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

##### PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Special Education Agency: Willow Hill School, Inc.

Program Review Onsite Year: 2018-2019

**Programs under review for the agency:**

Willow Hill Day 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 03/13/2019.

**Mandatory One-Year Compliance Date:** **03/13/2020**

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

| **Criterion** | **Criterion Title** | **PR Rating** |
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| PS 9.1 | Policies and Procedure for Behavior Support | Implementation In Progress |
| PS 9.4 | Physical Restraint | Implementation In Progress |
| PS 11.3 | Educational Administrator Qualifications | Not Implemented |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 9.1 Policies and Procedure for Behavior Support | | **PR Rating:**  Implementation In Progress |
| **Department Program Review Findings:**  A review of documentation indicated that while the Behavior Support Policy was submitted in the correct format, it did not include all of the required elements as required in this criterion. | | |
| **Description of Corrective Action:**  Criterion 9.1  Policies and Procedures for Behavior Support  AGENCY NAME: Willow Hill School  Willow Hill School develops and implements written behavior support policies and procedures consistent with new regulations under 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. Behavior support policies shall be reviewed annually and provided to program staff, and made available to parents of enrolled students. The behavior support policies shall include the following:  1. Methods for preventing school violence Behavior support procedures for management and preventing violent behavior include:   1. Using appropriate and positive responses and reinforcement congruent to age, grade and abilities of each student; 2. Using positive approaches such as collaborative problem-solving, conflict resolution training, teamwork in classes as well as sports, clubs and extracurricular activities; 3. Implementing consistent rules and expectations presented to students in classrooms, and all school activities on and off campus; 4. Encouraging adults to develop positive relationships with students; 5. Modeling, teaching, and rewarding pro-social, healthy, and respectful behaviors; 6. Using the Internet safely and in compliance with Internet Use Policy; 7. Supporting students’ interest and participation in non-academic and extracurricular activities, particularly in their areas of strength; 8. Restricting, when necessary, movement or space to contain disruptive or dangerous behavior beginning with in class responses progressing through steps which may result in separation from the general school activity. 9. Developing a Behavior Support Plan; and, 10. Coordinating with outside therapists, facilitating referrals to private caretakers when appropriate.   2. Methods for preventing self-injurious behavior and suicide Methods for preventing self injurious behavior and suicide include:   1. High levels of student supervision and support. The adult that becomes aware of the situation ensures that (1) the student is not left alone; (2) contacts the school nurse and counselor to initiate interventions deemed appropriate; (3) contacts Head of School and/or Director of Education. 2. Utilization of a variety of de-escalation and non-violent physical intervention strategies presented during staff training. 3. Offering alternatives such as time and space to an agitated student when there is not imminent harm to self or others. 4. Using adult proximity to controlling the environment of a potentially unsafe student. 5. Escorting the student to a quiet, private area supervised by an adult. Offering support to review and process the incident with consideration of alternatives, understanding cause and consequences.   3. Description and explanation of the program’s alternatives to physical restraint  The school’s alternatives to physical restraint are:   1. De-escalation techniques presented during staff training (i.e. prompt/wait strategies manner of sitting, posturing, escorting student to quiet area). 2. Providing time and space to student when there is not imminent risk of harm to self and others. Supervised, controlled space is available with the Director of Education, school counselor and/or Head of School. 3. Implementation of a variety of approaches taught in classes conducted by the school counselor and staff training (i.e using scripts, processing incident and consequences). 4. If a Behavior Support Plan is written, the length of time and review of procedures are determined with appropriate faculty and administration.   4. A description of the program’s training requirements for staff   1. Required staff members participate annually in an in-depth training program provided at Quality Behavioral Solutions (QBS,INC) which addresses prevention, de-escalation techniques, safety requirements, reporting and follow-up requirements. Trained staff are resources to the other members of the staff. 2. The policy and procedures are reviewed annually during Staff Orientation in August or no later than in the first month of school. Training procedures for behavior support systems address all elements of de-escalation and alternate interventions required by regulation. 3. The Head of School or designee arranges training for staff hired after the beginning of the school year, within a month of their employment.   5. Description of the program’s reporting requirements and follow-up procedure Procedures to be followed to implement behavior support reporting requirements include:   1. Staff must report all incidents of disruptive, violent, potential suicidal behavior related to the implementation of the Behavior Support System to the Head of School and/or Director of Education as soon as possible, but no later than the day of the incidence. 2. A written log is maintained by the Head of School. 3. Designated counselor, teacher or administrator will communicate with staff to apprise them of the situation, review and improve supports if possible. 4. Students, as needed, are reviewed at weekly staff meetings; modifications to Behavior Support System are reviewed and discussed. 5. If a Behavior Support Plan is written, the length of time and review of procedures are determined with appropriate faculty and administrators.   6. Description including timelines of the program’s procedure for receiving and investigating complaints regarding behavior support policies   1. Verbal or written complaints from a member of the staff, parent or affiliated individual regarding behavior support practices may be submitted to the Head of School or designee. Verbal complaints are to be documented in writing. Written responses are in the language of the home. 2. The Head of School or designee will acknowledge the receipt of the complaint verbally, or by email if appropriate, within one (1) school day. The Head of School or designee may also determine if discussion with the person submitting the complaint is needed. 3. All reasonable attempts will be made within two (2) school days for the Head of School or designee to review the behavior incident report, and meet with staff involved to review the circumstances leading to the behavior support incident, procedures implemented, follow-up and content of the complaint. 4. Within five (5) school days, the Head of School or designee will provide a written response summarizing the steps taken, persons involved in the investigation of the complaint and the results to the individual submitting the complaint. All material and final written response is confidential and maintained in the office of the Head of School.   7. A description of the procedures to be followed for implementing the behavior support reporting requirements  Procedures to be followed to implement behavior support reporting requirements include:   1. Staff must report all incidents of disruptive, violent, potential suicidal behavior related to the implementation of the Behavior Support System to the Head of School and/or Director of Education as soon as possible, but no later than the day of the incidence. 2. A written log is maintained by the Head of School. 3. Designated counselor, teacher or administrator will communicate with staff to apprise them of the situation, review and improve supports if possible. 4. Students, as needed, are reviewed at weekly staff meetings; modifications to Behavior Support System are reviewed and discussed. 5. If a Behavior Support Plan is written, the length of time, review of procedures are determined with appropriate faculty and administrators.   8. Description of procedures for making oral and written notification to parents   1. A parent will be contacted immediately if the student is at any risk for self injurious or suicidal behavior. 2. The Head of School or designee will make all efforts to verbally notify a parent about any incident of significantly disruptive or violent behavior within 24 hours of the restraint. The Head of School and/or designee will send written notification to the parent, in their primary language, within three (3) school working days via email address and/or, or by regular mail postmarked within three (3) school days. The parent and student will be afforded the opportunity to comment verbally or in writing.   9. Procedure for the use of time-out  If deemed necessary to temporarily separate a student from the group or activity an adult will escort a student to the Office of the Head of School or the Director of Education. The space is clean, sanitary, safe and quiet. The student is continuously observed; and an adult is continuously available. The Head of School and/or Director of Education monitors the length of time and assesses the demeanor and status of the student every 30 minutes. Given that administrators monitor exclusionary time out, approval of an administrator if the duration exceeds 30 minutes is not necessary. However, it is typical practice, given the size of the school, for one administrator to inform the other administrator of the event. The duration is adjusted until the student appears to be calm and able to resume participation in activities. Documentation of each time out is maintained by the Head of School. Under no circumstances will a student be involuntarily confined in a room alone or physically prevented from leaving an area. The school ensures the following:  ? No student will be denied, nor unreasonably delayed, a meal for any reason other than medical prescriptions;  ? Food will not be withheld as a form of punishment under any circumstances; | | |
| **Title/Role(s) of Responsible Persons:**  Marilyn G. Reid, Head of School | | **Expected Date of Completion:**  04/01/2019 |
| **Evidence of Completion of the Corrective Action:**  Corrected 9.1 policies and procedures for Behavior Support in correct format, including all required elements | | |
| **Description of Internal Monitoring Procedures:**  A review of student records who have been identified by staff and School Counselor, tracking of behavioral incidences, weekly-monthly-yearly data collection, and periodic review at weekly staff and administrative meetings. The Head of School will review with the staff the effectiveness of behavior support techniques and policies, mid-year and end-of-year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 9.1 Policies and Procedure for Behavior Support | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 05/31/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The program submitted the Behavior Support Policy and Procedures in the description rather than an explanation of the resolution to the finding. The Behavior Support policy and procedures submitted in the description do not include all required elements. | | |
| **Department Order of Corrective Action:**  The program must maintain and implement its Behavior Support Policy and Procedures that include all required elements, as well as, ensure that all staff are trained in the approved, revised policy and procedures. | | |
| **Required Elements of Progress Report(s):**  The program must submit updated Behavior Support Policy and Procedures that include all required elements of this criterion in the required format.  Once the Department has approved the Behavior Support Policy and Procedures, the program must provide evidence of training for all staff by submitting 1) the name and job title of the person conducting the training; 2) the dates and times when this training was held; 3) the length of time allotted for the training; 4) a list of all staff in alphabetical order by last name with their position title; and 5) for any staff who did not receive the training, the reason why and when their training is scheduled. | | |
| **Progress Report Due Date(s):**  06/28/2019  08/30/2019  08/31/2019 | | |

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| PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  PS 9.4 Physical Restraint | | **PR Rating:**  Implementation In Progress |
| **Department Program Review Findings:**  A review of documentation and interviews indicated that the Physical Restraint Policy and Procedures did not include all required elements. | | |
| **Description of Corrective Action:**  Physical Restraint Policies and Procedures  AGENCY NAME: Willow Hill School  The program shall have a written policy on the use of physical restraint and administer physical restraint in accordance with the requirements of 603 CMR 46.00. The program administers physical restraint only in emergency situations of last resort when needed to protect a student and/or member of the school community from assault or imminent, serious, physical harm, and with extreme caution in order to prevent or minimize any harm to the student as a result of the use of physical restraint. The physical restraint policy and procedures include the following  1. Methods for engaging parents and students in discussions about restraint prevention and use Parents and students are informed of the restraint policy through distribution of the Student/Parent Handbook online and provided annually in hard copy. Parents and students are required to acknowledge written receipt and review of the content. Classes conducted by the school counselor provide an opportunity for students to discuss the policy. Parents are encouraged at the annual parent orientation in August to discuss the policy and/or contact the Head of school should there be a question or concern.  2. A description and explanation of the method of physical restraint used by the program in an emergency situation.  Resource staff are trained by Quality Behavior Solutions, QBS,Inc using Safety-Care procedures. Methods of physical restraint are:   * 1 person stability hold (one arm, both arms) * 2 person stability hold (elbow forward grip, elbow back grip) * Floor drop transition * Floor seated stability hold * Forward/reverse transport * Chair stability hold * Leg wrap * Emergency release/planned release * Prompt strategy/Wait strategy implemented as needed   Physical restraint,shall mean the use of bodily force to limit a student’s freedom of movement. In an emergency situation, only trained staff select the method of restraint that fits the age, developmental level and psychological circumstances of the student at the time. The following applies:     1. The adult present during a significant behavioral incident immediately calls the appropriately trained members of the staff. If the adult involved with the student is unable to use the phone, that person is to communicate in whatever way possible to another adult the need to contact the trained member of the staff and administration. 2. The school personnel administering restraint will use the safest method available and appropriate to the situation and consistent with requirements of 603 CMR 46.05(g) 3. The method selected by the appropriately trained personnel will be applied in consideration of any known medical or psychological limitations and/or behavioral intervention plan. 4. All efforts will be made to protect the privacy of the student and keep other students away from the situation; 5. All efforts will be made to restrain the student in a safe, protected space free of items that could possibly be used for self injury or against another person; 6. Whenever possible, the administration of physical restraint is in the presence of at least one (1) adult who does not participate in the restraint. A person administering physical restraint shall only use the amount of force necessary to protect the student from injury or harm; 7. During the administration of a restraint, school personnel shall continuously monitor the physical status of the student including respiration, skin temperature and color. If the student indicates that they cannot breathe the restraint is stopped. If, at any time during a physical restraint the student demonstrates significant physical distress, the student shall be released from the restraint immediately, and school staff shall take steps to seek medical assistance. If the nurse is not available, 911 is called. 8. A restraint shall be immediately released upon a determination by the school personnel administering the restraint that the student is no longer at risk of causing imminent physical harm to himself, herself or others. 9. If a student is restrained for a period longer than 20 minutes, trained staff obtain the approval of Head of School and/or Director of Education. Approval will be based upon the student’s continued agitation during the restraint justifying the need for continued restraint (46.05 (c)); 10. The decision regarding the student’s ability to return to class, stay at school, or be dismissed to a parent or approved adult will be determined on a case by case basis.   3.A statement prohibiting seclusion, medication restraint, mechanical restraint and prone restraint unless permitted under 603 CMR 46. 03(1)(b)  Seclusion shall mean physically confining a student alone in a room or limited space without access to school staff. Under no circumstances will a student be involuntarily confined in a room alone or physically prevented from leaving an area.  The use of a mechanical restraint is prohibited. Mechanical restraint shall mean the use of a physical device to restrict the movement of a student or the movement or normal function of a portion of his/her body. Medication for the purpose of restraint is prohibited.  Prone restraint is prohibited. Prone restraint may occur if the School has documented 1-5 in advance of using prone restraint and has maintained documentation.   1. The student has a documented history of repeated dangerous behavior to self or others; 2. All other forms of physical restraint have failed to ensure the safety of the student or others; 3. There are no medical contraindications documented by a physician; 4. There is psychological/behavioral justification or there are no contraindications documented by a licensed mental health professional; 5. The School has obtained consent to use use prone restraint in an emergency as defined by 603 CMR 46.03(1)(b) and such use has been approved by the Head of School.   4. Physical restraint shall be used only in emergency situations of last resort, after other lawful and less intrusive alternatives have failed or been deemed inappropriate Willow Hill School complies with the regulations to the extent required by law during school hours and during all school-sponsored events and activities, on and off school property. Physical restraint is limited to the use of reasonable force necessary to protect a student or another member of the school community from assault or imminent, serious physical harm. A physical restraint can only be used when the following circumstances exist:   * When non-physical, less intrusive interventions have failed and would not be effective and the student’s behavior poses a threat of imminent, serious physical harm to him/herself or others. * Appropriately trained school personnel shall use physical restraint with extreme caution and with the goal of preventing or minimizing any harm to the student as a result of the use of physical restraint.   5. A description of the program’s procedure for conducting periodic review of data and documentation on the program’s use of restraint   1. The Director of Education maintains an ongoing record of all reported instances of physical restraint which, upon request, is made available to DESE. The contents of the record will include all elements required and included on the Restraint Reporting Form. 2. The Head of School or designee will conduct a weekly review of restraint data to identify any student that has experienced multiple restraints during the week. If the Head of School is involved in a restraint, another administrator will be identified to conduct the review  If appropriate, the Head of School or designee will convene a review team to consider (a) written reports submitted along with the comments provided by the student and/or parent about the report and use of restraint; (b) analysis of circumstances leading to restraint including factors such as time of day, day of week, antecedent events, and individuals involved; (c) consideration of the factors that may have contributed to the escalation of behaviors, consideration of alternatives to restraint, including de-escalation techniques and possible interventions and other strategies that may be considered appropriate with the goal of reducing or eliminating the use of restraint in the future; (d) agreement on a written plan.  The Head of School or designee responsible for periodic review of data and documentation of the use of restraint during each school year conducts a monthly review of school-wide restraint followed by mid year and end of the year review. The review considers pattern of restraint, antecedents, duration of restraints, participants in the incidence, interventions implemented and nature and seriousness of any injuries. Based upon review, the Head of School will determine if the restraint prevention and management policy needs modification, or additional staff training is warranted. Additional meetings will be convened by administration if needed along with other decisions related to reducing restraints in the future.   6. A description of the program's training requirements for all staff  Training Requirements for Staff/Annual Review  Each school year during Staff Orientation in August, or no later than in the first month of school, the Head of School identifies and introduces the two staff members who serve as a school-wide resource ensuring proper training and administration of physical restraint. Training addresses the policy and procedures contained in 603 CMR 46.04 (2) regarding (a) the role of the student, family and staff in preventing restraint; (b) restraint prevention and behavior support policy; (c) use of time-out as a behavior support distinct from seclusion; (d) interventions that preclude the use of restraint such as de-escalation and alternative strategies; (e) emergency situations, use of permitted physical restraint and safety consideration; (f) risk and injury management; (g) medical and psychological limitations, known or suspected trauma history; (h) details of behavior intervention plan if needed.  The Head of School or designee arranges training for staff hired after the beginning of the school year, within a month of their employment.  The training requirements contained in 603 CMR 46.00 shall not preclude a member of the faculty and staff from using reasonable force to protect students, others or themselves from assault or imminent serious, physical harm.  7. A description of the intensive training for staff who serve as restraint resources for the program Consistent with the recommendation of DESE identified staff participate in comprehensive training program that is at least sixteen (16) hours in length provided at Quality Behavioral Solutions (QBS, Inc.). The two identified staff members also fulfill annual requirements to maintain their skills. The content of the in-depth training includes, but is not be limited to: (a) appropriate procedures for preventing the need for physical restraint, including the de-escalation of problematic behavior, relationship building and the use of alternatives to restraint; (b) description and identification of dangerous behaviors on the part of students that may indicate the need for physical restraint and methods for evaluating the risk of harm in individual situations in order to determine whether the use of restraint is warranted; (c) the simulated experience of administering and receiving physical restraint, instruction regarding the effect(s) on the person restrained, including instruction on monitoring physical signs of distress and obtaining medical assistance; (d) instruction regarding documentation and reporting requirements and investigation of injuries and complaints; and (e) demonstration by participants of proficiency in administering physical restraint.  8. Reporting requirements and follow-up procedures for reports to parents/guardians and to the Department Reporting Requirements   1. Staff must verbally report the use of all physical restraints to the Head of School and/or Director of Education as soon as possible and by written report no later than the next school day. The Restraint Reporting Form available on the school network is used. The report must include the following:  * The name of the student; the names and job titles of the staff who administered the restraint, and observers, if any; the date of the restraint; the time the restraint began and ended; and the name of the administrator who was verbally informed following the restraint; and, as applicable, the name of the administrator who approved continuation of the restraint beyond 20 minutes. * A description of the activity in which the restrained student and other students and staff in the same room or vicinity were engaged immediately preceding the use of physical restraint; the behavior that prompted the restraint; the efforts made to prevent escalation of behavior, including the specific de-escalation strategies used; alternatives to restraint that were attempted; and the justification for initiating physical restraint. * A description of the administration of the restraint including the holds used and reasons such holds were necessary; the student's behavior and reactions during the restraint; how the restraint ended; and documentation of injury to the student and/or staff, if any, during the restraint and any medical care provided. * Information regarding any further action(s) that the school has taken or may take, including any consequences that may be imposed on the student. * Information regarding opportunities for the student's parents to discuss with school officials the administration of the restraint, any consequences that may be imposed on the student, and any other related matter.  1. If a restraint resulted in an injury to a student or staff member, the Head of School or designee will email a copy of the written report (DESE Restraint Injury Form) required by 603.CMR 46.06 (4) to DESE. The form will be electronically transmitted no later than three (3) school working days from the administration of the restraint. A copy of the record of physical restraints maintained by the Head of School pursuant to 603.CMR 46.06 (2) for the 30 day period prior to the date of the reported restraint will also be sent. The report will contain all of the elements required to be in compliance with 603 CMR 406.06 (4). In special circumstances, individual waivers may be sought from parents of students who present a high risk of frequent, dangerous behavior that may necessitate the use of restraint.  Follow-up Procedures with student(s) and parent(s) At an appropriate time after a student has been released from a restraint, the school shall implement the follow-up procedures:  * Review the restraint with the student to address the behavior that precipitated the restraint; * Review the incident with school personnel who administered the restraint to discuss whether proper restraint procedures were followed; * Consider whether any follow-up is appropriate for the students who witnessed the incident. * The decision regarding the student’s ability to return to class, stay at school, or be dismissed to a parent or approved adult will be determined on a case by case basis. The Head of School or designee will make all efforts to verbally notify a parent of the use of restraint within 24 hours of the restraint. The Head of School or designee will send written notification to the parent within three (3) school working days following the use of restraint by email address or by regular mail postmarked within three (3) school days. The report will be provided in English and in the primary language of the parent. The parent and student will be afforded the opportunity to comment verbally or in writing on the use of restraint and the written report. The content of the report will contain all elements required by 603 CMR 46.06(2)b   9. A procedure for receiving and investigating complaints regarding restraint practices   1. Verbal or written complaints from a member of the staff, parent or affiliated individual regarding restraint practices may be submitted to the Head of school or designee. Verbal complaints are to be documented in writing. Written responses are in English and in the language of the home; 2. The Head of School or designee will acknowledge the receipt of the complaint verbally, or by email if appropriate, within one (1) school day. The Head of School or designee may also determine if discussion with the person submitting the complaint is needed. 3. All reasonable attempts will be made within two (2) school day for the Head of School or designee to review the restraint report and meet with staff involved in the restraint to review the circumstances leading to the restraint, procedures implemented, follow-up and content of the complaint. 4. The Head of School or designee will determine the appropriateness of meeting with the student(s) involved. 5. Within five (5) school days, the Head of School or designee will provide written response summarizing steps taken, persons involved in the investigation of the complaint and the results to the individual submitting the complaint. All material and final written response is confidential and maintained in the office of the Head of School.   10. The Director or his/her designee shall maintain an ongoing record of all instances of of physical restraint, which shall be made available for review by the Department upon request   1. The Head of School maintains an ongoing record of all reported instances of physical restraint which, upon request, is made available to DESE. The contents of the record will include all elements required and included on the Restraint Reporting Form. 2. The Head of School or designee will conduct a weekly review of restraint data to identify any student that has experienced multiple restraints during the week. If the Head of School is involved in a restraint, another administrator will be identified to conduct the review 3. The Head of School or designee responsible for periodic review of data and documentation of the use of restraint during each school year conducts a monthly review of school-wide restraint followed by mid year and end of the year review. | | |
| **Title/Role(s) of Responsible Persons:**  Marilyn G. Reid, Head of School | | **Expected Date of Completion:**  04/01/2019 |
| **Evidence of Completion of the Corrective Action:**  Criterion 9.4, Physical Restraint, Policies and Procedures in correct format including all required elements submitted for review. | | |
| **Description of Internal Monitoring Procedures:**  Review of all data collected on any individual student restrained by the Head of School and relevant staff, monthly-mid year-end of year. Adjustment to any policies and procedures required after reviewing information. Head of School maintains record. The system will use the restraint reporting form to manage information. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 9.4 Physical Restraint | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 05/31/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The program submitted the Physical Restraint policy and procedures in the description rather than a description of the resolution to the finding. The Physical Restraint policy and procedures submitted in the description do not include all required elements. | | |
| **Department Order of Corrective Action:**  The program must maintain and implement Physical Restraint Policy and Procedures that include all required elements, as well as, ensure that all staff are trained in the approved, revised policy and procedures. | | |
| **Required Elements of Progress Report(s):**  The program must submit updated Physical Restraint Policy and Procedures that include all required elements in the required format.  Once the Department has approved the Physical Restraint Policy and Procedures, the program must provide evidence of training for all staff by submitting 1) the name and job title of the person conducting the training; 2) the dates and times when this training was held; 3) the length of time allotted for the training; 4) a list of all staff in alphabetical order by last name with their position title; and 5) for any staff who did not receive the training, the reason why and when their training is scheduled. | | |
| **Progress Report Due Date(s):**  06/28/2019  08/30/2019  08/31/2019 | | |

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| **Criterion & Topic:**  PS 11.3 Educational Administrator Qualifications | | **PR Rating:**  Not Implemented |
| **Department Program Review Findings:**  A review of staff records and interviews indicated that the program did not have a qualified person to serve in the role of Educational Administrator. | | |
| **Description of Corrective Action:**  Thomas (Tom) Rimer, (#412381) was licensed as a Special Education Administrator on March 27, 2019 | | |
| **Title/Role(s) of Responsible Persons:**  Marilyn G. Reid | | **Expected Date of Completion:**  04/01/2019 |
| **Evidence of Completion of the Corrective Action:**  He will supervise the provision of special education services and ensure that the services specified in each student's IEP are delivered. Evidence of Completion is receiving this license and his Job Description includes these required tasks. | | |
| **Description of Internal Monitoring Procedures:**  Discussions at weekly administrative meeting for IEP meeting updates and provision of services. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  PS 11.3 Educational Administrator Qualifications | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 05/31/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The program provided the name of the person qualified for the Special Education Administrator position but did not submit copies of credentials. | | |
| **Department Order of Corrective Action:**  The program must have an appropriately qualified Educational Administrator to ensure the special education services are being delivered to all students. | | |
| **Required Elements of Progress Report(s):**  The program must submit evidence of a qualified Special Educational Administrator who has either a current special education administrator license or credentials that include all of the following: a Special Education Teacher license, or copy of an ELAR activity sheet; Evidence of a Master's Degree in Special Education or a related field; and evidence of one year of administrative experience (acceptable documentation includes a current resume). | | |
| **Progress Report Due Date(s):**  06/28/2019 | | |