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

##### PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Special Education Agency: New England Adolescent Research Institute, Inc.

Program Review Onsite Year: 2016-2017

**Programs under review for the agency:**

NEARI 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 08/29/2017.

**Mandatory One-Year Compliance Date:** **08/29/2018**

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

| **Criterion** | **Criterion Title** | **PR Rating** |
| --- | --- | --- |
| PS 9.1(a) | Student Separation Resulting from Behavior Support | Implementation In Progress |
| PS 9.4 | Physical Restraint | Implementation In Progress |
| PS 11.1 | Staff Policies and Procedures Manual | Partially Implemented |
| PS 12.1 | New Staff Orientation and Training | Implementation In Progress |
| PS 12.2 | In-Service Training Plan and Calendar | Implementation In Progress |

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| PROGRAM REVIEW**CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:** PS 9.1(a) Student Separation Resulting from Behavior Support | **PR Rating:** Implementation In Progress |
| **Department Program Review Findings:** A review of documentation and interviews revealed that the policy on Student Separation Resulting from Behavior Support is not in the proper format that is required of all schools, therefore this policy must be revised to follow the appropriate format and only include the information specific to those elements listed. |
| **Description of Corrective Action:** Policy will be revised to follow the appropriate format and only include the information specific to those elements listed. |
| **Title/Role(s) of Responsible Persons:**Craig Latham, Executive DirectorSteve Dion, Ed Administrator | **Expected Date of Completion:**12/22/2017 |
| **Evidence of Completion of the Corrective Action:**Submission of updated policy |
| **Description of Internal Monitoring Procedures:** not applicable |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** PS 9.1(a) Student Separation Resulting from Behavior Support | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** For the October 31, 2017 progress report, the program must submit the updated Student Separation Resulting from Behavior Support policy, consistent with requirements in 603 CMR 46.00, in the ESE approved format. |
| **Progress Report Due Date(s):** 10/31/2017 |

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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 revealed that the Physical Restraint Policy and Procedures do not meet all elements of this requirement to show compliance with the revised Physical Restraint Regulations that went into effect in January 2016. |
| **Description of Corrective Action:** Physical Restraint Policy and Procedures will meet all elements of this requirement to show compliance with the revised Physical Restraint Regulations that went into effect in January 2016.Staff to be retrained upon DESE approval of policy. |
| **Title/Role(s) of Responsible Persons:**Craig Latham, Executive DirectorSteve Dion, Ed Administratior | **Expected Date of Completion:**12/22/2017 |
| **Evidence of Completion of the Corrective Action:**Submission of updated policy and staff training logs |
| **Description of Internal Monitoring Procedures:** Program Directors are responsible for making sure all employees receive mandated trainings. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** PS 9.4 Physical Restraint | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/02/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:** The revised policy must be approved prior to training; the program proposes submitting evidence of training at the same time as the revised policy (in 12.1 and 12.2). |
| **Department Order of Corrective Action:**The program must submit the revised Physical Restraint Policy and Procedures by October 31, 2017. |
| **Required Elements of Progress Report(s):** For the October 31, 2017 progress report the program must submit an updated Physical Restraint Policy, including all elements required in 603 CMR 46.00, in the ESE approved format. |
| **Progress Report Due Date(s):** 10/31/2017 |

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| PROGRAM REVIEW**CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:** PS 11.1 Staff Policies and Procedures Manual | **PR Rating:** Partially Implemented |
| **Department Program Review Findings:** A review of staff records and interviews indicated that the program does not follow its own procedures for the evaluation of staff. While staff evaluations were found in staff records for past years, none were found for the last two school years. |
| **Description of Corrective Action:** Program is revising it's policy regarding staff evaluations and will follow this policy in the future. |
| **Title/Role(s) of Responsible Persons:**Craig Latham, Executive DirectorSteve Dion, Ed Administrator | **Expected Date of Completion:**12/22/2017 |
| **Evidence of Completion of the Corrective Action:**Submission of revised policy. |
| **Description of Internal Monitoring Procedures:** Program Directors will ensure that all employees are evaluated annually. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** PS 11.1 Staff Policies and Procedures Manual | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** For the December 22, 2017 progress report the program must submit its revised policy regarding staff evaluations.For the June 30, 2018 progress report the program must submit the names and positions of all staff and the most recent date of their signed performance evaluation that is maintained in their personnel record. |
| **Progress Report Due Date(s):** 01/26/201806/30/2018 |

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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:** Implementation In Progress |
| **Department Program Review Findings:** A review of documentation, interviews and staff records revealed that the policy and procedures on Physical Restraints does not meet all of the requirements of this criterion that went into effect in January 2016 when the Physical Restraint Regulations were revised. Once the policy is approved by the Department, all staff will need to be re-trained. |
| **Description of Corrective Action:** Newly hired staff will be trained in the updated restraint policy upon DESE approval. |
| **Title/Role(s) of Responsible Persons:**Craig Latham, Executive DirectorSteve Dion, Ed Administrator | **Expected Date of Completion:**12/22/2017 |
| **Evidence of Completion of the Corrective Action:**Submission of staff training logs. |
| **Description of Internal Monitoring Procedures:** Program Directors will be responsible for ensuring that all staff are trained in the updated policy. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** PS 12.1 New Staff Orientation and Training | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** For the December 22, 2017 progress report and following approval of the revised Physical Restraint policy by ESE, the program must submit: (1) list of the names and roles of all staff hired in the program since the program review with their dates of hire; and (2) dates of training, training materials and staff attendance sheets documenting that all newly hired staff have been trained in the updated Physical Restraint policy. |
| **Progress Report Due Date(s):** 01/26/2018 |

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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:** Implementation In Progress |
| **Department Program Review Findings:** A review of documentation, interviews and staff records revealed that the policy and procedures on Physical Restraints does not meet all of the requirements of this criterion that went into effect in January 2016 when the Physical Restraint Regulations were revised. Once the policy is approved by the Department, all staff will need to be re-trained. |
| **Description of Corrective Action:** Staff will be trained in the updated restraint policy upon DESE approval. |
| **Title/Role(s) of Responsible Persons:**Craig Latham, Executive DirectorSteve Dion, Ed Administrator | **Expected Date of Completion:**12/22/2017 |
| **Evidence of Completion of the Corrective Action:**Submission of staff training logs. |
| **Description of Internal Monitoring Procedures:** Program Directors will be responsible for ensuring that all staff are trained in the updated policy. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** PS 12.2 In-Service Training Plan and Calendar | **Corrective Action Plan Status:** Approved **Status Date:** 10/02/2017 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** For the December 22, 2017 progress report and following approval of the revised Physical Restraint policy by ESE, the program must submit: (1) list of the names and roles of all staff working with students and (2) dates of training, training materials and staff attendance sheets documenting that all staff have been trained in the updated Physical Restraint policy. |
| **Progress Report Due Date(s):** 01/26/201806/30/2018 |