

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

**Pine Haven Boys Center
Summary Report
2019 – 2020**

**Father Paul Riva, Executive Director
Michael Maroni, Principal**

Coordinating Education Consultant;
Rebecca Fredette

Monitoring Visit Conducted on January 28, 2020
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Overview of the Pine Haven Boys Center Program

Pine Haven Boys Center is a New Hampshire Department of Education, Bureau of Student Support Approved Special Education Program located in Allenstown, New Hampshire. Pine Haven is a residential facility with the capacity to provide services for 20 students. It is an approved program for boys in grades 1-8. The leadership team at Pine Haven consists of the Executive Director, Clinical Director, and Principal.

Boys enrolled in this program have primary disabilities in the areas of Autism, Emotional Disturbance, Intellectual Disability, Other Health Impairment, Specific Learning Disability, Developmental Delay, or Speech-Language Impairment. The boys attending Pine Haven are in need of residential care, therapy, rehabilitation, academic courses at the elementary level, and pre-vocational experience. The length of stay is specific to the needs of each boy. Supervision is strict and negative behaviors are confronted, with the ultimate goal being self-discipline and positive behavior.

Pine Haven's school assists students who have personal difficulties, and are often hostile or disinterested toward learning. Pine Haven understands that some children have developed patterns of behavior as a result of complex interactions between the child and the environment resulting in children who have major difficulties in one or more areas of their lives. Pine Haven seeks to provide positive rehabilitative/therapeutic experiences in a nurturing, success-oriented environment, which is designed to help children achieve personal growth.

Pine Haven provides a school environment where students become reoriented to learning. Teachers individualize learning based on the needs of their students. Teachers work with students to teach them to make constructive decisions, and to improve their attitudes and motivation. The school consists of four non-graded, self-contained, elementary special education classrooms, with students grouped by age, development and ability. Classrooms consist of no more than 8 students, allowing for flexibility in the instructional program. Small classroom sizes minimizes distractions while still reinforcing social interaction among peers. Attention is focused on achieving the goals outlined in the Individual Education Program (IEP).

The program's mission is to "provide children with positive experiences and success oriented programs. The process is to identify appropriate behaviors: Catching the Child Doing Right. The ultimate goal is to have the child return to his family, school, and community. When reunification is not a plan, Pine Haven is committed to promoting the optimal possible level of involvement between the child and the family. Pine Haven honors the dignity, resources, and strengths of families and is dedicated to involving them in all major decisions affecting their children."

Pine Haven takes a holistic view of the growth and development of the child. Pine Haven believes the support for the child receiving services is developed through a person-centered planning process. Each child's plan is based on his expressed needs and desires, as well as his abilities, capabilities, and the supports necessary to achieve the identified

goals. Pine Haven believes in the strengths, gifts and abilities of the boys served, and is dedicated to assisting them in fully utilizing their individual talents so that they can return to their families and communities. Services and supports are provided in an environment promoting maximum quality of life. The planning process explores the child's and family's desires with respect to lifestyle decisions, hopes and dreams for the future. The planning process encourages, supports, and enables choice, control, and integration. The issues and concerns considered during the planning process include the child's health, welfare, and safety. Families are valued members of the support team. Life at Pine Haven encompasses the spiritual, mental, physical growth, and good health of the child.

Noteworthy Practices and Areas in Need of Refinement

Noteworthy Practices

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

- The classrooms provide a positive learning environment.
- Using a curriculum that includes developmental programming to meet the student's needs through providing assistance with creating the foundations for learning while accessing the general curriculum.
- Integrating technology in the classroom and throughout the curriculum.
- Building upon students' strengths and knowledge while strengthening areas of weakness.
- Having a residential center with a home life atmosphere.
- Outdoor sport activities available to students that includes swimming, a gymnasium, and soccer field. Also available to students are nature activities and work with domestic farm animals.
- Strong connection to the local community that allows for participation and town events.

Areas in Need of Refinement

After review of evidence, it had been revealed that the Pine Haven had a couple areas in need of refinement. The NHDOE identified these areas, and potential remedies. Whereas these practices do not rise to the standard of noncompliance, and therefore require no corrective actions, the NHDOE believes that the areas in need of refinement are noteworthy to be addressed.

- During Pine Haven’s program review, the NHDOE Monitoring Team discovered that the policy and procedure manual format may lead to confusion since required information is in located in several different documents. The purpose of the policies and procedures manual is to convey the scope, objectives, and procedures for the school, as required by the Administrative Rules for Children with Disabilities. Pine Haven’s policies and procedures are written in several different documents, rather than condensed in one manual. The NHDOE recommends that Pine Haven have policies and procedures written in one manual.

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

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

The New Hampshire Department of Education, Bureau of Student Support review members for Pine Haven Boys Center's on-site monitoring review included Rebecca Fredette, Elizabeth Graichen, and Karen Staines, Executive Director, from Learning Skills Academy

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 Pine Haven Boys Center's special education procedures the monitoring team determined there were **17 findings of noncompliance**.

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
1. 34CFR300.613(a)	Access Rights
<p>Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence regarding complying with parents request to review education records without unnecessary delay.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a statement regarding the right of parents to review records without unnecessary delay.</p> <p>Provide the revised procedures and a description of the method used to inform staff of the revision 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. 34CFR300.613(c)	Access Rights
<p>Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence regarding the presumption that a parent has authority to inspect and review records relating to his or her child unless the agency has been advised that the parent does not have authority under State law.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a policy for their presumption that the parent has authority to inspect and review records relating to his or her child records unless the agency has been advised that parent does not have authority under State law.</p>	
<p>Provide the revised procedures and a description of the method used to inform staff of the revision 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. 34CFR300.615	Record of More than One Child
<p>Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence that if a record includes information on more than one student, the parent only has the right to inspect and review the information relating to his/her child.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a policy stating that if a record includes information on more than one child, the parent only has the right to inspect information relating to his/her own child.</p>	
<p>Provide the revised procedures and a description of the method used to inform staff of the revision 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
4. 34CFR300.623(c)	Safeguards
<p>Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence stating that all persons collecting or using personally identifiable information must receive training regarding State’s policies.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a statement regarding their policy for necessary training for persons collecting or using personally identifiable information.</p>	
<p>Provide the revised procedures and a description of the method used to inform staff of the revision 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
5. 34CFR300.624(b)	Destruction of Information
<p>Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence that information must be destroyed at parent request and that a permanent record including students name, address, phone number, grades, attendance, classes attended, grade level completed, and year completed maybe maintained without time limitation.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a statement that information must be destroyed at the request of the parent and that a permanent record including students name, address, phone number, grades, attendance, classes attended, grade level completed, and year completed maybe maintained without time limitation.</p>	
<p>Provide the revised procedures and a description of the method used to inform staff of the revision 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
6. Ed1119.01(b)(2)	Destruction of Information
<p>Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team noted incorrect information regarding destruction of information. The policy needs to state that a private provider may destroy special education records prior to the students 26th birthday if the private provider has sent all records to the most recent LEA of record.</p>	
<p>Also missing in the destruction of record policy is a statement regarding that a private provider may retain and store records in electronic form or any other form.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must include a statement in their procedures manual stating that a private provider may destroy special education records prior to the students 26th birthday if the private provider has sent all records to the most recent LEA of record. A statement is also needed informing that a private provider may retain and store record in electronic form or any other form.</p>	
<p>Provide the revised procedures and a description of the method used to inform staff of the revision 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
7. Ed1114.06(a)	Responsibilities of Private Providers of Special Education
<p>Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence that the private provider, in all matters concerning possible changes and/or modification in the identification, evaluation, development and/or revision of an IEP, or changes in placement, contact the sending school district for the purpose of initiating the process.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a statement that the private provider will contact the LEA to initiate the process for all matters concerning possible changes or modification in the identification, evaluation, development and/or revision of an IEP, or changes in placement of a child with a disability.</p>	
<p>Provide the revised procedures and a description of the method used to inform staff of the revision 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
8. Ed1114.07(b)	Behavioral Interventions
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find a written statement that the policies and procedures followed by the program in managing student behavior be provided to the sending LEA.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a statement that the policies and procedures followed by the program in managing student behavior be provided to the sending LEA.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
9. Ed1114.16(b)	Physical Facilities
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence regarding a written schedule of maintenance and housekeeping activities.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a written schedule of maintenance and housekeeping activities.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
10. Ed1114.16(d)(1)	Physical Facilities
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence for how they protect children from the presence of asbestos.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include information on how they protect children from the presence of asbestos.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
11. Ed1114.16(d)(4)	Physical Facilities
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence for how they protect children from the hazard of garbage disposal.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include information on how they protect children from the presence of garbage disposal.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
12. Ed1114.16(d)(5)	Physical Facilities
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence for how they protect children from the hazard of the presence of vermin infestation.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include information on how they protect children from the presence of vermin infestation.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
13. Ed1114.16(d)(6)	Physical Facilities
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence for how they protect children from the hazard of storage of food.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include information on how they protect children from the hazard of storage of food.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
14. Ed1114.16(e)	Physical Facilities
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence of a policy ensuring that bathrooms, classrooms, and other areas where children spend time are regularly cleaned to maintain health and sanitation.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a policy on how they ensure that bathrooms, classrooms, and other areas where children spend time are regularly cleaned to maintain health and sanitation.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
15. Ed1114.20(a)	Photography and Audio or Audio-Visual Recording
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find a procedure addressing audio or audio-visual recording.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a policy on how they addressing audio or audio-visual recording.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
16. Ed1114.21(c)(3)	Emergency Planning and Preparedness
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence that emergency drills are held at unexpected times and under varying conditions.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include a statement that emergency drills are held at unexpected times and under varying conditions.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 6 months from the date of this report.	

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
17. Ed1114.21(c)(5)	Emergency Planning and Preparedness
Finding of Noncompliance: In reviewing Pine Haven’s special education procedures the monitoring team was not able to find evidence that the program has established procedures to help children with disabilities understand the nature of emergency drills.	
Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its procedure manual to include information regarding their procedures for helping children with disabilities understand the nature of emergency drills.	
Provide the revised procedures and a description of the method used to inform staff of the revision to the NHDOE as soon as possible but no later than 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 Pine Haven Boys Center is providing students with access to the general curriculum. The monitoring team reviewed the grades 1 – 8 curriculum provided by Pine Haven Boys Center for compliance with learning areas in Arts Education, English/Language Arts, Health Education, Physical Education, Family & Consumer Science, Information & Communications Technologies, Mathematics, Science, Social Studies, and Technology Education, pursuant to Ed 306.261(b)(1) and (2) & Ed 306.27(c).

Based on the review of Pine Haven Boys Center's curriculum, the monitoring team determined that there were **7 findings of noncompliance in 4 areas.**

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
1. Ed 306.37(a)	English
<p>Finding of Noncompliance: In reviewing Pine Haven’s English materials submitted, the following standards were missing:</p> <ul style="list-style-type: none"> • <i>Missing instruction that develops knowledge of language arts in viewing. (1)</i> • <i>Missing opportunities to become acquainted with others' interpretations of experiences through film, television, and other media. (3)</i> <p>Resulting in 2 findings of noncompliance.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its English curriculum to include the standards listed above.</p> <p>Provide the updated English curriculum which includes the standards listed above as well as a description of the method used to inform staff of the revision 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 306.43(a)	Mathematics
<p>Finding of Noncompliance: In reviewing Pine Haven’s Mathematics materials submitted, the following standards were missing: <i>Evidence submitted includes a list of the required topics (7); however,</i></p> <ul style="list-style-type: none"> • Some of standards 1-6 are noted in the General Mathematics Objectives, but not in the scope and sequence of the curriculum. <p>Resulting in 1 finding of noncompliance.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its Mathematics curriculum to include the standards listed above.</p> <p>Provide the updated Mathematics curriculum which includes the standards listed above as well as a description of the method used to inform staff of the revision 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. Ed 306.45(a)	Science
<p>Finding of Noncompliance: In reviewing Pine Haven’s Science materials submitted, the following standards were missing:</p> <ul style="list-style-type: none"> • <i>Missing opportunities to develop process skills to explore, collect, handle, sort, and classify natural objects. (3)</i> <p>Resulting in 1 finding of noncompliance.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its Science curriculum to include the standards listed above.</p> <p>Provide the updated Science curriculum which includes the standards listed above as well as a description of the method used to inform staff of the revision 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
4. Ed 306.46(a)	Social Studies
<p>Finding of Noncompliance: In reviewing Pine Haven’s Social Studies materials submitted, the following standards were missing:</p> <ul style="list-style-type: none"> • <i>Missing opportunities to become familiar with the skills of decision making, data gathering, and critical thinking. (1)</i> • <i>Missing opportunities to practice citizenship in the school and community.</i> • <i>Missing instruction in the New Hampshire constitution.</i> <p>Resulting in 3 findings of noncompliance.</p>	
<p>Corrective Action regarding the Implementation of the Regulations: Pine Haven must revise its Social Studies curriculum to include the standards listed above.</p> <p>Provide the updated Social Studies curriculum which includes the standards listed above as well as a description of the method used to inform staff of the revision to the NHDOE as soon as possible, but no later than 6 months from the date of this report.</p>	

Personnel

The Bureau of Special Education has reviewed Pine Haven Boys Center personnel certifications using the New Hampshire Educator Information System. The review process was for educators employed during 2018 – 2019 school year.

The personnel roster that was provided by Pine Haven Boys 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 Pine Haven Boys Center's personnel certifications, the monitoring team determined there were **no findings of noncompliance**.

Approval Requirements

Each private provider must meet the requirements for special education program approval pursuant to The Individuals with Disabilities Education Improvement Act (IDEA) (2004), The New Hampshire Standards for the Education of Children with Disabilities, and New Hampshire State Statutes (RSA 186-C:5, RSA 189:64). If seeking nonpublic school approval

each private provider must meet the requirements of The New Hampshire Rules for the Approval of Nonpublic Schools (Ed 400, 2005).

The monitoring review for the approval of private provider special education programs includes an application with specified materials that must be submitted to the Bureau by October 15 in the year they are monitored.

Based on the review of the Pine Haven Boys Center's application materials, the monitoring team determined there were **no findings of noncompliance**.

Monitoring of the Implementation of Special Education Process

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

Based on this review, the Bureau of Student Support 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 Administrator of Special Education.

There are two main components to the corrective actions entitled, "*Corrective Action of Individual Instance of Noncompliance*" and "*Corrective Action Regarding the Implementation of the Regulations*". The first component, "corrective action of individual instance of noncompliance," is for any noncompliance concerning a child-specific requirement. There must be evidence that the private provider has corrected each individual case of noncompliance, unless the child is no longer placed at the program. These areas must be corrected as soon as possible with state timelines given in the report for each area. The Bureau will return to the program, typically within 3 months of the date of the report, to verify compliance for each individual instance identified in the report. The second component, "corrective action regarding the implementation of the regulations" would

typically involve the private provider's participating in professional development training to appropriate personnel with regards to areas found to be in noncompliance. The Bureau will review updated data collected after the identification of noncompliance to demonstrate that the program is correctly implementing the specific requirement. This involves a follow-up on-site review of new student files, selected typically within one year of the original on-site compliance & improvement monitoring.

Overview of the Student Specific Findings of Noncompliance

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

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

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

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

In cases where there was a finding of noncompliance for a particular student, the final section of the chart identifies the **Second Stage Corrective Action Regarding the Implementation of the Regulation**. Identified in this section will be the number of new student files that will

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

Findings of Noncompliance

When determining compliance, the NHDOE reviews the currently agreed upon/signed IEP at the on-site monitoring visit. During the on-site monitoring visit there were **no files** which could not be reviewed for sections B(#2), D(#11-17), E(#18-22), F(#23), G (#24-26), H(#27), I(#29), J(#30-31), K(#32-41), L(#42), and M(#43-45) as there was no parent and/or LEA signature indicating consent / approval of the provisions of the IEP.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1114.05		A. Record of Access; Confidentiality Requirements
Self-Assessment Question Number & Regulatory Component		Review Status
1.	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		B. Individualized Education Program
Self-Assessment Question Number & Regulatory Component		Review Status
2.	Ed 1109.04(a)	2 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.
3.	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. <i>(No student files were of students with initial IEPs or moved from another state or district.)</i>
4.	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. <i>(No student files were placed after beginning of school year)</i>

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.321 Ed 1103.01		C. IEP Team; Participants in the Special Education Process
Self-Assessment Question Number & Regulatory Component		Review Status
5.	34 CFR 300.321(a)(1) Ed 1103.01(a)	2 out of 2 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
6.	34 CFR 300.321(a)(2) Ed 1103.01(a)	2 out of 2 IEP files demonstrated evidence that not less than one regular education teacher of the child (if the child is, or may be, participating in the regular education environment) participated in the meeting. <i>(No student files had regular education teacher(s) excused per 34 CFR 300.321(e).) (No student files were of students that are not and will not participate in the regular education environment.)</i>
7.	34 CFR 300.321(a)(3) Ed 1103.01(a)	2 out of 2 IEP files demonstrated evidence that not less than one special education teacher or, where appropriate, not less than one special education provider of the child participated in the meeting. <i>(No student files had special education teacher(s) or special education provider(s) excused per 34 CFR 300.321(e).)</i>
8.	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.
9.	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>(2 student files were students for whom vocational education/CTE were not considered.)</i>
10.	Ed 1103.02(a),(c), (d)	0 out of 0 IEP files demonstrated evidence that the parent(s) received a written invitation no fewer than 10 days before an IEP meeting which included the purpose, time, location and identification of the participants or the parent agreed in writing that the LEA could satisfy this requirement via transmittal by electronic mail <u>or</u> demonstrated evidence of written consent of the parent(s) that the notice requirement were waived [Ed 1103.02(b)]. <i>(2 student files were students for whom the written invitation is the responsibility of the LEA.)</i>

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320		D. Individualized Education Program (Present Levels of Academic Achievement and Functional Performance)
Self-Assessment Question Number & Regulatory Component		Review Status
11.	34 CFR 300.324(a)(1)(i)	2 out of 2 IEP files demonstrated evidence that the team considered the strengths of the child.
12.	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.
13.	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.
14.	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.

15.	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. <i>(No student files were preschool age students.)</i>
16.	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.
17.	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>(2 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)		E. Consideration of Special Factors
Self-Assessment Question Number & Regulatory Component		Review Status
18.	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. <i>(No student files were not of students whose behavior impedes learning.)</i>
19.	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>(2 student files were not of students who demonstrated limited English proficiency.)</i>
20.	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>(2 student files were not of blind or visually impaired students.)</i>
21.	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, and in the case of a child who is deaf or hard of hearing, considered 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.
22.	34 CFR 300.324(a)(2)(v) Ed 1109.03(h)	0 out of 0 IEP files demonstrated evidence that the IEP Team considered whether the child needs assistive technology devices and services. <i>(2 student files were not of students who need assistive technology.)</i>

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1109.01(a)(10)		F. Courses of Study
Self-Assessment Question Number & Regulatory Component		Review Status
23.	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 0 IEP files demonstrated evidence 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, or career technical education.. <i>(2 student files were students aged 13 or younger who will not be turning 14 during the IEP period and no evidence the IEP team determined this is necessary.)</i>

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a)(2)(i) Ed 1109.01(a)		G. Measurable Annual Goals; Short-term Objectives or Benchmarks
Self-Assessment Question Number & Regulatory Component		Review Status
24.	34 CFR 300.320(a)(2)(i) Ed 1109.01(a)(1)	2 out of 2 IEP files demonstrated evidence of a statement of measurable annual goals, including academic and functional goals.
25.	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 as well as the child's other educational needs that results from the child's disability.
26.	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.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1109.01(a)(8)		H. Review and Revision of IEPs (Measuring Progress)
Self-Assessment Question Number & Regulatory Component		Review Status
27.	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)		I. 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
28.	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, 0 out of 0 IEP files demonstrated evidence that the private provider contacted the sending school district. <i>(2 student files had no changes in the child's identification, evaluation, development or revision of the IEP or placement)</i>
29.	Ed 1114.06(i), (j), (k)	2 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.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.323(d)(2)(ii) Ed 1109.03(a); Ed 1109.03(v); Ed 1102.01(b)		J. Accessibility of Child's IEP to Teachers and Others (General Accommodations and General Modifications)
Self-Assessment Question Number & Regulatory Component		Review Status
30.	Ed 1102.01(b)	If accommodations are included, 1 out of 1 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. <i>(1 student file was a student with no accommodations.)</i>
31.	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>(2 student files were students with no modifications.)</i>

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a) Ed 1109.01(a)(1); 1109.04(b)		K. 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
32.	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.
33.	Ed 1109.04(b)(1)	2 out of 2 IEP files demonstrated written evidence documenting implementation of the IEP with regards to all special education services provided.
34.	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>(1 student file was a student for whom there was no evidence that the IEP team determined this is necessary.)</i>

35.	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>(1 student file was a student for whom there was no related services in the IEP.)</i>
36.	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>(2 student files were students for whom there was no evidence that the IEP team determined this is necessary.)</i>
37.	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>(2 student files were students for whom there were no supplementary aids and services in the IEP.)</i>
38.	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>(1 student file was a student for whom there was no evidence that the IEP team determined this is necessary.)</i>
39.	Ed 1109.04(b)(4)	1 out of 1 IEP files demonstrated written evidence documenting implementation of the IEP with regards to supports for school personnel. <i>(1 student file was a student for whom there were no supports for personnel in the IEP.)</i>
40.	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.
41.	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.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a)(5) Ed 1109.01(a)(1)		L. Definition of Individualized Education Program (Justification for Non-Participation)
Self-Assessment Question Number & Regulatory Component		Review Status
42.	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)		M. Definition of Individualized Education Program (State and District Wide Assessments)
Self-Assessment Question Number & Regulatory Component		Review Status
43.	34 CFR 300.320(a)(6)(i) Ed 1109.01(a)(1) RSA 193-C Ed 1114.05(k)	1 out of 1 IEP files demonstrated evidence of a statement of any individual appropriate accommodations that are necessary to measure the academic achievement and functional performance of the child on State and district wide assessments. <i>(1 student file was of a student for whom there were no state or district wide assessments for the student's age/grade level.)</i>

44.	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>(2 student files were of students not taking an alternate assessment.)</i>
45.	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>(2 student files were of students not taking an alternate assessment.)</i>