments and evaluation materials are selected and administered so as not to be discriminatory on a racial or cultural basis, as well as how school staff was informed of the new practice within 6 months of the date of this report.</p>	
<p>Provide the revised Epsom School District Special Education Procedures Plan to the NHDOE for subsequent review for verification of compliance, as well as the evidence of how school staff is informed of the new practice to the NHDOE as soon as possible but no later than 6 months from the date of this report.</p>	

## District Special Education Forms and Effective Implementation

As part of the review of The Epsom School District’s forms implementing the special education process, the NHDOE also looked for evidence that the policies and procedures were effectively being implemented. The NHDOE reviewed the following district forms to ensure the implementation of the special education process:

- Record of Access pursuant to 34 CFR 300.614; Ed 1119.01(a)
- Notice of Special Education Meeting pursuant to 34 CFR 300.322; Ed 1103.02
- Parental Permission to Waive Time Limits for Written Notice pursuant to Ed 1103.02(d)
- Written Prior Notice pursuant to 34 CFR 300.503; Ed 1120.03
- Specific Learning Disability Eligibility Determination Documentation pursuant to 34 CFR 300.311; Ed 1107.02
- Evaluation Report pursuant to Ed 1107.05(a),(b)
- Procedural Safeguard Notice pursuant to 34 CFR 300.504; Ed 1120
- Age of Majority pursuant to 34 CFR 300.320(c) and 34 CFR 300.520; Ed 1120.01(b)
- Annual Notification when Proposing Accessing Public and Private Insurance pursuant to 34 CFR 300.154(d)(2)(v); Ed 1120.08(a)

Based on the review of the Epsom School District’s special education forms, the NHDOE determined that there were **no findings of noncompliance**.

## Special Education Personnel

The NHDOE reviewed the Epsom School District special education staff certifications using the New Hampshire Educator Information System. The review process was for special education staff employed during 2018-2019 school year.

The data for Epsom School District was generated on October 15, 2018. Each special education staff member’s endorsement was compared to the subject/assignment. This

process was used for special educators who hold Education Intern License 4 (INT4), 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 district 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 1113.12, 34 CFR 300.18, and 34 CFR 300.156.

Based on the review of the special education staff certifications, the NHDOE determined there were **no findings of noncompliance**.

### **Program Visits**

The purpose of the program visits has been to observe the district's full range of opportunities for the child with a disability that cannot be met in a regular education setting. Per Ed 1111, districts shall ensure that children with disabilities are educated with children who do not have disabilities to the maximum extent appropriate and that removal from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. School districts shall comply with the requirements of 34 CFR 300.115, relative to continuum of alternative placements.

Based on the review of the Epsom School District's special education programs, the NHDOE found that the school district was in compliance with Ed 1111.

### **Monitoring of Special Education Process**

Districts are responsible for implementing the special education process in accordance with IDEA, New Hampshire Statutes, and the New Hampshire Standards for the Education of Children with Disabilities. The self-assessment data collection form highlights the district's 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. During the monitoring visit, the compliance & monitoring team verified the evidence of compliance based on the review of the student file, using the district's self-assessment as a resource.

Based on this review, the compliance & monitoring team identified findings of noncompliance with IDEA and the New Hampshire Standards for the Education of Children with Disabilities. The findings include the compliance citation, the area of compliance, the specific component of the regulation, and the required corrective actions, which include timelines for demonstrating correction of noncompliance. Student specific information is not included in the report but will be provided to the district's Special Education Director.

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 district has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the district. These areas must be corrected as soon as possible with state timelines given in the report for each area. The NHDOE will return to the district, typically within three 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 district’s providing professional development training to appropriate staff with regards to areas found to be in noncompliance. The NHDOE will review updated data collected after the identification of noncompliance to demonstrate that the district is correctly implementing the specific requirement. This involves a follow-up on-site review of new student files, selected typically within seven to eight months 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 administrative rules of 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 “*1 out of 3 files demonstrated a record of parties that have obtained access to the education records collected or used under Part B of the Act. For student files A & B, there was insufficient evidence demonstrating compliance with this requirement* ” This means that 3 files were reviewed and 1 file was found to be in compliance and students A & B were found to be noncompliant.

In cases where there was a finding of noncompliance for a particular student, the chart identifies the **First Stage Corrective Action of Student Specific 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 NHDOE will return to the district within three months following the district 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 will also include a reference to a student file that was used as evidence to support the noncompliance of the regulation, if applicable. This section informs the district of any practices or procedures which need to be corrected as well as trainings for staff to inform them of the corrections as a result of the findings of noncompliance. The required corrective action by the district 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 each school 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 NHDOE will verify compliance through a subsequent on-site review of the new files within five to six months 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 each school.**

### Student Specific Findings of Noncompliance

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

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.614 Ed 1119.01(a)		A. Record of Access; Confidentiality Requirements
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
1.	34 CFR 300.614 Ed 1119.02(a)	<b>5 out of 5</b> 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.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.504(a) Ed 1120.03(b)		B. Procedural Safeguards
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
2.	34 CFR 300.504(a) Ed 1120.03(b)	<b>5 out of 5</b> IEP 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.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.306; 34 CFR 300.304 Ed 1108.01; Ed 1107.04		C. Evaluation; Determination of Eligibility for Special Education
Self-Assessment Question Number & Regulatory Component		Review Status
3.	34 CFR 300.306(a)(1) Ed 1108.01(a)	Upon completion of assessments, <b>5 out of 5</b> IEP files demonstrated evidence that a group of qualified professionals and the parent of the child determined whether the child is a child with a disability.
4.	34 CFR 300.304(c)(1)(iv) Ed 1107.04(b)	<b>5 out of 5</b> IEP files demonstrated evidence that qualified examiners for specific disabilities as set forth in Table 1100.1, administered the assessment.
5.	<b>34 CFR 300.306(c)(1)(i)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the team drew upon, information from a <b>variety of sources</b> , including aptitude and achievement tests, parent input, and teacher recommendations, as well as information about the child's physical condition, social or cultural background, and adaptive behavior.  For <b>student D</b> there was insufficient evidence demonstrating compliance with this requirement.
6.	<b>Ed 1107.05(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence of an evaluation report. The report shall include but not be limited to, the results of each evaluation procedure, test, record, or report; a written summary of the findings of the procedure, test, record, or report; and information regarding the parent's rights of appeal in accordance with Ed 1123 and a description of the parent's right to an independent evaluation in accordance with Ed 1107.03.  For <b>student D</b> there was insufficient evidence demonstrating compliance with this requirement.
<p><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide training to appropriate staff that the IEP team draws upon information from a variety of sources, including aptitude and achievement tests, parent input and teacher recommendations, as well as information about the child's physical condition, social or cultural background and adaptive behavior.</p> <p>Provide training to appropriate staff to ensure that an evaluation report shall include but not be limited to the results of each evaluation procedure, test, record, or report; a written summary of the findings of the procedure, test, record, or report; and information regarding the parent's rights of appeal in accordance with Ed 1123 and a description of the parent's right to an independent evaluation in accordance with Ed 1107.03.</p> <p>Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three months from the date of this report.</p>		
<p><b>Second Stage Corrective Action Regarding the Implementation of the Regulations:</b> The NHDOE will review 2 new student files at Epsom Central School for Self-Assessment Questions 5 and 6 for updated data demonstrating compliance with this requirement.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.503 Ed 1120.03		D. Written Prior Notice (Determination of Eligibility)
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
7.	34 CFR 300.503(b)(1) Ed 1120.03(b)	<b>5 out of 5</b> IEP files demonstrated evidence that the written prior notice given to the parents of a child with a disability included a description of the action proposed or refused by the agency.
8.	<b>34 CFR 300.503(b)(2)</b> <b>Ed 1120.03(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the written prior notice given to the parents of a child with a disability included an explanation of why the agency proposed or refused to take the action.  For <b>student I</b> there was insufficient evidence demonstrating compliance with this requirement.
9.	<b>34 CFR 300.503(b)(3)</b> <b>Ed 1120.03(b)</b>	<b>3 out of 5</b> IEP files demonstrated evidence that the written prior notice given to the parents of a child with a disability included a description of each evaluation procedure, assessment, record, or report the agency used as a basis for the proposed or refused action.  For <b>students E &amp; I</b> there was insufficient evidence demonstrating compliance with this requirement.
10.	34 CFR 300.503(b)(6) Ed 1120.03(b)	<b>5 out of 5</b> IEP files demonstrated evidence that the written prior notice given to the parents of a child with a disability included a description of other options that the IEP team considered and the reasons why those options were rejected.
11.	<b>34 CFR 300.503(b)(7)</b> <b>Ed 1120.03(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the written prior notice given to the parents of a child with a disability included a description of other factors that were relevant to the LEA's proposal or refusal.  For <b>student I</b> there was insufficient evidence demonstrating compliance with this requirement.
12.	34 CFR 300.503(c)(1)(ii) Ed 1120.03(b)	<b>5 out of 5</b> IEP files demonstrated evidence that the written prior notice given to the parents of a child with a disability was provided in the native language of the parent or other mode of communication used by the parent, unless it was clearly not feasible to do so.
<p><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide training to staff on completing the written prior notice for determination of eligibility in order for staff to appropriately document each component of a written prior notice.</p> <p>Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three months from the date of this report.</p> <p><b>Second Stage Corrective Action Regarding the Implementation of the Regulations:</b> The NHDOE will review 2 new student files at Epsom Central School for Self-Assessment Questions 7-12; and 2 new student files at Pembroke Academy for Self-Assessment Questions 7-12 for updated data demonstrating compliance with this requirement.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.323; 34 CFR 300.324 Ed 1109		E. Individualized Education Program
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
13.	Ed 1109.01(a)(5)	<b>5 out of 5</b> IEP files demonstrated evidence of the signature of the parent or, where appropriate, student, and a representative of the LEA stating approval of the provisions of the IEP.
14.	34 CFR 300.323(c)(1) Ed 1109.03(a)	For an initial IEP, <b>1 out of 1</b> IEP files demonstrated evidence that there was a meeting to develop an IEP for the student conducted within 30 days of a determination that the child needs special education and related services. <i>(Four student files were not of students with initial IEPs.)</i>
<b>15.</b>	<b>34 CFR 300.324(b)(1)(i) Ed 1109.03(d)</b>	<b>2 out of 4</b> IEP files demonstrated evidence that the IEP was reviewed at least annually. <i>(One student files were of students with initial IEPs.)</i>  For <b>students D &amp; I</b> there was insufficient evidence demonstrating compliance with this requirement.
16.	34 CFR 300.323(a) Ed 1109.03(d)	<b>5 out of 5</b> IEP files demonstrated evidence that an IEP was in place at the beginning of the school year.
<p><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide training to appropriate staff to ensure that IEPs are reviewed at least annually.</p> <p>Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three months from the date of this report.</p> <p><b>Second Stage Corrective Action Regarding the Implementation of the Regulations:</b> The NHDOE will review 2 new student files at Epsom Central School for Self-Assessment Question 15; and 2 new student files at Pembroke Academy for Self-Assessment Question 15, for updated data demonstrating compliance with this requirement.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.321(a) Ed 1103.01		F. IEP Team; Participants in the Special Education Process
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
17.	34 CFR 300.321(a)(1) Ed 1103.01(a)	<b>5 out of 5</b> IEP files demonstrated evidence that one or both of the parents are present at the IEP team meeting or are afforded the opportunity to participate.
18.	34 CFR 300.321(a)(2) Ed 1103.01(a)	<b>5 out of 5</b> IEP files demonstrated evidence that the IEP Team included at least one regular education teacher of the child.
19.	34 CFR 300.321(a)(3) Ed 1103.01(a)	<b>5 out of 5</b> IEP files demonstrated evidence that the IEP Team included at least one special education teacher of the child, (or where appropriate), at least one special education provider of the child.
20.	34 CFR 300.321(a)(4) Ed 1103.01(a)	<b>5 out of 5</b> IEP files demonstrated evidence that the IEP Team included an LEA representative.
21.	34 CFR 300.321(a)(5) Ed 1103.01(a)	<b>5 out of 5</b> IEP files demonstrated evidence that an individual who can interpret the instructional implications of the evaluation results participated in the meeting.

22.	Ed 1103.01(d)	If vocational, career or technical education was being considered, <b>1 out of 1</b> IEP files demonstrated evidence that the IEP team membership included an individual knowledgeable about the vocational education programs and/or career technical education being considered. <i>(Four student files were of students for whom vocational education/CTE was not considered.)</i>
23.	Ed 1103.02(a), (c), (d)	<b>4 out of 5</b> IEP files demonstrated evidence that the parent(s) received a written invitation no fewer than 10 days before an IEP meeting which included the purpose, time, location and identification of the participants or the parent agreed in writing that the LEA could satisfy this requirement via transmittal by electronic mail <u>or</u> demonstrated evidence of written consent of the parent(s) that the notice requirement were waived [Ed 1103.02(b)].  For <b>student H</b> there was insufficient evidence demonstrating compliance with this requirement.
<p><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide trainings to appropriate staff for ensuring 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, 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.</p> <p>Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three months from the date of this report.</p> <p><b>Second Stage Corrective Action Regarding the Implementation of the Regulations:</b> The NHDOE will review 2 new student files at Pembroke Academy for Self-Assessment Question 23 for updated data demonstrating compliance with this requirement.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a); 34 CFR 300.324(a)(1)		G. Individualized Education Program (Present Levels of Academic Achievement and Functional Performance)
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
24.	34 CFR 300.324(a)(1)(i)	<b>4 out of 5</b> IEPs demonstrated evidence of a statement of the child's strengths.  For <b>student H</b> there was insufficient evidence demonstrating compliance with this requirement.
25.	34 CFR 300.324(a)(1)(iv)	<b>5 out of 5</b> IEPs demonstrated evidence of a statement of the child's academic, developmental, and functional needs.
26.	34 CFR 300.324(a)(1)(ii)	<b>4 out of 5</b> IEPs demonstrated evidence of a statement of the parent's concerns for enhancing the student's education in the IEP.  For <b>student E</b> there was insufficient evidence demonstrating compliance with this requirement.
27.	34 CFR 300.324(a)(1)(iii)	<b>5 out of 5</b> IEPs demonstrated evidence that the results of initial or most recent evaluations of the child were included in the IEP.

28.	34 CFR 300.320(a)(1)(i)	<p><b>4 out of 5</b> IEPs demonstrated evidence of a statement in the IEP that describes how the child's disability affects the student's involvement and progress in the general education curriculum. <i>(One student file was a preschool age student.)</i></p> <p>For <b>student E</b> there was insufficient evidence demonstrating compliance with this requirement.</p>
29.	34 CFR 300.320(a)(4)(ii)	<p><b>5 out of 5</b> IEPs demonstrated evidence of a statement that describes how the child's disability affects participation in extracurricular and non-academic areas.</p>
30.	34 CFR 300.320(a)(1)(ii)	<p>For preschool children, as appropriate, <b>1 out of 1</b> IEPs demonstrated evidence of a statement in the IEP that describes how the disability affects the child's participation in appropriate activities. <i>(Four student files were not of preschool age students.)</i></p>
<p><b>First Stage Corrective Action of Student Specific Instance(s) of Noncompliance:</b> As soon as possible, but no later than 2 months from the date of this report, the district must convene the IEP teams to review the IEPs and provide evidence that the following is included in the IEP: a statement of the child's strengths; a statement of the parent's concern's for enhancing the student's education in the IEP and a statement in the IEP 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><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide training to appropriate staff to include in student's IEPs a statement of the child's strengths; of the parent's concern's for improving the student's education in the IEP and of 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 trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three months from the date of this report.</p>		
<p><b>Second Stage Corrective Action Regarding the Implementation of the Regulations:</b> The NHDOE will review 2 new student files at Epsom Central School for Self-Assessment Questions 26 and 28; and 2 new student files at Pembroke Academy for Self-Assessment Questions 24, for updated data demonstrating compliance with this requirement.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.324(a)(2) Ed 1109.03(h)		H. Consideration of Special Factors
Self-Assessment Question Number & Regulatory Component		Review Status
31.	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, <b>4 out of 4</b> IEPs demonstrated evidence that the IEP team considered the use of positive behavioral interventions and supports, and other strategies, to address that behavior. <i>(One student files were not of students whose behavior impedes learning.)</i>
32.	34 CFR 300.324(a)(2)(ii) Ed 1109.03(h)	When a child demonstrates limited English proficiency, <b>1 out of 1</b> IEPs demonstrated evidence that the IEP Team considered the language needs of the child as those needs relate to the child's IEP. <i>(Four student files were not of students who demonstrated limited English proficiency.)</i>

33.	34 CFR 300.324(a)(2)(iii) Ed 1109.03(h)	When a child is blind or visually impaired, <b>1 out of 1</b> IEPs demonstrated evidence that the IEP 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>(Four student files were not of blind or visually impaired students)</i>
34.	34 CFR 300.324(a)(2)(iv) Ed 1109.03(h)	<b>5 out of 5</b> IEPs demonstrated evidence that the IEP Team considered the communication needs of the child.
35.	34 CFR 300.324(a)(2)(iv) Ed 1109.03(h)	When a child is deaf or hard of hearing, <b>0 out of 0</b> IEPs demonstrated evidence that the IEP 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>
36.	34 CFR 300.324(a)(2)(v) Ed 1109.03(h)	<b>5 out of 5</b> IEPs demonstrated evidence that the IEP Team considered whether the child needed assistive technology devices and services.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1109.01(a)(10)		I. Courses of Study
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
<b>37.</b>	<b>Ed 1109.01(a)(10)</b>	For each student with a disability beginning at age 14 or younger, if determined appropriate by the IEP team, <b>1 out of 2</b> 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, vocational education, or career and technical education. <i>(Three student files were students aged 13 or younger who will not be turning 14 during the IEP period.)</i>  For <b>student G</b> there was insufficient evidence demonstrating compliance with this requirement.
<p><b>First Stage Corrective Action of Student Specific Instance(s) of Noncompliance:</b> As soon as possible, but no later than 2 months from the date of this report, the district 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, 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, vocational education, or career and technical education.</p> <p>The NHDOE will verify this through a subsequent on-site review.</p> <p><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide training to appropriate staff to ensure that for each student with a disability beginning at age 14 or younger, if determined appropriate by the IEP team, 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, vocational education, or career and technical education.</p> <p>Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three months from the date of this report.</p>		

**Second Stage Corrective Action Regarding the Implementation of the Regulations:** The NHDOE will review 3 new student files at Pembroke Academy for Self-Assessment Question 37 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
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
38.	34 CFR 300.320(a)(2)(i) Ed 1109.01(a)(1)	2 out of 5 IEPs demonstrated evidence of a statement of measurable annual goals, including academic and functional goals.  For <b>students C, F &amp; G</b> there was insufficient evidence demonstrating compliance with this requirement.
39.	34 CFR 300.320(a)(2)(i)(A), (B) Ed 1109.01(a)(1)	4 out of 5 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 as well as the child's other educational needs that results from the child's disability.  For <b>student G</b> there was insufficient evidence demonstrating compliance with this requirement.
40.	Ed 1109.01(a)(6)	4 out of 5 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.  For <b>student G</b> there was insufficient evidence demonstrating compliance with this requirement.

**First Stage Corrective Action of Student Specific Instance(s) of Noncompliance:** As soon as possible, but no later than 2 months of the date of this report, the district must amend the IEPs to include measurable annual goals; include goals that relate to a need identified in the student profile pages of the IEP; and short-term objectives or benchmarks for all children unless the parent determines them unnecessary for all or some of the child's 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; including goals that meet the child's needs that result from the child's disability and other educational needs; and including short-term objectives or benchmarks for all children unless the parent determines them unnecessary for all or some of the child's annual goals.

Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three 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 Epsom Central School for Self-Assessment Question 38; and 3 new student files at Pembroke Academy for Self-Assessment Questions 38, 39 and 40, for updated data demonstrating compliance with this requirement.



COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1109.01(a)(8)		K. Review and Revision of IEPs (Measuring Progress)
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
41.	Ed 1109.01(a)(8)	<p><b>4 out of 5</b> 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.</p> <p>For <b>student G</b> there was insufficient evidence demonstrating compliance with this requirement.</p>
<p><b>First Stage Corrective Action of Student Specific Instance(s) of Noncompliance:</b> As soon as possible, but no later than 2 months of the date of this report, the district must amend the IEPs to a statement of how the child's progress toward meeting the annual goals shall be provided to the parents.</p> <p>The NHDOE will verify this through a subsequent on-site review.</p>		
<p><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide training to appropriate staff to address that IEP's include a statement of how the child's progress toward meeting the annual goals shall be provided to the parents.</p> <p>Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three months from the date of this report.</p>		
<p><b>Second Stage Corrective Action Regarding the Implementation of the Regulations:</b> The NHDOE will review 3 new student files at Pembroke Academy for Self-Assessment Question 41 for updated data demonstrating compliance with this requirement.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.323(d)(2)(ii) Ed 1102; Ed 1109.03(a)		L. Accessibility of Child's IEP to Teachers and Others (General Accommodations and General Modifications)
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
42.	34 CFR 300.323(d)(2)(ii) Ed 1109.03(a)	<p><b>3 out of 5</b> IEPs demonstrated evidence that a copy of the IEP has been provided to each teacher and provider so that they are informed of their specific responsibilities for implementing the IEP and specific accommodations, modifications, and supports that must be provided for the child in accordance with the IEP.</p> <p>For <b>students F &amp; G</b> there was insufficient evidence demonstrating compliance with this requirement.</p>
43.	Ed 1102.01(b)	If accommodations are included, <b>5 out of 5</b> IEPs demonstrated evidence that the accommodations are changes in instruction or evaluation determined necessary by the IEP team that <b>do not impact</b> the rigor, validity or both of the subject matter being taught or assessed.
44.	Ed 1102.03(v)	If modifications are included, <b>2 out of 2</b> IEPs demonstrated evidence that the modifications are changes in instruction or evaluation determined necessary by the IEP team <b>that impacts</b> the rigor, validity or both of the subject matter being taught or assessed. <i>(Three student files were students with no modifications.)</i>

**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 district must show evidence that a copy of the IEP has been provided to each teacher and service provider so that they are informed of their specific responsibilities for implementing the IEP and specific accommodations, modifications, and supports that must be provided for the child in accordance with the IEP.

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 a copy of the IEP has been provided to each teacher and service provider so that they are informed of their specific responsibilities for implementing the IEP and specific accommodations, modifications, and supports that must be provided for the child in accordance with the IEP.

Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three 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 Epsom Central School for Self-Assessment Question 42; and 2 new student files at Pembroke Academy for Self-Assessment Question 42, 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)		M. Definition of Individualized Education Program (Special Education and Related Services, Supplementary Aids and Services, and Program Modifications or Supports for School Personnel)
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
45.	<b>34 CFR 300.320(a)(4) Ed 1109.01(a)(1)</b>	<b>3 out of 5</b> IEPs demonstrated evidence of a statement of special education.  For <b>students F &amp; G</b> there was insufficient evidence demonstrating compliance with this requirement.
46.	<b>Ed 1109.04(b)(1)</b>	<b>3 out of 5</b> IEP files demonstrated written evidence documenting implementation of the IEP with regards to special education services provided.  For <b>students F &amp; G</b> there was insufficient evidence demonstrating compliance with this requirement.
47.	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	<b>5 out of 5</b> IEPs demonstrated evidence of a statement of related services.
48.	Ed 1109.04(b)(1)	<b>5 out of 5</b> IEP files demonstrated written evidence documenting implementation of the IEP with regards to related services provided.
49.	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	<b>0 out of 0</b> IEPs demonstrated evidence of a statement of supplementary aids and services. <i>(Five student files were students for whom there was no evidence that the IEP team determined this was necessary.)</i>
50.	Ed 1109.04(b)(2)	<b>0 out of 0</b> IEP files demonstrated written evidence documenting implementation of the IEP with regards to supplementary aids and services provided. <i>(Five student files were students for whom there were no supplementary aids and services in the IEP.)</i>
51.	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	<b>1 out of 1</b> IEPs demonstrated evidence of a statement of the supports for school personnel. <i>(Four student files were students for whom there was no evidence that the IEP team determined this was necessary.)</i>
52.	Ed 1109.04(b)(4)	<b>1 out of 1</b> IEP files demonstrated written evidence documenting implementation of the IEP with regards to supports provided for school personnel. <i>(Four student files were students for whom there were no supports for personnel in the IEP.)</i>

53.	34 CFR 300.320(a)(7) Ed 1109.01(a)(1)	<b>5 out of 5</b> 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.
54.	34 CFR 300.320(a)(7) Ed 1109.01(a)(1)	<b>5 out of 5</b> 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.
<p><b>First Stage Corrective Action of Student Specific Instance(s) of Noncompliance:</b> As soon as possible, but no later than 2 months from the date of this report, the district must convene the IEP teams to review the IEPs and provide evidence of a statement of special education.</p> <p>As soon as possible, but no later than 2 months from the date of this report, the district will provide documentation for evidence of the implementation of special education.</p> <p>The NHDOE will verify this through a subsequent on-site review.</p>		
<p><b>First Stage Corrective Action Regarding the Implementation of the Regulations:</b> Provide training to appropriate staff to ensure that the IEP includes applicable special education services.</p> <p>Provide training to appropriate staff for ensuring that there is written evidence documenting implementation of the IEP with regards to all special education services.</p> <p>Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three months from the date of this report.</p>		
<p><b>Second Stage Corrective Action Regarding the Implementation of the Regulations:</b> The NHDOE will review 2 new student files at Epsom Central School for Self-Assessment Question 45 &amp; 46; and 2 new student files at Pembroke Academy for Self-Assessment Question 45 &amp; 46, for updated data demonstrating compliance with this requirement.</p>		

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a)(5) Ed 1109.01(a)(1)		N. Definition of Individualized Education Program (Justification for Non-Participation)
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
55.	34 CFR 300.320(a)(5) Ed 1109.01(a)(1)	<b>5 out of 5</b> IEP 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)		O. Definition of Individualized Education Program (State and District Wide Assessments)
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
56.	34 CFR 300.320(a)(6)(i) Ed 1109.01(a)(1)	<b>2 out of 2</b> 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. <i>(Three student files were of students for whom there were no state or district wide assessments for the student's age/grade level.)</i>

57.	34 CFR 300.320(a)(6)(ii)(A) Ed 1109.01(a)(1)	When the IEP Team determines that the child must take an alternate assessment instead of a particular regular State or district wide assessment of student achievement, <b>1 out of 1</b> IEPs demonstrated evidence of a statement of why the child cannot participate in the regular assessment. <i>(Four student files were of students not taking an alternate assessment.)</i>
58.	34 CFR 300.320(a)(6)(ii)(B) Ed 1109.01(a)(1)	When the child is taking an alternate assessment, <b>1 out of 1</b> IEPs demonstrated evidence describing why the particular alternate assessment selected is appropriate for the child. <i>(Four student files were of students not taking an alternate assessment.)</i>

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.503 Ed 1120.03		P. Procedural Safeguards (Written Prior Notice for IEP)
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
59.	<b>34 CFR 300.503(b)(1) Ed 1120.03(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included a description of the action proposed or refused by the agency.  For <b>student G</b> there was insufficient evidence demonstrating compliance with this requirement.
60.	34 CFR 300.503(b)(2) Ed 1120.03(b)	<b>5 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included an explanation of why the agency proposed or refused to take the action.
61.	<b>34 CFR 300.503(b)(3) Ed 1120.03(b)</b>	<b>1 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included a description of each evaluation procedure, assessment, record, or report the agency used as a basis for the proposed or refused action.  For <b>students C, F, G &amp; J</b> there was insufficient evidence demonstrating compliance with this requirement.
62.	<b>34 CFR 300.503(b)(6) Ed 1120.03(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included a description of other options that the IEP team considered and the reasons why those options were rejected.  For <b>student G</b> there was insufficient evidence demonstrating compliance with this requirement.
63.	<b>34 CFR 300.503(b)(7) Ed 1120.03(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included a description of other factors that were relevant to the LEA's proposal or refusal.  For <b>student G</b> there was insufficient evidence demonstrating compliance with this requirement.
64.	34 CFR 300.503(c)(1)(ii) Ed 1120.03(b)	<b>5 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability was provided in the native language of the parent or other mode of communication used by the parent, unless it was clearly not feasible to do so.

**First Stage Corrective Action Regarding the Implementation of the Regulations:** Provide training to staff on completing the written prior notice for IEP in order for staff to appropriately document each component of a written prior notice.

Provide the dates, names of attendees, and a description of the trainings, which defines the district's procedure for complying with this specific rule, to the NHDOE within three 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 Epsom Central School for Self-Assessment Questions 59-64; and 3 new Epsom student files at Pembroke Academy for Self-Assessment Questions 59-64, for updated data demonstrating compliance with this requirement.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.503 Ed 1120.03(b)		Q. Written Prior Notice (Placement)
<b>Self-Assessment Question Number &amp; Regulatory Component</b>		<b>Review Status</b>
65.	<b>34 CFR 300.503(b)(1) Ed 1120.03(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included a description of the action proposed or refused by the agency.  For <b>student I</b> there was insufficient evidence demonstrating compliance with this requirement.
66.	<b>34 CFR 300.503(b)(2) Ed 1120.03(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included an explanation of why the agency proposed or refused to take the action.  For <b>student I</b> there was insufficient evidence demonstrating compliance with this requirement.
67.	<b>34 CFR 300.503(b)(3) Ed 1120.03(b)</b>	<b>2 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included a description of each evaluation procedure, assessment, record, or report the agency used as a basis for the proposed or refused action.  For <b>students E, H &amp; I</b> there was insufficient evidence demonstrating compliance with this requirement.
68.	<b>34 CFR 300.503(b)(6) Ed 1120.03(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included a description of other options that the IEP team considered and the reasons why those options were rejected.  For <b>student B</b> there was insufficient evidence demonstrating compliance with this requirement.
69.	<b>34 CFR 300.503(b)(7) Ed 1120.03(b)</b>	<b>4 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability included a description of other factors that were relevant to the LEA's proposal or refusal.  For <b>student I</b> there was insufficient evidence demonstrating compliance with this requirement.
70.	34 CFR 300.503(c)(1)(ii) Ed 1120.03(b)	<b>5 out of 5</b> IEP files demonstrated evidence that the notice given to the parents of a child with a disability was provided in the native language of the parent or other mode of communication used by the parent, unless it was clearly not feasible to do so.

**First Stage Corrective Action Regarding the Implementation of the Regulations:** Provide training to staff on completing the written prior notice for placement in order for staff to appropriately document each component of a written prior notice.

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

**Second Stage Corrective Action Regarding the Implementation of the Regulations:** The NHDOE will review 2 new Epsom student files at SAU #53 TLC Preschool for Self-Assessment Questions 65-70; 2 new student files at Epsom Central School for Self-Assessment Questions 65-70; and 3 new student files at Pembroke Academy for Self-Assessment Questions 65-70 for updated data demonstrating compliance with this requirement.