

**Groton-Dunstable Regional School District**

**Tiered Focused Monitoring Report**

**Continuous Improvement and Monitoring Plan**

**For** **Group A Universal Standards**

**Tier Level** **1**

**Date of Onsite Visit:** **May 10, 2023**

**Date of Final Report: September 7, 2023**

**Department of Elementary and Secondary Education Onsite Team Members:**

**Charles Agong, Chairperson**

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**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**

**TIERED FOCUSED MONITORING REPORT**

**Groton-Dunstable Regional School District**

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**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**

# **TIERED FOCUSED MONITORING REPORT INTRODUCTION**

During the 2022-2023 school year, Groton-Dunstable Regional School District participated in a Tiered Focused Monitoring Review (TFM) conducted by the Department’s Office of Public School Monitoring (PSM). The purpose of the Tiered Focused Monitoring Review is to monitor compliance with regulatory requirements focusing on special education and civil rights.

Each school district, charter school, vocational school, and virtual school undergoes a Tiered Focused Monitoring Review every three years. The statewide Tiered Focused Monitoring cycle is posted at <<https://www.doe.mass.edu/psm/tfm/6yrcycle.html>>.

Regularly monitored standards are divided into two groups, known as Group A Universal Standards and Group B Universal Standards. Districts and schools are monitored on an alternate set of Universal Standards every three years.

Group A Universal Standards address:

* Student identification
* IEP development
* Programming and support services
* Equal opportunity

Group B Universal Standards address:

* Licensure and professional development
* Parent/student/community engagement
* Facilities and classroom observations
* Oversight
* Time and learning
* Equal access

The Department has also reserved a specific set of criteria, collectively known as Targeted Standards, employed if LEA or school level risk assessment data indicate there is a potential issue; the identified Targeted Standards are assessed in addition to the Universal Standards.

Universal Standards and Targeted Standards are aligned with the following regulations:

Special Education (SE)

* Selected requirements from the federal Individuals with Disabilities Education Act (IDEA-2004); the federal regulations promulgated under that Act at 34 CFR Part 300; M.G.L. c. 71B, and the Massachusetts Board of Education’s Special Education regulations (603 CMR 28.00), as amended September 20, 2022.

Civil Rights Methods of Administration and Other General Education Requirements (CR)

* Selected federal civil rights requirements, including requirements under the Every Student Succeeds Act (ESSA); Title VI of the Civil Rights Act of 1964; the Equal Educational Opportunities Act of 1974; Title IX of the Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; and Title II of the Americans with Disabilities Act of 1990, together with selected state requirements under M.G.L. c. 76, Section 5 as amended by Chapter 199 of the Acts of 2011 and M.G.L. c. 269 §§ 17 through 19.
* Selected requirements from the Massachusetts Board of Education’s Physical Restraint regulations (603 CMR 46.00).
* Selected requirements from the Massachusetts Board of Education’s Student Learning Time regulations (603 CMR 27.00).
* Various requirements under other federal and state laws.

**PSM Team:**

Depending upon the size of a school district and the number of special education programs to be reviewed, a team of one to four Department staff members conducts onsite activities over one to five days in a school district or charter school.

**Tier Level:**

The level of monitoring varies based on tier designation, aligning supports to the level of need and ensuring that districts and schools with greater needs receive appropriate supports to make sustained improvements.

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| Tier | Title | Description |
| 1 | Self-Directed Improvement | Data points indicate no concern on compliance and student outcomes. |
| 2 | Directed Improvement | No demonstrated risk in areas with close link to student outcomes. |
| 3 | Corrective Action | Areas of concern include both compliance and student outcomes. |
| 4 | Cross-unit Support and Corrective Action | Areas of concern have a profound effect on student outcomes and ongoing compliance. |

For the 2022-2023 school year, the tier assignments are based on:

* Annual drop-out rate for students with disabilities
* Five-year cohort graduation rate for students with disabilities
* Public School Monitoring compliance data from the previous review
* Problem Resolution System data, specifically findings of noncompliance
* Special education SPP/APR compliance Indicator data for Indicators 4B, 9 & 10
	+ Indicator 4B: Significant discrepancy by race or ethnicity in removal of students with

 IEPs greater than 10 days

* + Indicator 9: Overall disproportionate representation of racial and ethnic groups identified

 as eligible for special education

* + Indicator 10: Disproportionate representation of racial and ethnic groups within specific

 disability categories

* Special education SPP/APR performance Indicator data for Indicators 5 & 6
	+ Indicator 5: Education Environments (6-21)
	+ Indicator 6: Preschool Environments
* Significant Disproportionality data 2021-2022 & 2022-2023

Tiering adjustments may be made for districts engaged in work with the Department’s Statewide System of Support and have schools identified as requiring assistance and intervention. Tiering assignments may also be adjusted for schools and districts unable to remedy noncompliance within one year of the previous TFM review, as well as for charter schools requiring additional oversight based on conditions of their charter.

**Report: For Tier 1 & 2 Tiered Focused Monitoring Reviews**

Following the onsite visit, the PSM team holds an informal exit meeting to summarize the review for the superintendent or charter school leader. Within approximately 20 business days of the onsite visit, the chairperson forwards the TFM Feedback Summary that includes findings from the Tiered Focused Monitoring Review to the superintendent or charter school leader.

As part of the reporting process, all districts/charter schools in Tiers 1 and 2 then develop a Continuous Improvement and Monitoring Plan (CIMP) for any criteria receiving a rating of "Partially Implemented," "Not Implemented," and “Implementation in Progress.” The CIMP is due to the Department within 20 business days after the issuance of the Feedback Summary and is subject to the Department’s review and approval. The CIMP outlines an action plan, identifies the success metric, describes the measurement mechanism, and provides a completion timeframe to bring those areas into compliance with the controlling statute or regulation. Department staff provide support and assistance to districts and charter schools on the development of a CIMP.

Once the CIMP is approved, it is issued as the Final Report.

Department staff also provide ongoing technical assistance as the school or district is implementing the approved CIMP. **School districts and charter schools 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 Feedback Summary.**

For more information regarding the TFM Review Process, including district and parent resources, please visit < <https://www.doe.mass.edu/psm/tfm/default.html>>.

# **TIERED FOCUSED MONITORING FINAL REPORT**

**for Groton-Dunstable Regional School District**

The Massachusetts Department of Elementary and Secondary Education conducted a Tiered Focused Monitoring Review at Groton-Dunstable during the week of May 8, 2023, to evaluate the implementation of Group A Universal Standards in the program areas of special education, civil rights, and other related general education requirements. The team appreciated the opportunity to interview staff and parents, to observe classroom facilities, and to review the programs underway in the district.

In preparing this report, the team reviewed extensive written documentation regarding the operation of the district's programs, together with information gathered by means of the following Department program review methods:

**Self-Assessment Phase:**

* District review of special education and civil rights documentation for required elements including document uploads.
* District review of a sample of special education student records selected across grade levels, disability categories, and levels of need.
* District review of student records related to the Indicator Data Collection for Indicators 11, 12, and 13.
* Upon completion of the self-assessment, the district submitted the data to the Department for review.

**On-site Verification Phase:**

* Interviews of administrative staff consistent with those criteria selected for onsite verification.
* Interview of parent advisory council (PAC) representatives.
* Review of additional documents for special education and civil rights.
* Surveys of parents of students in special education: Parents of students in special education were sent a survey that solicited information regarding their experiences with the district’s implementation of special education programs, related services, and procedural requirements.
* Review of student records for special education: The Department selected a sample of student records from those the district reviewed as part of its self-assessment, as well as records chosen by the Department from the special education student roster. The onsite team conducted this review, using standard Department procedures, to determine whether procedural and programmatic requirements have been met.
* Observations of classrooms and other facilities.

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| The Tiered Focused Monitoring Report includes those criteria that were found by the team to be implemented in a “Commendable” manner, as well as criteria receiving a rating of "Partially Implemented," "Not Implemented," and “Implementation in Progress.” (Refer to the “Definition of Compliance Ratings” section of the report.) Tiered Focused Monitoring Reports do not include criteria receiving a rating of “Implemented” or “Not Applicable.” This will allow the district/school and the Department to focus their efforts on those areas requiring corrective action. Districts are expected to incorporate the corrective actions into their district and school improvement plans, including their professional development plans. |
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# **DEFINITION OF COMPLIANCE RATINGS**

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| **Commendable** | Any requirement or aspect of a requirement implemented in an exemplary manner significantly beyond the requirements of law or regulation. |
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| **Implemented** | The requirement is substantially met in all important aspects. |
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| **Implementation in Progress** | This rating is used for criteria containing new or updated legal requirements; the district 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. |
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| **Partially Implemented** | The requirement, in one or several important aspects, is not entirely met. |
|  |
| **Not Implemented** | The requirement is totally or substantially not met. |
| **Not Applicable**  | The requirement does not apply to the school district or charter school. |

**Groton-Dunstable Regional School District**

# **SUMMARY OF COMPLIANCE CRITERIA RATINGS**

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|  | **Universal Standards** **Special Education** | **Universal Standards** **Civil Rights and Other General Education Requirements** |
| **IMPLEMENTED** | SE 1, SE 2, SE 3, SE 3A, SE 6,SE 7, SE 9, SE 9A, SE 10, SE 11, SE 12, SE 13, SE 17, SE 18A,SE 19, SE 20, SE 22, SE 25, SE 26, SE 29, SE 34, SE 35, SE 37, SE 39, SE 40, SE 41, SE 42, SE 43, SE 48, SE 49 | CR 13, CR 14, CR 18 |
| **PARTIALLY****IMPLEMENTED** | SE 8, SE 14 |  |
| **NOT** **IMPLEMENTED** | None |  |
| **NOT** **APPLICABLE** | SE 38 |  |

The full list of criteria and information regarding the requirements can be found in Appendix B of the Tiered Focused Monitoring Toolkit available at < <https://www.doe.mass.edu/psm/resources/tfm-toolkit.docx>>.

# **SUMMARY OF INDICATOR DATA REVIEW**

As part of the self-assessment process for districts or charter schools undergoing a review for Group A Universal Standards, the PSM team reviewed the results of Indicator data submissions for Indicators 11, 12, and 13. The Indicator review is completed prior to the onsite visit and helps inform the scope of the onsite review. For any Indicator data noncompliance found, the district or charter school must develop and implement corrective action that includes correcting noncompliance for the individual students affected by it, addressing the root cause and underlying reasons for the identified noncompliance, and reviewing additional records as evidence that the issues have been corrected and that requirements are being met. The Office of Special Education Programs (OSEP) requires correction of noncompliance within one year of the finding.

The results of the district’s submissions for these Indicators are as follows:

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|  | **Compliant** | **Non-Compliant** | **Not Applicable** |
| **Indicator 11 – Initial** **Evaluation Timelines** |   X |   |  |
| **Indicator 12 – Early** **Childhood Transition** |  |   X |  |
| **Indicator 13 –** **Secondary Transition** |  |   X |  |

The district submitted evidence of corrective action, including an additional data set, to address the non-compliance identified for Indicators 12 and 13. The submissions have been reviewed and approved by the Department; no further action is required.

| **CONTINUOUS IMPROVEMENT AND MONITORING PLAN** |
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| **Improvement Area** **1** |
| **Criterion:** SE 8 - IEP Team composition and attendance |
| **Rating:** Partially Implemented |
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| **Description of Current Issue:** A review of student records and staff interviews indicated that when a Team member does not attend the Team meeting, the district does not always follow the required procedures, including the following: * Documenting, in writing, that the district and the parent agree the attendance of the Team member is not necessary because the member's area of the curriculum or related services is not being modified or discussed; or
* Documenting, in writing, the district and the parent agree to excuse a required Team member's participation and the excused member provides written input into the development of the IEP to the parent and the IEP Team prior to the meeting.
 |
| **LEA Outcome:** Groton Dunstable Regional School District will ensure that if a Team member does not attend a Team meeting, the district will always implement all the required procedures, including the following: * Document, in writing, that the district and the parent agree the attendance of the Team member is not necessary because the member's area of the curriculum or related services is not being modified or discussed; or
* Document, in writing, that the district and the parent agree to excuse a required Team member's participation and the excused member provides written input into the development of the IEP to the parent and the IEP Team prior to the meeting.
 |
| **Action Plan:** By September 29, 2023, the Groton Dunstable Regional School District will revise the IEP Team meeting attendance procedures and the internal monitoring system to ensure IEP Teams follow the required procedures. By November 2, 2023, the district will provide training to all relevant special education staff on the required Team meeting attendance procedures and internal monitoring system.  By January 12, 2024, the district will review a representative sample of ten student records to determine if the requirements of IEP Team meeting attendance procedures are implemented. The district will conduct a root cause analysis for any identified noncompliance and implement appropriate corrective actions. |
| **Success Metric:** By January 2024 and beyond, when a Team member is absent, the district will follow the appropriate IEP Team meeting attendance procedures. Evidence:* Updated procedures
* Description of internal monitoring system
* Training agenda, materials, and sign in sheets
* Results of record review
* Root cause analysis and corrective actions (if necessary)
 |
| **Measurement Mechanism:** Continuing after the completion due date, the Director of Student Services will provide training to all relevant special education staff at least annually on IEP Team meeting attendance procedures and the internal monitoring process. Additionally, the district will conduct quarterly internal monitoring to ensure the IEP Team meeting attendance procedures are implemented. For any noncompliance identified, the district will conduct a root cause analysis and implement appropriate corrective actions. |
| **Completion Timeframe:** 01/12/2024 |
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| **Improvement Area 2** |
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| **Criterion:** SE 14 - Review and revision of IEPs |
| **Rating:** Partially Implemented |
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| **Description of Current Issue:** A review of student records and staff interviews indicated that, immediately following the development of the IEP, the district does not always provide the parents with the proposed IEP and proposed placement. |
| **LEA Outcome:** Groton Dunstable Regional School District will ensure that parents/guardians are provided with the proposed IEP and proposed placement immediately following the development of the IEP. |
| **Action Plan:** By September 29, 2023, the Groton Dunstable Regional School District will revise the IEP provision procedures and internal monitoring system to ensure parents/guardians are provided with the proposed IEP and proposed placement immediately following the development of the IEP. By November 2, 2023, the district will provide training to all relevant special education staff on the updated IEP provision procedures and internal monitoring system.  By January 12, 2024, the district will review a representative sample of ten student records to determine if the requirements are being met. The district will conduct a root cause analysis for any identified noncompliance and implement appropriate corrective actions. |
| **Success Metric:** By January 2024 and beyond, the district will ensure parents/guardians are provided with the proposed IEP and proposed placement immediately following the development of the IEP. Evidence:* Updated procedures
* Description of internal monitoring system
* Training agenda, materials, and sign in sheets
* Results of record review
* Root cause analysis and corrective actions (if necessary)
 |
| **Measurement Mechanism:** Continuing after the completion due date, the Director of Student Services will provide training to all relevant special education staff on the IEP provision procedures. The district will also implement quarterly internal monitoring to ensure the procedures are implemented. For any noncompliance identified, the district will conduct a root cause analysis and implement appropriate corrective actions. |
| **Completion Timeframe:** 01/12/2024 |
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