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| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**  **Program Quality Assurance Services** |

##### PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Special Education Agency: Northeast Center for Youth and Families, Inc.

Program Review Onsite Year: 2014-2015

**Programs under review for the agency:**

A - Northeast Center Day Program

B - Northeast Center Summer Program

All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Program Review Final Report dated 08/06/2015.

**Mandatory One-Year Compliance Date:** **08/06/2016**

**Summary of Required Corrective Action Plans in this Report**

| **Criterion** | **Criterion Title** | **Applies To** | **PR Rating** |
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| PS 8.4 | Program Modifications and Support Services for English language learners (ELLs) | A,B | Partially Implemented |
| PS 8.8 | IEP - Progress Reports | A,B | Partially Implemented |
| PS 9.1 | Polices and Procedure for Behavior Management | A,B | Partially Implemented |
| PS 9.1(a) | Student Separation Resulting from Behavior Management | A,B | Partially Implemented |
| PS 9.4 | Physical Restraint (Day programs only) | A,B | Not Implemented |
| PS 12.1 | New Staff Orientation and Training | A,B | Partially Implemented |
| PS 12.2 | In-Service Training Plan and Calendar | A,B | Partially Implemented |
| PS 15.3 | Information to be Translated into Languages Other Than English | A,B | Partially Implemented |
| PS 15.5 | Parent Consent and Required Notification | A,B | Partially Implemented |
| PS 16.5 | Administration of Medication | A,B | Partially Implemented |
| PS 20 | Bullying Prevention and Intervention | A,B | Partially Implemented |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 8.4 Program Modifications and Support Services for English language learners (ELLs) | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  A review of student records and interviews indicated that Tri-County School did not implement necessary program modifications and support services to effectively serve limited English proficient students currently enrolled in the program. In addition, based on documentation submitted it is not clear if the students should be receiving sheltered content instruction from a trained and qualified teacher and additional instruction in English as a Second Language by a certified ESL teacher. | | |
| **Description of Corrective Action:**  Tri-County Schools (TCS) is working with the Center for English Language Education at the Collaborative for Educational Services in Northampton to create a plan to provide training to Tri-County teachers to be SEI teachers. The Collaborative will also provide the instruction for these teachers.    TCS will use the results of the home language surveys as well as any results of ACCESS testing and proficiency-level documentation from prior placements to determine ESL service needs for specific students.  TCS plans to hire an ESL teachers to provide the number of hours of ESL instruction required by proficiency level for each student as necessary.  Currently, one high school-level teacher at TCS is SEI qualified. One elementary teacher is participating in the SEI trainings provided by the collaborative and TCS is planning to hire a new middle school teacher who is also SEI qualified.  TCS is also reviewing and revising the current form to be used at all IEP meetings to ensure that the topic of ESL services is covered at each meeting and that ESL progress is also discussed at the meeting. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen, Director; Martha Girouard, Asst. Director | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of Home Language Surveys and student roster by proficiency levels/minutes of ESL services per week  Copy of professional development plan created by TCS and the collaborative (CES)  Copy of certification of SEI trainings for TCS teachers | | |
| **Description of Internal Monitoring Procedures:**  Students enter and leave TCS throughout the school year. As part of the intake process, TCS requires that referring districts send copies of all testing, including ACCESS testing, and subjects taken by each student when they are accepted. The student records include proficiency levels along with the type of ESL classes that the student took in the previous setting. TCS also provides a home language survey in the student's native language as part of the intake package for parents/guardians. Information from these sources is used to determine the need and type of ESL services necessary for each ELL student.  The guidance department of TCS will review each packet and will provide the director with the information each time a new student is registered. The director will keep a monitoring chart to ensure that this information is provided and services are arranged prior to the start for each ELL student.  The guidance department will also review the records of students currently enrolled in TCS to ensure that the appropriate ESL services are being provided. This information will be provided to the director so that services can be arranged if necessary. This information will also be added to the tracking chart. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 8.4 Program Modifications and Support Services for English language learners (ELLs) | **Corrective Action Plan Status:** Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  For the 12/09/2015 Progress Report, Tri-County Schools must submit the following: 1) A random sample of ten Home Language Surveys; and 2) copies of Sheltered English Immersion (SEI) training certifications for two Tri-County teachers. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 8.8 IEP - Progress Reports | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  A review of documentation in student records indicated that not all progress reports were sent to parent/guardians and districts. | | |
| **Description of Corrective Action:**  Tri-County Schools uses an electronic IEP management system to create all IEPs and progress reports. Teachers have received training on creating progress reports using this system. Teachers will also be provided with a half-day training in early November, 2015 during which they will create the progress reports for each of their students under the guidance of the director and the assistant director to ensure that they can complete the progress reports correctly.  TCS office staff will print and mail progress report packets to parents/guardians and sending districts quarterly and will log these mailings on a tracking form.  TCS is also reviewing and revising the letter that is sent with the progress reports | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen, Director; Martha Girouard, Asst. Director | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of internal monitoring chart indicating student, progress reports mailed with their mailing date, goal number for each progress report, and person to whom the progress reports were mailed.  Agenda and sign-in sheet for progress report training.  Copy of the progress report letter. | | |
| **Description of Internal Monitoring Procedures:**  The director and assistant director will review the quarterly tracking charts that have been filled out by office staff at the end of each quarterly mailing period to ensure that all progress reports have been completed and mailed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 8.8 IEP - Progress Reports | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The proposed Corrective Action Plan does not include how, when or who will ensure that moving forward someone at Tri-County Schools is verifying that there is documentation in student records that indicates progress report are being sent to parents/guardians and districts as required. | | |
| **Department Order of Corrective Action:**  Tri-County must submit to the Department revised procedures that include an assurance that each student record will include the parties to whom the progress reports were sent (parent/guardian and district), including who, how and when that will be verified. | | |
| **Required Elements of Progress Report(s):**  For the 12/09/2015 Progress Report, Tri-County Schools must submit the following: 1) a copy of the revised procedures to ensure all required parties receive Quarterly Progress Reports; 2) a statement assuring the Department that moving forward evidence of to whom progress reports are issued will be placed in each student's record; 3) a random sample of copies of 10 cover letters from the most recently issued Quarterly Progress Reports that clearly indicates who progress reports were sent to for each student; and 4) a copy of the spreadsheet that is being maintained that tracks the dates and recipients of the most recently issued Quarterly Progress Reports for all students. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 9.1 Polices and Procedure for Behavior Management | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  Observations and interviews indicated that Tri-County School staff is not implementing the program's approved behavior management policies and procedures consistently. | | |
| **Description of Corrective Action:**  Tri-County Schools is part of a lager agency (Northeast Center for Youth and Families). The agency supports residential and foster care services as well as the school. Many students who live in the residential programs also attend the school and both the school and the residential programs use the behavioral intervention protocols and procedures of CPI. Residential managers who have been trained at all levels of CPI provide two-day trainings in this program every month. this ensures that all staffs have been trained in the same procedures and use the same language. It also provides trainings for any newly hired staff before they interact with students.  The trainers are available to review DVR videos to ensure that CPI-approved escorts and interventions are appropriate and to ensure consistency, quality, and re-training as necessary.  Tri-County Schools will also be training all staff in Attachment, Self-Regulation and Competency (ARC) through the Trauma Center at JRI. Through this training, TCS will develop and implement procedures and interventions that will ensure that students are receiving trauma-informed care. This will provide consistency across all settings as well as the appropriate supports for the students who have suffered trauma.  In addition, the Manager will monitor all school staff on a daily basis to ensure that they are using all of the appropriate techniques and can also re-train if necessary. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen, Director and Victoria Hill, Manager of Student Support Services | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of sign-in sheets for trainings  Copies of individual staff certificates | | |
| **Description of Internal Monitoring Procedures:**  Daily review of student incident reports and related video by manager  Weekly review of reports by clinical team to determine next steps and antecedents | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 9.1 Polices and Procedure for Behavior Management | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Despite using such techniques, Tri-County's currently approved behavior management policy does not include Crisis Prevention Intervention (CPI) or Attachment, Self-Regulation and Clinical Competency Clinical Services (ARC) implementation. | | |
| **Department Order of Corrective Action:**  Tri-County must submit an updated behavior management policy for the Department's approval that reflects the current practices and implementation of policies and procedures for behavior management used at Tri County Schools, including CPI and ARC. | | |
| **Required Elements of Progress Report(s):**  For the 12/09/2015 Progress Report, Tri-County Schools must submit: 1) an updated Behavior Management Policy that includes procedures of CPI and ARC, OR an updated policy that Tri-County will implement as of January 1, 2016, in accordance with the revised Physical Restraint Regulations; 2) an updated in-service staff training calendar highlighting planned dates that staff will be trained once the policy is approved by the Department; and 3) a copy of the tracking mechanism that will be used to track the daily review of student incident reports and video monitoring. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 9.1(a) Student Separation Resulting from Behavior Management | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  Observations and interviews indicated that Tri-County School staff is not implementing the program's approved behavior management policies and procedures regarding time-out consistently. | | |
| **Description of Corrective Action:**  As part of the annual staff trainings prior to the start of the school year, as well as new hire trainings, all staff are trained on the program's approved behavior management policies and procedures regarding time-out. The sustained and continuous training of all staff in both CPI and ARC, along with technical assistance as needed, will ensure that the appropriate policies and procedures are being utilized by all staff across all settings.  All student safety plans will be developed using the trauma-informed model and all staff will be trained on those student-specific safety plans at least annually as well as when a plan changes.  Copies of plans are available in each time-out space as well as in individual classrooms  Staffs are re-trained immediately, if needed, by the manager and agency trainers. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen, Director and Victoria Hill, manager of Student Support Services | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  Sign-in sheets  Agendas from trainings | | |
| **Description of Internal Monitoring Procedures:**  The director and the manager conduct regular observations of time-outs as well as review videos of time-outs based on incident reports and re-train as necessary. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 9.1(a) Student Separation Resulting from Behavior Management | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Tri-County's currently approved behavior management policy does not refer to Crisis Prevention Intervention (CPI) or Attachment, Self-Regulation and Competency Clinical Services (ARC) implementation in its time out procedures. | | |
| **Department Order of Corrective Action:**  CPI and ARC are not included in Tri-County's currently approved behavior management policy regarding time out. The school's updated behavior management policy and procedures must be submitted for ESE approval prior to staff training. | | |
| **Required Elements of Progress Report(s):**  For the 12/09/2015 Progress Report, Tri-County Schools must submit an updated Behavior Management Policy that includes the new procedures regarding time out OR a revised policy which will go into effect on January 1, 2016 and is in compliance with the revised physical Restraint Regulations; and 2) Tri-County Schools must define "regular" observations and submit a copy of the tracking mechanism used to track the regular review of student time-outs and video monitoring. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 9.4 Physical Restraint (Day programs only) | | **PR Rating:**  Not Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  A review of documentation and student records indicated that Tri-County school does not annually obtain parent/guardian consent to the implementation of restraint pursuant to the program's policy. | | |
| **Description of Corrective Action:**  Tri-County Schools has reviewed and revised the physical restraint policy and the related consent form that is sent as part of the "Welcome Back" packet to the parents/guardians of returning students annually as well as part of the intake packet for new students. This signed form is filed in each student's record.  Office staffs track the return of the consent form on a monitoring chart and notify the guidance department of the return of the form.  Staffs are notified of the consent and any special circumstances related to restraints for specific students. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W.Susen, Director and Victoria Hill, Manager of Student Support Services | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of the form  Copy of the revised policy | | |
| **Description of Internal Monitoring Procedures:**  The guidance department and manager review the tracking/monitoring form weekly to ensure that all students have the appropriate consent prior to using a restraint. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 9.4 Physical Restraint (Day programs only) | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Tri-County's Physical Restraint policy must be updated to be in compliance with the Physical Restraint regulations effective January 1, 2016. | | |
| **Department Order of Corrective Action:**  Tri-County must submit an updated Physical Restraint policy in accordance with the regulations effective January 1, 2016. Tri-County must provide staff training in this updated policy once it is approved by ESE. | | |
| **Required Elements of Progress Report(s):**  For 02/01/2016, Tri County must submit an updated Physical Restraint Policy and Procedure that is in compliance with the Physical Restraint regulations effective January 1, 2016. Tri-County must also submit a calendar of scheduled trainings for staff regarding these new restraint procedures. | | |
| **Progress Report Due Date(s):**  02/01/2016 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 12.1 New Staff Orientation and Training | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  Interviews with staff and administrators indicated that newly hired staffs are not assigned to direct care duties until they have received all mandated trainings, but implementation of the trainings was not documented by the school. | | |
| **Description of Corrective Action:**  Tri-County Schools provides all of the required trainings to staff annually as part of the regularly scheduled trainings at the beginning of each school year. These trainings are also provided to new staff and are offered monthly to ensure that all staffs have been appropriately trained prior to being assigned to any direct care duties.  Staff sign in on appropriate forms for all trainings and agendas are documented. Copies of these forms and agendas are kept in the Human Resources department as well as in the professional development records in the school. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen (Director), Martha Girouard (Asst. Director), Victoria Hill, Manager | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of sign-in sheets  Copies of agendas | | |
| **Description of Internal Monitoring Procedures:**  Sign-in sheets and accompanying agendas are reviewed quarterly to ensure that all staff are appropriately trained | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 12.1 New Staff Orientation and Training | **Corrective Action Plan Status:** Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  For the 12/09/2015 Progress Report, Tri-County must submit the following: 1) a copy of the New Staff Orientation and Training checklist that shows that the required training topics will covered with new staff (as well as interns and volunteers) prior to their direct care duties with students; 2) how Tri-County will ensure new staff orientation and training mandated trainings will be documented and maintained in staff records; 3) a printout of the New Staff Orientation and Training for each staff hired since 09/01/2015 that clearly specifies the date of their hire, the date and time of each training, the topic of each training and the presenter of each training; and 4) a statement of assurance from the program that the New Staff Orientation and Training for each staff hired since 09/01/2015 has been documented in staff records. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 12.2 In-Service Training Plan and Calendar | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  Interviews with staff and administrators indicated that in-service trainings are held as required. A review of staff records and school documentation, however, showed that implementation of those trainings was not documented by the school. | | |
| **Description of Corrective Action:**  Tri-County Schools provides trainings and professional development for all staff on three days prior to the start of school, one full day in March, and one half day per month. In addition, trainings are provided as needed during before-school morning meetings and during faculty meetings twice monthly. These opportunities cover all required trainings as well as trainings on curriculum, data analysis, restraint, de-escalation, trauma-informed practices.  Agendas are provided for all trainings, an annual professional development calendar is also provided, and staff sign in on tracking sheets | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen (Director), Martha Girouard (Asst. Director), Victoria Hill (Manager) | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  Sample agendas  Signature sheets  Professional development calendars | | |
| **Description of Internal Monitoring Procedures:**  Sign-in sheets are reviewed monthly and staffs are trained on topics they have missed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 12.2 In-Service Training Plan and Calendar | **Corrective Action Plan Status:** Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  For the 12/09/2015 Progress Report, Tri-County must submit the following: 1) a copy of the 2015-16 In-Service Training Calendar that includes all required training topics, the name and job title of the person presenting each topic, the audience for each training, the dates of each training, and the time and duration of each training; 2) a printout of the In-Service Training for a random sample of ten staff that clearly specifies each training topic, the date, and the duration of each training; and 3) a statement of assurance from the program that the In-Service Training received to date for all staff for the 2015-16 school year has been documented and is kept on file in staff records. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 15.3 Information to be Translated into Languages Other Than English | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  Staff interviews and a review of student records indicated that important school information sent home to parents was not always translated into the native language of the home. | | |
| **Description of Corrective Action:**  Tri-County Schools provides the DESE home language form in the annual "Welcome Back" packets and the "New Student Intake Packets" in both English and Spanish. Other language translations are available as needed. The school uses the information from these forms to determine if parents/guardians need translated forms and/or an interpreter for meetings and/or an oral translator or transliterator or signer. Translated forms are provided as necessary. The school will use the services of a professional translation service for both written and oral translations. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen, Director; Martha Girouard, Asst. Director | | **Expected Date of Completion:**  08/06/2015 |
| **Evidence of Completion of the Corrective Action:**  Copies of tracking form indicating specific needs for translations and translators, including languages needed.  Copies of translated forms. | | |
| **Description of Internal Monitoring Procedures:**  The director and asst. director review home language surveys as they come in. Information re: translations and translators are entered into the school's electronic IEP management system so that the information is readily available. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 15.3 Information to be Translated into Languages Other Than English | **Corrective Action Plan Status:** Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  For the 12/09/2015 Progress Report, Tri-County Schools must submit copies of tracking form indicating specific needs for translations and translators, including languages needed as well as a sample of two copies of translated forms. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 15.5 Parent Consent and Required Notification | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  A review of student records indicated that parental consent for the implementation of restraint and the administration of medications are not obtained annually. | | |
| **Description of Corrective Action:**  Tri-County Schools has reviewed and revised the restraint policy and the accompanying restraint consent form. This policy and form are included in the annual "Welcome Back" packet as well as in the "New Student Intake Packet".  Office staffs track the return of these forms and guidance staffs follow up when forms are not returned.  Forms are filed in individual student records as well as in student plan binders available in each classroom and time-out area.  Staffs are trained on student-specific plans annually and when they change. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen, Director; Victoria Hill, Manager of Student Support Services | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  Copies of revised forms and policy  Copy of tracking form | | |
| **Description of Internal Monitoring Procedures:**  The director, manager, and guidance staff monitor the tracking forms weekly to ensure that each student has a signed consent form. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 15.5 Parent Consent and Required Notification | **Corrective Action Plan Status:** Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  PLEASE NOTE: Restraint consent forms will not be in use after the Physical Restraint Regulations go into effect on 01/01/2016.  For the 12/09/2015 Progress Report, Tri-County must submit 1) a copy of the revised policy on how Tri-County will obtain administration of medication consents annually for all students; and 2) A copy of the tracking form used and current as of the 12/09/2015 submission. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 16.5 Administration of Medication | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  Please refer to the finding under criterion 15.5. | | |
| **Description of Corrective Action:**  Tri-County Schools has reviewed and revised the consent for administration of emergency medical services. This revised form is included in the annual "Welcome Back" packet and the "New Student Intake Packet". The nurse collects and logs in the forms on an individual student tracking sheet. These forms are filed in both the nurse's office and in individual student files. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen, Director; Maureen Weeks, School Nurse | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of new form  Copy of tracking sheets | | |
| **Description of Internal Monitoring Procedures:**  The nurse reviews and checks in the forms as packets arrive. She notifies the director if forms have not been returned by the date specified in the instructions. The director and guidance continue pursuing the signed consent forms. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 16.5 Administration of Medication | **Corrective Action Plan Status:** Approved  **Status Date:** 10/19/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  For the 12/09/2015 Progress Report, Tri-County must submit 1) a copy of the revised policy on how Tri-County will obtain administration of medication consents annually for all students; and 2) A copy of the tracking form used and current as of the 12/09/2015 submission. PLEASE NOTE: These are the same documents as required under criterion 15.5. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 20 Bullying Prevention and Intervention | | **PR Rating:**  Partially Implemented |
| **Applies To:**  All | | |
| **Department Program Review Findings:**  Interviews with staff and a review of the program's Bullying Prevention and Intervention Plan indicated that it did not include procedures for the program's prompt resolution of any bullying complaints filed. | | |
| **Description of Corrective Action:**  Tri-County Schools is reviewing and revising the current bullying prevention and intervention plan to include specific procedures (including levels of staff intervention and decision-making) for the prompt resolution of any complaints filed. | | |
| **Title/Role(s) of Responsible Persons:**  Patricia W. Susen, Director, Victoria Hill, Manager, Guidance Department | | **Expected Date of Completion:**  08/06/2016 |
| **Evidence of Completion of the Corrective Action:**  New procedure  Copies of an complaints filed  Copies of resolutions related to filed complaints | | |
| **Description of Internal Monitoring Procedures:**  The director, manager, and guidance department staff review complaints as soon as they are received, log them, investigate, and determine next steps within 2 school working days. The tracking form is reviewed weekly. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 20 Bullying Prevention and Intervention | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/04/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Tri-County Schools’ Bullying Prevention and Intervention Policy must include updated procedures. | | |
| **Department Order of Corrective Action:**  Tri-County Schools must submit documentation for this criterion as indicated below in the required elements of progress reports. | | |
| **Required Elements of Progress Report(s):**  For the 12/09/2015 Progress Report, Tri-County Schools must submit: 1) A description of the process the program followed to amend its student admissions materials/handbook to include an age-appropriate summary of their Bullying Prevention and Intervention Plan; 2) A description of how the Bullying Prevention and Intervention Plan information was distributed to parents, students and school staff; and 3) A description of the professional development plan developed by the program for all staff for the school year and evidence of its implementation, to include dates, format(s) used and agenda(s) if appropriate. | | |
| **Progress Report Due Date(s):**  12/09/2015 | | |