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| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**  **Public School Monitoring** |

##### FOCUSED MONITORING REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: North Adams

FMR Onsite Year: 2022-2023

Program Area: Special Education

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 Coordinated Program Review Final Report dated 05/26/2023.

**Mandatory One-Year Compliance Date:** **05/26/2024**

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

| **Criterion** | **Criterion Title** | **FMR Rating** |
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| SE 6 | Determination of transition services | Partially Implemented |
| SE 9 | Timeline for determination of eligibility | Partially Implemented |

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| FOCUSED MONITORING REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  SE 6 Determination of transition services | | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  A review of student records and staff interviews indicated that beginning no later than when the student is 14 years old, the Team discusses the student's transition needs annually. However, the IEP and the Transition Planning Form do not always include appropriate measurable post-secondary goals or measurable annual skill-based goals related to the student's transition service needs. | | |
| **Description of Corrective Action:**  The root cause for the IEP and the Transition Planning Form not always including appropriate measurable post-secondary goals or measurable annual skill-based goals related to the student's transition service needs is due to the following:   * The district needs an updated written procedure for transition planning. * New staff to the district and new to their roles in the Special Education Coordinator positions which are responsible for writing transition planning forms. * Both new and veteran staff need updated training on the transition process and how to write appropriate measurable post-secondary goals or measurable annual skill-based goals related to the student's transition service needs. * The district needs to provide additional oversight and monitoring in this area throughout the school year.   To correct this, the district will:   * Develop internal written procedures to ensure that transition planning for students aged 14 and older include appropriate measurable post-secondary goals or measurable annual skill-based goals related to the student's transition service needs. * Provide training to special education staff on the updated procedures as well as how to write appropriate measurable post-secondary goals or measurable annual skill-based goals related to the student's transition service needs. * Monitor plans throughout the year to ensure that they consistently include appropriate measurable post-secondary goals or measurable annual skill-based goals related to the student's transition service needs. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Support Services, Assistant Director, Coordinators of Special Education | | **Expected Date of Completion:**  02/29/2024 |
| **Evidence of Completion of the Corrective Action:**  By October 1, 2023, the District will submit a copy of the written procedures to the Department.  By October 15, 2023, the district will submit evidence of staff training including agenda, signed attendance, and any additional materials.  By January 31, 2024, the district will report on the review of five student records to indicate whether the IEP and transition planning form include appropriate measurable post-secondary goals or measurable annual skill-based goals related to the student's transition service needs. | | |
| **Description of Internal Monitoring Procedures:**  The Director and Assistant Director will annually review procedures with staff. Quarterly, samples of student records will be reviewed for compliance. If non-compliance is found, individual staff will receive additional training as needed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 6 Determination of transition services | **Corrective Action Plan Status:** Approved  **Status Date:** 07/03/2023  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 15, 2023, the district will submit evidence that issues of noncompliance for the three students identified by the Department are resolved. Specifically, the district will reconvene IEP Teams to develop an IEP and Transitional Planning Form (TPF) that include measurable postsecondary goals and/or measurable annual skill-based goals related to the students transition service needs. As evidence that the Team reconvened for the three students, the district will submit the Attendance Sheet (N3A), updated TPF, updated IEP, and the Notice of Proposed School District Action (N1).  By October 15, 2023, the district will submit procedures for the 2023-2024 school year that ensure beginning no later than when the student is 14 years old, appropriate goals are always included in the TPF and IEP. Updates will be based on the results of the district's root cause analysis. The procedures will also make clear that the Postsecondary Transition Planning section of the new IEP Form will replace the TPF when the new IEP is implemented by the district in 2024-2025.  By October 15, 2023, the district will submit evidence of training for middle and high school special education coordinators and special education teachers specific to developing appropriate measurable post-secondary and annual skill-based goals. Evidence will include the training materials, agenda, and attendance.  By January 31, 2024, the district will submit the results of an internal review of five special education student records for evidence that the IEP and TPF include appropriate measurable post-secondary goals and measurable annual skill-based goals related to the student's transition service needs. The summary of results will include the number of records found compliant and those found noncompliant. For any records identified with noncompliance, the district will conduct a root causes analysis and identify appropriate corrective action. | | |
| **Progress Report Due Date(s):**  10/15/2023  01/31/2024 | | |
| FOCUSED MONITORING REVIEW  **CORRECTIVE ACTION PLAN** | | |

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| **Criterion & Topic:**  SE 9 Timeline for determination of eligibility | | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  A review of student records and staff interviews indicated that within 45 school-working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, the district does not consistently provide the parent with the proposed IEP and proposed placement for eligible students. | | |
| **Description of Corrective Action:**  The root cause that the district does not consistently provide the parent with the proposed IEP and proposed placement for eligible students within 45 school-working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation is due to the following:   * The district’s procedure for scheduling meetings has been to begin the process of scheduling meetings once all evaluations were completed. While effective at one time, this process is no longer effective and now causes scheduling difficulties for school staff, evaluators, and parents to get the meetings on their schedules with enough time to meet and write the final IEP by the 45th school-working day. This process was also exacerbated by an increase in referrals; staff and student attendance issues, particularly with COVID related absences; the availability of qualified personnel to perform evaluations and the persistent backlog of evaluations to which these factors contributed.   To correct this, the district will:   * Revise the procedure for scheduling meetings when there is an initial evaluation or re-evaluation involved. These new procedures will require that staff begin the process of scheduling meetings upon receipt of the signed Evaluation Consent Form. Clerical paraprofessionals will continue to perform outreach to parents and staff to find a date that is best and falls prior to the 40th day to allow time for the IEP to be presented to the parents for signature. Upon receipt of signed consent, the secretary will reach out to the parents and teachers and will schedule the meeting to occur prior to the 40th school-working day to allow for enough time to get the IEP to the parents prior to the 45th day. If we cannot reach the parents to determine a best time to meet, the district will generate and send an invitation to the parent so that a meeting time is booked, and all team members can be informed. Procedures will also include documentation of all rescheduled meetings indicating the reason and the name/role of the person requesting the change. * Review the updated procedure and train all necessary staff, particularly coordinators of special education, and special Education clerical paraprofessional staff on the proper implementation of the procedure. * Monitor timelines using the district's special education management software, and through spot reviews of individual student records to ensure that the IEP is presented to the parents within 45 school-working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation. | | |
| **Title/Role(s) of Responsible Persons:**  Director, Assistant Director, Special Education Coordinators | | **Expected Date of Completion:**  02/29/2024 |
| **Evidence of Completion of the Corrective Action:**  By October 1, 2023, the district will submit a copy of the new written procedures to the Department.  By October 15, 2023, the district will submit evidence of staff training, including agenda, signed attendance, and any supporting materials.  By January 31, 2024, the district will report on a timeline report generated by the district's special education software.  By January 31, 2024, the district will report on a review five student records that include an initial or re-evaluation for compliance with the 45-day timeline. | | |
| **Description of Internal Monitoring Procedures:**  The Director and Assistant Director will annually review procedures with special education staff. On an on-going basis, the Director and Assistant Director will review data generated by the special education software, including timeline reports. On a quarterly basis the director will review a sample of individual student records. If any non-compliance is identified, the district will work with the individual staff as needed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility | **Corrective Action Plan Status:** Approved  **Status Date:** 07/03/2023  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By October 15, 2023, the district will submit updated procedures that ensure within 45 school-working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation, the district consistently provides the parent with the proposed IEP and proposed placement for students eligible for special education services. Updates will be based on the results of the district's root cause analysis.  By October 15, 2023, the district will submit evidence of training for all special education coordinators and special education clerical staff on the procedures. Evidence will include training materials, agendas, and attendance.  By January 31, 2024, the district will submit the results of an internal review of five special education student records with a recent initial or re-evaluation meeting for evidence that the parent was provided the proposed IEP and proposed placement within 45 days of the district's receipt of the parent's written consent for evaluation. The summary of results will include the number of records found compliant and those found noncompliant. For any records identified with noncompliance, the district will conduct a root causes analysis and identify appropriate corrective action. | | |
| **Progress Report Due Date(s):**  10/15/2023  01/31/2024 | | |