# New Hampshire Department of Education Bureau of Special Education Support

## SPECIAL EDUCATION COMPLIANCE & IMPROVEMENT MONITORING REVIEW REPORT

### Pinkerton Academy 2021-2022

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Compliance & Improvement Monitoring Visit Conducted on February 10, 2022

Report Date: March 29, 2022

#### 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). The general supervision system is accountable for enforcing IDEA, NH Statutes and the New Hampshire Rules for the Education of Children with Disabilities 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 NH's 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 (CIM) review is one method that the Bureau of Special Education utilizes to implement the general supervision system. The CIM review is comprised of:

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

The intent of the CIM review is to:

- Improve student outcomes for students with IEPs
- Determine compliance

- Ensure sending districts and public academies understand and are implementing special education requirements in accordance with the *New Hampshire Rules for Education of Children with Disabilities*
- Improve special education policies, procedures and practices

In accordance with RSA 194:23, II Public Academy means an independent school which contracts with one or more school districts to provide education services to such districts in compliance with RSA 194:23.

Monitoring is done on a recurring basis for public academies based upon the percentage of findings of noncompliance. During this process, the New Hampshire Department of Education offers professional development to each public academy who is involved in the monitoring process. Professional development opportunities encompass Writing Measurable Annual Goals, Specially Designed Instruction, and Written Prior Notice. Prior to the initial monitoring on-site visit the Bureau of Special Education contacted the public academy to discuss the CIM monitoring review with the school administration.

Pinkerton Academy has a grade span of 9-12 and contracts with five districts for enrollment. The high school fall enrollment for October 1, 2021 showed that there was a total of 3,031 students enrolled in Pinkerton Academy. The October 1, 2021 count indicated that 602 students attending Pinkerton Academy were identified with disabilities.

The Bureau of Special Education provided targeted professional development regarding the CIM review process and completion of the self-assessment data collection form. Pinkerton Academy was provided with a list of 10 students with disabilities representative of the public academy based on grade level, disability, gender, program, and sending school district (Local Education Agency – LEA). During the on-site visit, the monitoring team selected 8 of the 10 student files to review.

The monitoring visit conducted on February 10, 2022 consisted of New Hampshire Department of Education (NHDOE) team members verifying the public academy's identified evidence on the self-assessment data collection form. The public academy completed the entire self-assessment for each selected file prior to the on-site review.

The public academy was encouraged to invite each of their sending school district's LEA representative (or designee), their special education personnel as well as related service providers and regular education personnel, if appropriate, to attend the review. For the personnel who attended the review, this provided another targeted professional development opportunity. Attendees were provided the opportunity to learn about implementing IDEA, NH Statutes and the *New Hampshire Rules 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 New Hampshire Department of Education, Bureau of Special Education review members for this compliance & improvement monitoring review included NHDOE Staff: Heidi Clyborne and Elizabeth Graichen.

#### Policies, Procedures, and Effective Implementation

Each public academy must have policies, procedures, and effective implementation of practices that are aligned and support the implementation of IDEA, NH Statutes and the *New Hampshire Rules for the Education of Children with Disabilities*. As part of the special education compliance & improvement monitoring review, the monitoring team reviewed the public academy's policies and procedures manual for compliance.

The monitoring team reviewed the public academy's policies and procedures manual for the following components.

- Administration pursuant to Ed 1114.04(b) & (e)
- Confidentiality of Information pursuant to 34 CFR 300.610 300.627; Ed 1119.01(a) & (b) & Ed 1114.04(c)
- Program Requirements pursuant to Ed 1114.05(a) & (b)
- Responsibilities of Private Providers of Special Education or Other Non-LEA programs in the Implementation of IEPs pursuant to Ed 1114.06(a), (c), (f), & (h)
- Behavioral Interventions pursuant to Ed 1114.07(b), (c), (e) &(f), Ed 1114.08 & Ed 1114.21(e)
- Qualification and Requirements for Instructional, Administrative and Support Personnel pursuant to Ed 1114.10(c) & Ed 1114.11(a)
- Change in Placement or Termination of the Enrollment of a Child with a Disability pursuant to Ed 1114.12(a), (b) & (d)
- Physical Facilities pursuant to Ed 1114.16(b), (d) & (e)
- Health and Medical Care pursuant to Ed 1114.18(a), (b), (c), (d), (e), (f) & (g)
- Photography and Audio or Audio-Visual Recording pursuant to Ed 1114.20(a)
- Emergency Planning and Preparedness pursuant to Ed 1114.21(b) & (c)

Based on the review of Pinkerton Academy's policies and procedures manual, the monitoring team determined there were **no findings of noncompliance**.

#### **Special Education Forms and Effective Implementation**

Special Education Forms were not reviewed for this Special Education Compliance and Program Monitoring Review since they are the responsibility of the LEA. The Bureau recommended Pinkerton Academy discontinue such practice if they create and use their own Special Education Forms for Record of Access, Notice of IEP Team Meeting, Written Prior Notice, Evaluation Report, Parental Permisssion to Waive Time Limits for IEP Meeting, Specific Learning Disability Eligibility Determination Documentation, Procdural Safeguards, or Annual Notification when Proposing Accessing Public and Private Insurance.

Since Pinkerton Academy's special education forms were not reviewed, the NHDOE determined that there were **no findings of noncompliance**.

#### **Special Education Personnel**

The Bureau of Special Education reviewed Pinkerton Academy's special education personnel certifications using the New Hampshire Educator Information System. The review process was for special education staff employed during 2021-2022 school year.

The review of credentials for Pinkerton Academy was completed on November 23, 2021. 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 public academy 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 monitoring team determined there were **no findings of noncompliance**.

#### **Program Visits**

The purpose of the program visits is to observe Pinkerton Academy's full range of opportunities for the child with a disability that cannot be met in a regular education setting. Per Ed 1113.03(c), each program maintained by or contracted through a public agency shall provide that children with disabilities are educated with nondisabled children in accordance with the requirements of 34 CFR 300.114. Public Academies shall also comply with the requirements of 34 CFR 300.115, relative to continuum of alternative placements.

Pinkerton Academy has 4 different special education programs. The Alternative Comprehensive Transition Program (ACT), a self-contained program, recognizes that students may be able to meet the minimum curriculum standards with support but may also need an intensive functional life skills program to provide appropriate transition skill for post high school. This program places a major focus on independent living, social adjustment and employment readiness.

The New England Center for Children (NECC), a self-contained program, is another program at Pinkerton Academy and provides a level of services for students with Autism Spectrum Disorders similar to those found in an out-of-district placement, while allowing students to be included in their community schools.

Special Services for Educational Success (PASSES), a self-contained program, is designed for students with severe emotional disabilities. This program strives to empower students

to reach their potential by providing a supportive educational environment through collaborative solutions and a student centered approach. PASSES offers academic support which includes specialized instruction and homework support. A vital component to this program is the clinical support it provides through individual and group counseling sessions.

The fourth program at Pinkerton Academy is the Resource Program. This program services students with mild to moderate disabilities who can function in mainstream classrooms with the provision of modifications, accommodations, supplemental supports and services, and specialized instruction.

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

Public academies are responsible for implementing the special education process in accordance with IDEA, NH Statutes and the *New Hampshire Rules for the Education of Children with Disabilities*. The self-assessment data collection form highlights the public academy's understanding of the requirements of IDEA, NH Statutes and the *New Hampshire Rules for the Education of Children with Disabilities* and was reviewed during the monitoring visit. Each area of compliance on the self-assessment data collection form clearly outlines whether the compliance is either a requirement of IDEA, NH Statutes and the *New Hampshire Rules for the Education of Children with Disabilities* or a requirement of solely the *New Hampshire Rules for the Education of Children with Disabilities*. During the monitoring visit, the monitoring team verified the evidence of compliance based on the review of the student file, using the public academy's self-assessment as a resource.

If the Bureau of Special Education identified any findings of noncompliance with IDEA, NH Statutes and the *New Hampshire Rules for the Education of Children with Disabilities during this review the* findings would 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. Each LEA will be informed of the specific areas of noncompliance for each of their students, as they will need to work in conjunction with the public academy in order to resolve the findings of noncompliance. Student specific information is not included in the report but will be provided to both the public academy's special education administrator, and the LEA'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 public academy in conjunction with the LEA has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the public academy. 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 public academy, 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 public academy 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 public academy 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, NH Statutes and the *Ed* found in the administrative rules of the New Hampshire Rules for the Education of Children with Disabilities. The chart aligns the regulatory components to the numbered questions in the self-assessment. Regulatory components and self-assessment numbers are bolded in instances where noncompliance was noted by the compliance & improvement monitoring team.

The **review status** identifies the **number of files reviewed** for the self-assessment question as well as the number of files that were found to be in compliance. For example "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 public academy within 3 months following the public academy 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 public academy 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 public academy in conjunction with the LEA, 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 public academy 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 a 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 school.** 

Based on the student file review the monitoring team determined there were **3 findings of noncompliance**.

#### **Student Specific Findings of Noncompliance**

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 111	4.05	A. Record of Access; Confidentiality Requirements
	ssessment Question Number ulatory Component	Review Status
1.	34 CFR 300.614 Ed 1119.01(a)	<b>8 out of 8</b> files demonstrated evidence that the public academy keeps a record of parties obtaining access to education records collected, maintained, or used under Part B of the Act (except access by parents and authorized employees of the participating agency), 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. Individial Education Plan
Self-Assessment Question Number & Regulatory Component		Review Status
2.	34 CFR 300.323(d)(2)(i),(ii) Ed 1109.03(a) Ed 1109.04(a)	<b>8 out of 8</b> files 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.
3.	34 CFR 300.324(b)(1)(i) Ed 1109.03(d)	<b>8 out of 8</b> IEP files demonstrated evidence that the IEP was reviewed was reviewed at least annually.

COMPLIANCE CITATIONS	AREA OF COMPLIANCE
34 CFR 300.321	C. IEP Team; Participants in the Special Education Process
Ed 1103.01	
<b>Self-Assessment Question Number</b>	Review Status
& Regulatory Component	

4.	34 CFR 300.322 Ed 1103.01(a)	<b>7 out of 8</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.
		For <b>student code(s) B</b> there was insufficient evidence demonstrating compliance with this requirement.
5.	34 CFR 300.321(a)(2) Ed 1103.01(a)	<b>8 out of 8</b> 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. If there was no regular education teacher please explain.
6.	34 CFR 300.321(a)(3) Ed 1103.01(a)	<b>8 out of 8</b> 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. If there was no special education teacher or provider, please explain.
7.	34 CFR 300.321(a)(4) Ed 1103.01(a)	<b>8 out of 8</b> IEP files demonstrated evidence that the IEP Team included an LEA representative.
8.	Ed 1103.01(d)	<b>8 out of 8</b> IEP files demonstrated evidence, if vocational, career or technical education components are being considered, that the IEP team membership included an individual knowledgeable about the vocational education programs and/or career technical education being considered.
9.	34 CFR 300.322(a) Ed 1103.02(a), (c), (d)	8 out of 8 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. If the parent(s) agrees in writing, the LEA may satisfy this requirement via transmittal by electronic mail. Such an agreement shall be effective until revoked in writing. A notice sent by first class or certified U.S. mail 12 days prior to the meeting shall be deemed received 10 days before an IEP team meeting.

**First Stage Corrective Action Regarding the Implementation of the Regulations:** Provide training to appropriate staff to ensure that one or both of the parents are present at the IEP Team meeting or are afforded the opportunity to participate.

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

**Second Stage Corrective Action Regarding the Implementation of the Regulations:** The NHDOE will review 2 new Pinkerton Academy student files for updated data demonstrating compliance with the requirement.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320		D. Individual Education Program (Present Levels of Academic Achievement and Functional Performance)
	ssessment Question Number ulatory Component	Review Status
10.	34 CFR 300.324(a)(1)(i)	<b>8 out of 8</b> IEP files demonstrated evidence that the IEP team considered the strengths of the child.
11.	34 CFR 300.324(a)(1)(iv); Ed 1109.01(a)(1)	<b>8 out of 8</b> IEP files demonstrated evidence that the IEP team considered the academic, developmental, and functional needs of the child.
12.	34 CFR 300.324(a)(1)(ii); Ed 1109.01(a)(1)	<b>8 out of 8</b> IEP files demonstrated evidence that the concerns of the parents for enhancing the education of their child were considered.
13.	34 CFR 300.324(a)(1)(iii); Ed 1109.01(a)(1)	<b>8 out of 8</b> IEP files demonstrated evidence that the the results of the initial or most recent evaluation of the child were considered.
14.	34 CFR 300.320(a)(1)(i); Ed 1109.01(a)(1)	<b>8 out of 8</b> IEP files demonstrated evidence of a statement in the IEP that describes how the student's disability affects the student's involvement and progress in the general education curriculum.

15.	34 CFR 300.320(a)(4)(ii); Ed	<b>8 out of 8</b> IEP files demonstrated evidence of a statement in the IEP that
	1109.01(a)(1)	describes how the student's disability affects non-academic areas.
16.	34 CFR 300.320(a)(1)(ii); Ed 1109.01(a)(1)	<b>0 out of 0</b> IEP files demonstrated evidence, for preschool children, as appropriate, of a statement in the IEP that describes how the disability affects the child's participation in appropriate activities. (8 student files were not of preschool age students)

COMPLIA	ANCE CITATIONS	AREA OF COMPLIANCE
Ed 1109.0	01(a)(10)	E. Courses of Study
Self-Assessment Question Number & Regulatory Component		Review Status
17.	Ed 1109.01(a)(10)	8 out of 8 IEPs demonstrated evidence that for each student with a disability beginning at age 14 or younger, if determined appropriate by the IEP team, of a statement of the transition service needs of the student under the applicable components of the student's IEP that focuses on the student's courses of study such as participation in advanced-placement courses or a vocational education, or career technical education of a statement of the child's strengths.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR Ed 110	300.320(a)(2)(i) 9.01(a)	F. Measurable Annual Goals; Short-term Objectives, or Benchmarks
	sessment Question Number llatory Component	Review Status
18.	34 CFR 300.320(a)(2)(i); Ed 1109.01(a)(1)	<b>5 out of 8</b> IEPs demonstrated evidence of a statement of measurable annual goals, including academic and functional goals.  For <b>student code(s) A, E &amp; G</b> there was insufficient evidence demonstrating compliance with this requirement.
19.	34 CFR 300.320(a)(2)(i)(A),(B); Ed 1109.01(a)(1)	8 out of 8 IEPs demonstrated evidence 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.
20.	Ed 1109.01(a)(6)	<b>8 out of 8</b> 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.

**First Stage Corrective Action of Student Specific Instance(s) of Noncompliance:** As soon as possible, but no later than 3 months of the date of this report, the public academy must amend the IEPs to include measurable annual goals.

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

**First Stage Corrective Action Regarding the Implementation of the Regulations:** Provide training to appropriate staff to address writing measurable annual goals.

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

**Second Stage Corrective Action Regarding the Implementation of the Regulations:** The NHDOE will review 2 new Pinkerton Academy student files for updated data demonstrating compliance with this requirement.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1109.0	01(a)(8)	G. Review and Revision of IEPs (Measuring Progress)
	essment Question Number atory Component	Review Status
21.	34 CFR 300.320(a)(3)(ii); Ed 1109.01(a)(8)	8 out of 8 IEPs demonstrated evidence that the IEP includes a description of when periodic reports on the progress the child is making toward meeting the annual goals (such as through the use of quarterly or other periodic reports, concurrent with the issuance of report cards) will be provided.

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
Ed 1114.06(b)		H. 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
22.	34 CFR 300.325(b) Ed 1109.05 Ed 1114.06(a)	<b>8 out of 8</b> IEPs demonstrated evidence that 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, the private provider has contacted the sending school district for the purpose of initiating the process.
23.	Ed 1114.06(i), (j), (k)	<b>8 out of 8</b> IEPs demonstrated evidence that a minimum of 3 comprehensive reports per year are completed on each child with a disability enrolled in the program.

COMPLI	ANCE CITATIONS	AREA OF COMPLIANCE
	00.323(d)(2)(ii) 03(a); Ed 1109.03(v); 01(b)	I. Accessibility of Child's IEP to Teachers and Others (General Accommodations and General Modifications)
	essment Question Number atory Component	Review Status
24.	Ed 1102.01(b)	<b>7 out of 8</b> IEPs demonstrated evidence that accommodations included 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.
		For <b>student code(s) G</b> there was insufficient evidence demonstrating compliance with this requirement.
25.	Ed 1102.03(v)	<b>1 out of 8</b> IEPs demonstrated evidence that modifications included are changes in instruction or evaluation determined necessary by the IEP team <b>that impact</b> the rigor, validity, or both of the subject matter being taught or assessed. (7 student files were students with no modifications)

**First Stage Corrective Action of Student Specific Instance(s) of Noncompliance:** As soon as possible, but no later than 3 months from the date of this report, the public academy must amend the IEPs so that accommodations included 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.

The NHDOE will verify this through a subsequent file review.

**First Stage Corrective Action Regarding the Implementation of the Regulations:** Provide training to appropriate staff to ensure that that accommodations included 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.

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

**Second Stage Corrective Action Regarding the Implementation of the Regulations:** The NHDOE will review 2 new Pinkerton Academy student files for updated data demonstrating compliance with this requirement.

COMP	LIANCE CITATIONS	AREA OF COMPLIANCE
34 CFR 300.320(a) Ed 1109.01(a)(1); 1109.04(b)		J. Definition of Individualized Education Program (Special Education and Related Services, Supplementary Aids and Services, and Program Modifications or Supports for Personnel)
	ssessment Question Number ulatory Component	Review Status
26.	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	<b>8 out of 8</b> IEPs demonstrated evidence of a statement of special education.
27.	Ed 1109.04(b)(1)	<b>8 out of 8</b> IEPs demonstrated evidence documenting implementation of the IEP with regards to special education services provided.
28.	34 CFR 300.320(a)(4) Ed 1109.01(a)(1)	<b>5 out of 8</b> IEPs demonstrated evidence of a statement of related services. (3 student files were students for whom there was no evidence that the IEP team determined this service necessary)
29.	Ed 1109.04(b)(1)	<b>5 out of 8</b> IEPs demonstrated evidence documenting implementation of the IEP with regards to related services provided. (3 student files were students for whom there were no related services in the IEP)
30.	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. (8 student files were students for whom there was no evidence that the IEP team determined this service necessary)
31.	Ed 1109.04(b)(2)	<b>0 out of 0</b> IEPs demonstrated evidence documenting implementation of the IEP with regards to supplementary aids and services provided. (8 student files were students for whom there were no supplementary aids and services in the IEP)
32.	34 CFR 300.320(a)(4); Ed 1109.01(a)(1)	<b>3 out of 8</b> IEPs demonstrated evidence of a statement of the supports for school personnel. (5 student files were students for whom there was no evidence that the IEP team determined this service necessary)
33.	Ed 1109.04(b)(4)	<b>3 out of 8</b> IEPs demonstrated evidence documenting implementation of the IEP with regards to supports for school personnel. (5 student files were students for whom there were no supports for personnel in the IEP)

COMPLIANCE CITATIONS		AREA OF COMPLIANCE
34 CFR 300.320(a)(5)		K. Definition of Individualized Education Program (Justification for Non-
Ed 1109.01(a)(1)		Participation)
Self-Assessment Question Number & Regulatory Component		Review Status
34.	34 CFR 300.320(a)(4)	<b>8 out of 8</b> IEPs demonstrated evidence of an explanation of the extent, if
	Ed 1109.01(a)(1)	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)		L. Definition of Individualized Education Program (State and District
Ed 1109.01(a)(1)		Wide Assessments)
Self-Assessment Question Number & Regulatory Component		Review Status
35.	34 CFR 300.320(a)(6)(i) Ed 1109.01(a)(1)	<b>5 out of 8</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. (3 student files were of students not taking a state assessment.)
36.	34 CFR 300.320(a)(6)(ii)(A) Ed 1109.01(a)(1)	<b>0 out of 8</b> IEP demonstrated evidence that if 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, provide the evidence of a statement of why the child cannot participate in the regular assessment. (8 student files were of students not taking an alternate assessment)
37.	34 CFR 300.320(a)(6)(ii)(B) Ed 1109.01(a)(1)	<b>0 out of 8</b> IEP demonstrated evidence if the child is taking an alternate assessment, provide the evidence describing why the particular alternate assessment selected is appropriate for the child. (8 student files were of students not taking an alternate assessment)