Exceptional Children Division
Psychiatric Residential Treatment Facilities
Exceptional Children Program Approval

Self-Assessment

Official Name of Psychiatric Residential Treatment Facility:

_____

School Year:

_____

For DPI: EC Use Only:

☐ Initial Approval   ☐ Annual Review   ☐ On-Site Visit

Exceptional Children Division
Psychiatric Residential Treatment Facilities
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Self-Assessment

Official Name of Psychiatric Residential Treatment Facility:

_____

Check all that apply:
- ☐ Single Building Campus
- ☐ Multi-Building Campus
- ☐ Lock Down Facility
- ☐ Separate Facility
- ☐ Other: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____

Title: _____

Email Address: _____

Phone Number: _____

Grades Served: _____ Age Range: _____

Total Student Enrollment: _____ Capacity: _____

Total Exceptional Children Enrollment: _____
(Complete the enclosed EC Program Student Roster for Non-Public Schools)

Operating, Sponsoring or Licensing Organization:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Name of accreditation agency: _____

Instructional Program: *(Check appropriate sections for the school year approval is requested)*

School Year: _____	Beginning Date	Ending Date	Total Days	Length of School Day
Regular Program				
Summer Program				
Continuous (Year Round)				

Select a response for each area below. Items marked "Not Applicable (N/A)" must include an explanation.

Curriculum and Instruction	Yes	No	N/A
The school offers a structured curriculum of sequential instruction at appropriate levels, comparable to the standard course of study in public schools.			▓
The school has a written statement of its goals and objectives and evaluates its performance against them. *Submit with the self-assessment.*			
The school has an adequate supply of appropriate instructional materials, textbooks, equipment, and supplementary resources available.			
The teacher/pupil ration for exceptional children is compliant with the Policies and/or PRTF legislation.			▓
The school year complies with State standards regarding the number of days and hours within the instructional calendar.			▓
Training and resources are available to help general education classroom teachers serve students with disabilities.			
Training and resources are available to help special education teachers serve students with disabilities.			▓
All personnel providing direct educational services to students with disabilities have a copy of the student's current IEP.			▓

Explanation for items marked "Not-Applicable".

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Student Records	Yes	No	N/A
CONFIDENTIALITY			
A required access sheet, with signature, data and purpose is maintained within each EC folder.			
Complies with HIPPA/FERPA requirements.			
Maintains a written list of persons having access to confidential educational records.			
Procedures are in place to provide parents and eligible students the opportunity to inspect, review, and copy educational records.			
INDIVIDUALIZED EDUCATION PLAN (IEP)	Yes	No	N/A
All required personnel and parents are involved in planning and developing the IEP.			
Efforts to obtain parent participation in the development and subsequent reviews of the IEP are documented.			
Efforts to invite and obtain student participation in the development of the IEP when transition educational services are discussed and subsequent review of the IEP are documented.			
All students with disabilities enrolled by a public Local Education Agency have an IEP.			
All students with disabilities enrolled by a parent absent the Local Education Agency have an IEP.			
All required IEP components are included. *Enclose a copy of the IEP forms used.*			
Coordinates Child Find, Evaluations, Eligibility Determinations, IEP Developments and Reevaluations with the LEA in which the PRTF is located.			
The IEP is reviewed/revised by appropriate staff, parents, and students (when transition is discussed) and placement decisions are made annually.			
FEDERAL AND STATE REGULATIONS	Yes	No	N/A
A current edition of *Policies Governing Services for Children with Disabilities* is on file.			
A current edition of the *Procedural Safeguards: Handbook on Parents' Rights* is distributed to parents each school year to inform them of procedural safeguards.			
Policies Governing Services for Children with Disabilities are followed when disciplining students with disabilities.			
FACILITIES	Yes	No	N/A
Programs are accessible to students with disabilities enrolled and are equipped to provide an appropriate education.			
STUDENT PERFORMANCE AND OUTCOMES	Yes	No	N/A
Progress toward IEP goals is communicated frequently to parents. *Attach a sample of progress report used.*			

Explanation for items marked "Not-Applicable".

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Exceptional Children Program
PRTF Student Roster
(may also be used for reporting additional and withdrawals)

Student Name	Date	Withdraw (W) Add (A)	DOB	Grade	Disability	Setting	Incoming From:	Transition To:

Disability: AU, DB, DF, DD, ED, HI, ID, MU, OI, OHI, SLD, SLI, TBI, VI

Setting: Regular (R1), Resource (R2), Separate (S), Residential (R3)

Exceptional Children Program
Educational Personnel

Administrative Personnel

Name	Position/Title	Licensure Code(s)	Expiration Date

Educational Personnel (General and Special Education Teachers)

Name	Position/Title	Licensure Code(s)	Expiration Date

Related Services Personnel (Speech-Language Specialist, Physical Therapists, Occupational Therapists, School Psychologists, etc.)

Name	Position/Title	Licensure Code(s)	Expiration Date

Exceptional Children Program
Psychiatric Residential Treatment Facility

Certification of School Officials

I certify that:

☐   Guidelines outlined in the current *Policies Governing Services for Children with Disabilities* have been followed.

☐   Verification is on file of the contact person for the education of the child when the parent has relinquished his/her rights and responsibilities for educational decisions.

☐   The information supplied in the *PRTF EC Program Approval: Self-Assessment* accurately reflects the EC Program on site.

☐   Licensure requirements for staff and with the Division of Non-Public Schools and Department of Health and Human Services are current and in good standing.

Signature: _____ Title: _____

Date: _____

Signature: _____ Title: _____

Date: _____

Signature: _____ Title: _____

Date: _____

Signature: _____ Title: _____

Date: _____