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

##### PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Special Education Agency: Center for Human Development, Inc.

Program Review Onsite Year: 2013-2014

**Programs under review for the agency:**

PACE Center 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 01/30/2014.

**Mandatory One-Year Compliance Date:** **01/30/2015**

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

| **Criterion** | **Criterion Title** | **PR Rating** |
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| PS 12.1 | New Staff Orientation and Training | Partially Implemented |
| PS 12.2 | In-Service Training Plan and Calendar | Partially Implemented |
| PS 16.7 | Preventive Health Care | Partially Implemented |

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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 |
| **Department Program Review Findings:** While documentation indicates new staff receive all required training and are not assigned direct care duties until such time, a review of staff records and interviews indicate that new staff do not participate in training on the program's philosophy, organization, program, practices or goals and mandated training on topics 12.2 a-e prior to their assignment of direct care duties with students. |
| **Description of Corrective Action:** Our revised New Staff Orientation and Training Policy states that all new full time and part time staff are fully trained on the program's philosophy, organization, program practices and goals, and all other mandated topics prior to their assignment of direct care duties with students. Mandated topics include Reporting Abuse and Neglect of Students, Disciplinary and Behavior Management Procedures, Runaway Policy, Emergency Procedures including Evacuation and Emergency Drills and Civil Rights Responsibilities including Discrimination and Harrassment (12.2 a-e). |
| **Title/Role(s) of Responsible Persons:**The Principal, Michael McCarthy, is responsible for training all new full time and part time staff. | **Expected Date of Completion:**03/07/2014 |
| **Evidence of Completion of the Corrective Action:**The anticipated result of this Corrective Action Plan is that all new staff will be completely trained in all required areas before they work directly with students. The evidence of completion for this Corrective Action Plan will be the Policy and Procedures Training Sign-In Sheet complete with staff signatures, training topics, number of training hours and dates of training. |
| **Description of Internal Monitoring Procedures:** The Internal Monitoring Process will be the Principal conducting quarterly reviews and using a tracking sheet complete with Principal's initials and date of of quarterly review of mandated staff trainings. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** PS 12.1 New Staff Orientation and Training | **Corrective Action Plan Status:** Approved **Status Date**: 03/06/2014 |
| **Basis for Partial Approval or Disapproval:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** In the 05/15/14 progress report, PACE Center Day Program must submit the revised new staff orientation training policy, the agenda and sign-in sheets for any new staff that were hired prior to this submission date. In the 08/07/14 progress report, PACE Center Day Program must submit the results of the quarterly review conducted by the Principal. |
| **Progress Report Due Date(s):** 05/15/201408/07/2014 |

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| **Criterion & Topic:** PS 12.2 In-Service Training Plan and Calendar | **PR Rating:** Partially Implemented |
| **Department Program Review Findings:** While documentation indicates all staff are offered on average at least two hours per month and participate in annual in-service training, a review of staff records and interviews indicate that all staff do not participate in training annually and training specific to medication side effects has not been offered. |
| **Description of Corrective Action:** The In Service training calendar has been revised to include the medication side effects training by a consulting registered nurse. To ensure that all staff are trained regarding medication side effects a training is scheduled for April 2014.The consulting nurse is also available on an on-call basis to inform school staff of the effects of specific medications when a new student arrives. The training is to be conducted annually and in the event that staff miss the training the program will ensure that staff are trained as soon as possible by the consulting nurse. |
| **Title/Role(s) of Responsible Persons:**The Principal, Michael McCarthy, and the consulting nurse, Bobbie Jo Murray. | **Expected Date of Completion:**05/07/2014 |
| **Evidence of Completion of the Corrective Action:**The evidence of completion for this corrective action is the revised In-Service calendar and the proof that the consulting nurse is providing the medication side effects training is the signature of each staff on the sign-in sheet for the training complete with the title, length and date of training and signature of the consulting nurse as well. |
| **Description of Internal Monitoring Procedures:** The internal monitoring process will be quarterly reviews by the Principal and the use of a tracking sheet complete with the Principal's initials and date of quarterly review of medication side effects training and any other trainings conducted by the consulting nurse. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** PS 12.2 In-Service Training Plan and Calendar | **Corrective Action Plan Status:** Partially Approved **Status Date**: 03/06/2014 |
| **Basis for Partial Approval or Disapproval:** While PACE Day Program indicated training specific to medication side effects will be offered annually by the consulting nurse, how the program will ensure that all staff are offered training annually on mandated in-service training topics as well as required additional topics for appropriate staff based on their job responsibilities to include teaching staff was not indicated as required. |
| **Department Order of Corrective Action:**PACE Day Program must submit how the program will ensure that all staff are offered training annually on mandated in-service training topics as well as required additional topics for appropriate staff based on their job responsibilities to include teaching staff. |
| **Required Elements of Progress Report(s):** In the 05/15/2014 progress report, PACE Day Program must submit how the program will ensure that all staff are offered training annually on mandated in-service training topics as well as required additional topics for appropriate staff based on their job responsibilities to include teaching staff. In addition, the program must submit the agenda and sign-in sheet for the medication side effect training conducted in April, 2014 by the consulting nurse. In the 08/07/14 progress report, the program must submit evidence of the quarterly review conducted by the Principal. |
| **Progress Report Due Date(s):** 05/15/201408/07/2014 |

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| **Criterion & Topic:** PS 16.7 Preventive Health Care | **PR Rating:** Partially Implemented |
| **Department Program Review Findings:** A review of student records indicates that all students do not have current dental examinations and efforts of obtaining such documentation are not evident. In addition, documentation of vision and hearing screenings was not found for all students. |
| **Description of Corrective Action:** In a concerted effort to ensure that all students have the required current medical screenings a four step approach will be taken. First, letters to parents/guardians will be sent out every quarter to follow up on proof of medical screening requests. Second, an up to date excel sheet with the current status of all student medical screenings will be created. Third, the excel sheet will be passed to the consulting nurse for further follow up and set up medical appointments when necessary. Fourth, students who require medical appointments to bring them into compliance will be transported to a local clinic for processing. |
| **Title/Role(s) of Responsible Persons:**The Principal, Michael McCarthy and the consulting nurse, Bobbie Jo Murray. | **Expected Date of Completion:**06/07/2014 |
| **Evidence of Completion of the Corrective Action:**Evidence of completion of this corrective action will be the quarterly letters sent to parents and/or guardians, the Excel Sheet with the students' current status, the revised Excel Sheet complete with the consulting nurse's follow up and the appropriate paperwork on students who were taken to the local clinic. |
| **Description of Internal Monitoring Procedures:** The internal monitoring process will be on file letters to parents/guardians requesting medical screening information, quarterly updating the medical screening status of all students complete with consulting nurse follow up revisions and on file paperwork from the local medical clinic. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** PS 16.7 Preventive Health Care | **Corrective Action Plan Status:** Approved **Status Date**: 03/06/2014 |
| **Basis for Partial Approval or Disapproval:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** In the 05/15/14 progress report, PACE Center Day Program must submit evidence of current dental examinations and/or efforts of obtaining such documentation and evidence of current hearing and vision screenings for students in grade 12 or age 18. In the 08/07/14 progress report, PACE Center Day Program must submit evidence of the quarterly review conducted by the Principal and the consulting nurse. |
| **Progress Report Due Date(s):** 05/15/201408/07/2014 |