



MASSACHUSETTS

**Department of Elementary
and Secondary Education**

Keystone Educational Collaborative

**Keystone Educational Academy-Leominster
Keystone Educational Collaborative Key Program
Keystone Educational Alternative Elementary and Middle School
Key 5 ICAN
Prep Program**

Mid Cycle Review Report

**Week of Onsite Visit: May 19, 2025
Final Report Issued: July 15, 2025**

**Department of Elementary and Secondary Education Onsite Team Members:
Christine Romancewicz, Chairperson
Christina Belbute, Team Member**



**Pedro Martinez
Commissioner**

MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

COLLABORATIVE MID-CYCLE REVIEW REPORT

OVERVIEW OF REVIEW PROCEDURES

INTRODUCTION

The Massachusetts Department of Elementary and Secondary Education (Department) is required under M.G.L. c. 71B, §10 to review special education programs in approved special education schools and collaboratives that serve publicly funded students under the provisions of Board of Elementary and Secondary Education Regulations 603 CMR 18.00, 28.00, and 46.00. Each year, the Department's Office of Approved Special Education Schools (OASES) conducts onsite visits to selected approved special education school and collaborative programs to verify the implementation of standard Mid-cycle Review criteria, as well as any criteria from the most recent Program Review that required follow-up due to procedural and programmatic requirements. In the Spring of the previous school year, the schools participating in the review cycle were notified of the dates of the onsite visits and were required to conduct a Data Collection before the onsite portion of the review using the Department's Communication Hub and Monitoring Portal (CHAMP). The statewide Collaborative Mid-cycle Review cycle together with the Department's six-year Program Review monitoring schedule is posted on the Department's website at <https://www.doe.mass.edu/oases/crs/6yrcycle.html>.

COLLABORATIVE MID-CYCLE REVIEW ELEMENTS

Criteria: The Mid-Cycle Review criteria encompass key elements drawn from 603 CMR 18.00, 28.09, 46.00 and the approved public day school program's application for approval. They also include those required by the federal Office for Special Education Programs (OSEP) and revised requirements of the Individuals with Disabilities Education Act, 20 U.S.C. Section 1400 et seq. (IDEA-2004) as described in the Department's Special Education Advisories. Through the Desk Review the OASES chairperson examines the Data Collection submission and determines which criteria will be followed up on through onsite verification activities. The Data Collection and Desk Review are both described below.

Data Collection Phase: This is a requirement for all collaborative programs being monitored. It is completed for the onsite review and covers all of the Department selected criteria. The collaborative is responsible for completing the Self- Assessment for each individual program being reviewed, which consists of:

- Collaborative review of policies and procedures,
- Collaborative review of student documentation including a sample of student records.
- Collaborative review of facilities, buildings, and grounds.

Upon completion of these portions, the collaborative submits the Data Collection to the Department for review.

Desk Review Phase: The OASES chairperson assigned to each collaborative reviews the responses by the collaborative regarding the critical elements for appropriate policies, procedures, and practices, as well as actual documents and data submitted for each criterion. The OASES chairperson also reviews documents, student record data, and explanatory comments. The outcome of this review, along with 3-year trend data from the Problem Resolution System, restraint reports, restraint injuries, serious incidents and notification or prior approval from the Department, through its notification system, is used to determine the scope and nature of onsite activities.

Onsite Verification Phase:

This includes activities selected from the following:

- Interviews with administrative, instructional, and other staff consistent with those criteria selected for verification.
- Telephone interviews as requested by parents, guardians or members of the general public.
- Review of student records: The Department selects a sample of student records from those the collaborative reviewed as part of its data collection to verify the accuracy of the data. The Department also conducts an independent review of a sample of student records that reflect activities conducted since the beginning of the school year. The Department monitoring team will conduct this review using standard Department procedures to determine whether procedural and programmatic requirements have been implemented.
- Observation of classrooms and other facilities: The team observes a sample of classrooms and other school facilities used in the delivery of programs and services to determine general levels of compliance with program requirements.

Team: Depending upon the scope of follow-up activities that have been identified based on the Department's Desk Review of the collaborative's Data Collection, a two-to-four-member Department team will conduct a one-to-five-day Mid-Cycle Review.

Final Report: A Final Report is then issued via CHAMP. The Final Report includes findings organized under 3 specified compliance areas: Policies and Procedures, Student Documentation, and Building/Facilities.

Ratings: The findings explain the "ratings," or determinations by the Department about the implementation status of the compliance criteria reviewed within each of these areas. The ratings indicate those criteria that were found by the OASES monitoring team to be "Implemented," "Implemented Response Required," "Implementation in Progress," "Partially Implemented," or "Not Implemented."

Department Corrective Action Ordered:

The Department issues corrective action required to bring into compliance with the required statute or regulation in each area found to be not fully "Implemented". In some instances, the team may have found certain requirements to be fully "Implemented" but made a specific comment on the school program's implementation methods that also may require follow-up from the approved special education school program. **Under federal Special Education State Performance Plan requirements pursuant to IDEA-2004, public and approved special education school programs serving disabled students**

must demonstrate effective resolution of noncompliance identified by the Department as soon as possible but in no case later than one year from the issuance of the Department's Final Program Review Report.

REPORT INTRODUCTION

A two-member team conducted a visit to Keystone Educational Collaborative during the week of May 19, 2025 to evaluate the implementation of selected compliance criteria under the Massachusetts Board of Elementary and Secondary Education Regulations 603 CMR 18.00 (Program and Safety Standards for Approved Public or Private Day and Residential Special Education School Programs) and 603 CMR 28.09 (Approval of Public or Private Day and Residential Special Education School Programs), 603 CMR 46.00 (Prevention of Physical Restraint and Requirements If Used), M.G.L. c. 71B, the federal Individuals with Disabilities Education Act, 20 U.S.C. Section 1400 et seq, as amended in 2004 (IDEA--2004), and civil rights provisions that are pertinent to Approved Special Education School Programs. The team appreciated the opportunity to interview staff, to observe classroom facilities, and to review the program efforts underway.

The Department is submitting the following Approved Special Education School Program Review Report containing findings made pursuant to this onsite visit. In preparing this report the team reviewed extensive documentation regarding the operation of the school programs, together with information gathered by means of the following Department program review methods:

- Interviews of 5 leadership staff;
- Interviews of 0 related services staff;
- Interviews of 0 teaching staff; and
- Interviews of 0 direct care staff.
- Student record review: A sample of 14 Massachusetts student records was selected by the Department. Student records were first examined by the school program's staff and then verified by the OASES monitoring team using standard Department student record review procedures to make determinations regarding the implementation of procedural and programmatic requirements. An additional number of randomly selected student records were also reviewed by the OASES monitoring team to ensure determinations regarding the implementation of procedural and programmatic requirements remain in effect.
- Observation of classrooms and other facilities: A sample of instructional classrooms and other facilities used in the delivery of programs and services was observed to determine general levels of compliance with program requirements.

1. Summary of Compliance Criteria Included In This Report Requiring Corrective Action Plan Development In Response to the Following Mid Cycle Review Report Findings

Implemented

- The requirement is totally or substantially met

Implemented Response Required

- The requirement is met, but the Agency is required to provide additional information.

Implementation in Progress

- This rating is used for criteria containing new or updated legal requirements and means that the agency has implemented any old requirements contained in the criterion and is training staff or beginning to implement the new requirements in such a way that the onsite team anticipates that the new requirements will be implemented by the end of the school year.

Partially Implemented

- The requirement, in one or several important aspects, is not entirely met.

Not Implemented

- The requirement is totally or substantially not met.

Policies & Procedures					
Criteria	Implemented	Implemented Response Required	Implementation In Progress	Partially Implemented	Not Implemented
APD 4.2 Public Information and Postings	All				
APD 9.1 (a) Student	All				

Separation Resulting from Behavior Support					
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Staff Documentation					
Criteria	Implemented	Implemented Response Required	Implementation In Progress	Partially Implemented	Not Implemented
APD 16.3 Nursing	All				
CSE 51 Appropriate Special Education Teacher Licensure	All				
CSE 52 Appropriate certifications/licenses or other credentials-- related service providers	All				

Student Documentation					
Criteria	Implemented	Implemented Response Required	Implementation In Progress	Partially Implemented	Not Implemented
APD 4.5 Immediate Notification				Keystone Educational Academy-Leominster	
APD 15.5 Parent Consent and Required Notification	All				
CCR 10 Anti-Hazing Reports	All				
CSE 13 Progress Reports and Content	All				
CSE 22 IEP implementation and availability	All				
CSE 29 Communications are in English and Primary language of home	All				
CSE 40 Instructional grouping requirements for students aged five and older	All				
CSE 41 Age Span requirements	All				

Student Documentation

APD 4.5 Immediate Notification

Requirements

The program shall develop and implement written policies and procedures on notification of serious incidents within the program to all required parties and identifies the person responsible for making this notification.

Pursuant to applicable regulations and agency policy this school is hereby providing immediate notification to DESE for ANY student enrolled in its program (Massachusetts Student, Out-of-State Student or Privately Funded Student) concerning incidents that occur during school hours.

1. The filing of a 51-A report with Department of Children and Families (DCF) OR a complaint to the Disabled Persons Protection Commission (DPPC) against the school or a school staff member for alleged abuse or neglect of any student;
2. The hospitalization of a student (including out-patient emergency room and urgent care visits) due to physical injury at school or PREVIOUSLY UNKNOWN illness, accident or disorder which occurs while the student is in the program;
3. A student run from the program; and
4. Any other incident of serious nature that involves a student. (Some examples include: any police involvement, any media involvement, weapons, fire setting, alcohol or drug possession or use while in the program).
5. The death of any student (immediate verbal notification to the student's parent(s)/guardian(s), responsible public school district, Department of Elementary and Secondary Education, and any other state agency involved in the education and care of this student).
6. The emergency termination of a student pursuant to 28.09(12)(b).

NOTE: All incident reports must be maintained in student records.

The program shall develop and implement a written procedure describing how it notifies all appropriate parties of serious incidents within the program and identifying the person responsible for making this notification.

Legal Standards

[28.09\(12\) \(a, b\)](#)

Confirmed Findings

Applies To	Rating	Response Required	Finding Description
Keystone Educational Academy-Leominster	Partially Implemented	Yes	A review of student records and staff interviews indicated that while the collaborative has a procedure for immediate notification, the procedure is not consistently followed. Not all serious incidents that require immediate notification are submitted to DESE.

Corrective Action Plan

Department Order of Corrective Action - The collaborative must develop and implement a process to ensure the immediate notification procedure is followed and that required serious incidents are reported to DESE. This process should include staff responsible for reviews and submission in CHAMP, and should be included in the collaborative procedures. The program must provide training to staff on immediate notification policy and maintain documentation of such training.

Due Date: Progress Report 1 - 09/26/2025

Required Elements: Progress Report 1 - The collaborative must submit the immediate notification procedures that include staff responsible for reporting. Submit evidence of training for staff involved in immediate notifications. Evidence of staff training must include 1) the name and job title of the person conducting the training; 2) the date and time the training was held; 3) list of staff attending the training with their position title; 4) training materials; 5) for any staff that did not receive the training, the reason why and when their training is scheduled.

Due Date: Progress Report 2 - 10/31/2025

Required Elements: Progress Report 2 - Submit the results of an administrative review of a sample of student records to ensure that serious incident reports were reported as required. * Please note when conducting administrative monitoring the collaborative must maintain the following documentation and make it available to the Department upon request: a)list of students names and grade levels for the records reviewed; b) date of the review C) names of the person(s) who conducted the review, their role(s), and signature(s).