MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

Public School Monitoring

FOCUSED MONITORING REVIEW CORRECTIVE ACTION PLAN

Charter School or District: Springfield FMR Onsite Year: 2018-2019

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 04/23/2019.*

Mandatory One-Year Compliance Date: 04/23/2020

Summary of Required Corrective Action Plans in this Report

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| **Criterion** | **Criterion Title** | **FMR Rating** |
| SE 6 | Determination of transition services | Partially Implemented |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 9 | Timeline for determination of eligibility | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 34 | Continuum of alternative services and placements | Partially Implemented |
| SE 40 | Instructional grouping requirements for students aged five and older | Partially Implemented |

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| **Criterion** | **Criterion Title** | **FMR Rating** |
| SE 41 | Age span requirements | 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:**  At both Springfield Public Schools and Springfield Empowerment Zone, a review of student records indicated that Transition Planning Forms (TPFs) and IEPs do not consistently include all required elements, such as: 1) the student's preferences and interests in the vision statement; and   1. measurable goals designed to prepare the student, both academically and functionally, to transition to post-secondary activities. Additionally, action plans in the TPF do not consistently include the following: 1) course of study or specific courses needed that will help the student reach his or her post-secondary vision; 2) employment opportunities and/or specific skills that will help the student reach his or her post-secondary vision; and 2. community experiences and preparation for post school adult living. | | |
| **Description of Corrective Action:**  The district has conducted a root cause analysis and determined varying levels of training among applicable staff with regard to implementation of the required components of a TPF per this criterion. The district will conduct PD for Evaluation Team Leaders on June 19th and 20th of 2019 with an outside expert with at least 25% of this time focused on effective development of all aspects of a TPF. The Evaluation Team Leaders will take this information to applicable staff at their schools to implement a train the trainer model including the annual informal transition assessments to guide the process. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Anne Morris  Executive Director of Special Education and Related Services | | **Expected Date of Completion:** 04/23/2020 |
| **Evidence of Completion of the Corrective Action:**  Copies of agendas, attendance sheets and training materials for the June PD. Copies of attendance sheets and training materials for training for applicable staff at the building level. Copies of examples of informal assessments used and copies of completed quality control checklists. | | |
| **Description of Internal Monitoring Procedures:**  Sampling of student records and oversight of quality TPFS by Special Education Education Supervisors on quarterly basis using a standard checklist. | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 6 Determination of transition services | **Corrective Action Plan Status:** Approved  **Status Date:** 07/03/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  NOTE: While conducting a student record review in the district, the Department identified two student records with specific concerns related to SE 6 and the provision of FAPE. As part of their corrective action, the district was required to reconvene the Team for both students and make necessary revisions to the students' Transition Planning Forms (TPFs) and IEPs. On June 14, 2019, the district submitted evidence of the required corrective | | |

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| action demonstrating that the students? TPFs and IEPs now include all required elements. Documentation included Team meeting invitations; signed attendance sheets; revised Transition Planning Forms; amended IEPs; and the Notice of Proposed School District Action.  By August 30, 2019, submit evidence of training provided to Evaluation Team Leaders to ensure that Transition Planning Forms (TPFs) and IEPs include all required transition planning elements. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By November 22, 2019, submit evidence of training provided to applicable staff, by Evaluation Team Leaders, to ensure Transition Planning Forms (TPFs) and IEPs include all required transition planning elements. Include the training materials; samples of completed TPFs and IEP vision statements and annual goals; an agenda; and signed attendance sheet with staff name, role, and signature.  By January 31, 2020, submit the results of a review of student records to ensure that Transition Planning Forms (TPFs) and IEPs include all required transition planning elements. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance; and a description of additional corrective actions taken by the district to address any identified non- compliance.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) list of student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):**  08/30/2019  11/22/2019  01/31/2020 |

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

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| **Criterion & Topic:**  SE 8 IEP Team composition and attendance | | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  At Springfield Public Schools, student record review and interviews indicated that when one purpose of the Team meeting is to discuss placement, a person knowledgeable about placement options is not always present at the meeting. Specifically, when a student is transitioning from Springfield Public Schools to the Empowerment Zone, a representative from the Empowerment Zone is not always invited to the meeting to discuss the inclusive push-in special education services available at the Empowerment Zone. Without such representation, the student must receive services in a more restrictive setting until the Team reconvenes to discuss the student's placement. | | |
| **Description of Corrective Action:**  SPS and SZEP have conducted a root cause analysis and determined inconsistent transition planning with regard to variations in special education service models from elementary-middle and middle-high school. Training will be provided to Evaluation Team Leaders on June 19th and 20th of 2019 on exemplars of middle and high school service grids reflecting the individual offerings at each applicable school. Time will allocated during this PD period for Evaluation Team Leaders to have working groups with multigrade representation to further discuss and understand varying service delivery models throughout the district. Communication between sending and receiving Evaluation Team Leaders will be made available through a district transition day as well and ongoing discussions at monthly meetings. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Anne Morris  Executive Director of Special Education and Related Services | | **Expected Date of Completion:** 04/23/2020 |
| **Evidence of Completion of the Corrective Action:**  Agendas, attendance sheets and training materials for applicable staff. Copies of exemplar services grids for middle and high schools across the district. Agendas and attendance sheets for monthly meetings and transition day. | | |
| **Description of Internal Monitoring Procedures:**  Quarterly surveys of middle and high school Evaluation Team Leaders on regarding incoming service delivery grids matching school models. | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/03/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district proposed staff training and an internal monitoring process. However, the proposed internal monitoring prioritized matching service delivery grids to school models rather than ensuring appropriate services are provided based on student need in the least restrictive environment. | | |
| **Department Order of Corrective Action:**  Submit a detailed description of the internal monitoring process that ensures when one purpose of the Team meeting is to discuss placement, a person knowledgeable about placement options is present at the meetings to ensure appropriate services are provided | | |

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| to the student in the least restrictive environment. The procedures should include regular reviews of attendance sheets, in addition to service delivery girds. |
| **Required Elements of Progress Report(s):**  By August 30, 2019, submit a detailed description of the internal monitoring process that ensures when one purpose of the Team meeting is to discuss placement, a person knowledgeable about placement options is present at the meeting to ensure appropriate services are provided to the student in the least restrictive environment. The procedures should also include regular reviews of attendance sheets and service delivery grids.  By August 30, 2019, submit evidence of training provided to the Evaluation Team Leaders to ensure that when one purpose of the Team meeting is to discuss placement, a person knowledgeable about placement options is present at the meeting to ensure appropriate services are provided to the student in the least restrictive environment. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By January 31, 2020, submit the results of a review of student records to ensure that when one purpose of the Team meeting is to discuss placement, a person knowledgeable about placement options is present at the meeting to ensure appropriate services are provided to the student in the least restrictive environment. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance; and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) list of student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):**  08/30/2019  09/30/2019  01/31/2020 |

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| **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:**  At Springfield Public Schools, student record review indicated that the district does not consistently determine whether the student is eligible for special education within 45 school working days after receipt of the parent's written consent to an initial evaluation or re-evaluation. | | |
| **Description of Corrective Action:**  A root cause analysis of noncompliance of SE 9 indicates that current average caseload for Evaluation Team Leaders is over 175 which presents a significant obstacle to holding team meetings within 45 SWD. Another obstacle is the critical shortage of available school psychologists resulting in 3 vacancies in this area during the 2018-2019 school year.  Lastly, the district experienced an influx of over 500 students with IEPS from Puerto Rico due to the devastation of Hurricane Maria. Sixty eight percent of this population required full re-evaluation due to the incomplete records available to the district.  The district has resolved the Hurricane Maria influx issue and expects lower numbers of evaluations due to this particular variable. The district has approved, allocated and is the process of posting for additional Evaluation Team Leaders for 2019-2020 school year and is expanding its recruitment efforts for School Psychologists, thus, reducing caseloads insuring compliance with this criterion going forward. The district has also contracted with independent evaluators to help with testing needs until all positions are filled. To address the immediate concern of outstanding cases, the district has allocated and posted for summer work for Evaluation Team Leaders and School Psychologists to bring us closer to compliance. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Anne Morris  Executive Director of Special Education and Related Services | | **Expected Date of Completion:** 04/23/2020 |
| **Evidence of Completion of the Corrective Action:**  Copies of postings for additional positions for Evaluation Team Leaders and current vacancies for School Psychologists as well as postings for summer work. Copies of Scope of Service for Independent Contractors. Quarterly compliance reports per school. | | |
| **Description of Internal Monitoring Procedures:**  Special Education Supervisors will run monthly compliance reports for their schools and meet with applicable staff on any school who presents with significant and/or ongoing compliance issues. Supervisors will report out on their compliance concerns with Executive Director at department biweekly meetings. | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility | **Corrective Action Plan Status:** Approved  **Status Date:** 07/03/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By September 30, 2019, submit evidence of training provided to special education | | |

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| supervisors to ensure that the IEP Team determines eligibility within 45 school working days after receipt of the parent’s consent to evaluate. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By January 31, 2020, submit the results of a review of student records to ensure that the IEP Team determines eligibility within 45 school working days after receipt of the parent’s consent to evaluate. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance; and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) list of student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):**  09/30/2019  01/31/2020 |

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

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| **Criterion & Topic:**  SE 13 Progress Reports and content | | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  At both Springfield Public Schools and Springfield Empowerment Zone, student record review indicated that although parents receive progress reports at least as often as parents are informed of the progress of non-disabled students, progress reports do not always include written information on the student's progress towards the annual goals in the IEP. | | |
| **Description of Corrective Action:**  The district has conducted a root cause analysis and determined varying levels of training among applicable staff with regard to implementation of the required components of the Progress Report per this criterion. The district will conduct PD for Evaluation Team Leaders on June 19th and 20th of 2019 with an outside expert with at least 50% of this time focused on effective and informative content of progress reports. The Evaluation Team Leaders will take this information to applicable staff at their schools to implement a train the trainer model including use of exemplar progress reports directly linked to IEP goals and objectives. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Anne Morris  Executive Director of Special Education and Related Services | | **Expected Date of Completion:** 04/23/2020 |
| **Evidence of Completion of the Corrective Action:**  Copies of agendas, attendance sheets and training materials for the June PD. Copies of attendance sheets and training materials for training for applicable staff at the building level. Copies of exemplar progress reports and rubric used internal monitoring. | | |
| **Description of Internal Monitoring Procedures:**  Sampling of student records and oversight of the quality of progress reports by special education supervisors using a rubric for measure. | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 13 Progress Reports and content | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/03/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district proposed staff training and internal monitoring to ensure that progress reports include written information on the student's progress towards the annual goals in the IEP.  However, the district did not indicate the frequency of internal monitoring and district oversight. | | |
| **Department Order of Corrective Action:**  Submit a detailed description of the internal monitoring process that ensures progress reports include written information on the student's progress towards the annual goals in the IEP. Indicate the frequency of administrative progress report review. | | |
| **Required Elements of Progress Report(s):**  By August 30, 2019, submit a description of the district's internal monitoring process that ensures progress reports include written information on the student's progress towards | | |

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| the annual goals in the IEP. Indicate the frequency of administrative progress report review.  By August 30, 2019, submit evidence of training provided to Evaluation Team Leaders to ensure progress reports include written information on the student's progress towards the annual goals in the IEP. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By September 30, 2019, submit evidence of training provided to applicable staff, by Evaluation Team Leaders, to ensure progress reports include written information on the student's progress towards the annual goals in the IEP. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By January 31, 2020, submit the results of a review of student records to ensure that progress reports include written information on the student's progress towards the annual goals in the IEP. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance; and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) list of student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):**  08/30/2019  09/30/2019  01/31/2020 |

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

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  At Springfield Public Schools, an analysis of district data demonstrated that just over one- third (34.1%) of eligible students are enrolled in full-inclusion placements, a rate significantly lower than the state rate of 65.6%. Data and interviews indicated that the Team does not always consider the least restrictive environment for students, with consideration given to any potential harmful effect on the student or on the quality of services that he or she needs.  At both Springfield Public Schools and Springfield Empowerment Zone, student record review indicated that if a student is removed from the general education classroom at any time, the Team does not always state in the IEP why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  Root cause analysis of this criterion indicates a standardized approach to the narrative for Non-Participation Justification on the IEP leading to a unclear understanding of why a particular student is removed from the general education classroom. Applicable staff have been provided preliminary training on April 9, 2019 following the draft TFM report in this area. Follow up training will be provided to Evaluation Team Leaders in August 21st and 22nd of 2019 by an outside expert in preparation for the upcoming school year.  With regard to the statement referring to the district's lack of consideration for LRE and a lack of continuum of services and placements, please see response to SE #34. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Anne Morris  Executive Director of Special Education and Related Services | | **Expected Date of Completion:** 04/23/2020 |
| **Evidence of Completion of the Corrective Action:**  Copies of agendas, attendance sheets and training materials for both the April and August trainings. | | |
| **Description of Internal Monitoring Procedures:**  Oversight by Special Education Supervisors through random student record (IEP) samples | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/03/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district proposed staff training and internal monitoring to ensure that if a student is removed from the general education classroom at any time, the Team states in the IEP why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of | | |

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| supplementary aids and services, could not be achieved satisfactorily.  However, the district did not indicate the frequency of internal monitoring and district oversight. |
| **Department Order of Corrective Action:**  Submit a detailed description of the internal monitoring process that ensures if a student is removed from the general education classroom at any time, the Team states in the IEP why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Indicate the frequency of administrative record review. |
| **Required Elements of Progress Report(s):**  By August 30, 2019, submit the district’s detailed corrective action plan that ensures the Team always considers the least restrictive environment for students, with consideration given to any potential harmful effect on the student or on the quality of services that he or she needs. Include following: 1) the title/role(s) of the responsible person(s); 2) a descriptive narrative of the corrective action; 3) evidence of completion of corrective action; and 4) a description of the internal monitoring process.  By August 30, 2019, submit a description of the district’s internal monitoring process that ensures if a student is removed from the general education classroom at any time, the Team states in the IEP why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Indicate the frequency of administrative record review.  By September 30, 2019, submit evidence of training provided to Evaluation Team Leaders and applicable staff to ensure if a student is removed from the general education classroom at any time, the Team states in the IEP why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By January 31, 2020, submit the results of a review of student records to ensure if a student is removed from the general education classroom at any time, Team states in the IEP why the removal is considered critical to the student's program and the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Indicate the number of records reviewed; the number found to be compliant; an explanation of the root cause(s) for any continued non-compliance; and a description of additional corrective actions taken by the district to address any identified non-compliance.  \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) list of student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, with their role(s) and signature(s). |

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| **Progress Report Due Date(s):**  08/30/2019  09/30/2019  01/31/2020 |

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

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| **Criterion & Topic:**  SE 34 Continuum of alternative services and placements | | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  At Springfield Public Schools, interviews, document review, and analysis of district data indicated the district does not ensure that a continuum of services and alternative placements are available to meet the needs of all students with disabilities. Specifically, interviews and document review confirmed a lack of school-based social, emotional and behavioral (SEB) supports and services, leading to increased substantially separate and approved public day (APD) placements in order to address SEB needs. An analysis of district data confirmed that the district places students in more restrictive settings, such as substantially separate and APD settings, indicating a lack of a continuum of services and demonstrating a need for increased services in less restrictive environments. | | |
| **Description of Corrective Action:**  Based on district and statewide data, SPS challenges the accuracy of the finding and will provide supporting documentation going forward. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Anne Morris  Executive Director of Special Education and Related Services | | **Expected Date of Completion:** 04/23/2020 |
| **Evidence of Completion of the Corrective Action:**  See Above | | |
| **Description of Internal Monitoring Procedures:**  See Above | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 34 Continuum of alternative services and placements | **Corrective Action Plan Status:** Approved  **Status Date:** 07/03/2019  **Correction Status:** Corrected | |
| **Basis for Decision:**  On June 6, 2019, Springfield Public Schools provided evidence of district-wide supports, services, interventions, and accommodations for students with social, emotional and behavioral needs. Evidence included the following: training materials; behavior specialist schedules; Student/Teacher Assistance Team (STAT) referral process description; data collection tools; intervention documentation for two students; PBIS implementation description; and City Connects program materials.  Collectively, the most-recent information submitted by Springfield Public Schools demonstrates that the district implements school-based social, emotional and behavioral supports and services across grade levels. Based on the additional information submitted by the district the rating for SE 34 will be changed to Implemented in the Final Report and the comment will be removed. Therefore, corrective status is approved and no progress report is required. | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |
| **Progress Report Due Date(s):** | | |

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

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| **Criterion & Topic:**  SE 40 Instructional grouping requirements for students aged five and older | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  At both Springfield Public Schools and Springfield Empowerment Zone, document review and staff interviews indicated that instructional groupings for students scheduled outside of the general education classroom for 60% or less of their school schedules exceed the maximum student to staff ratio in the following:  School Instructional Group Student/Teacher/Aide Ratio Commerce High School ELA Intervention 11/12 20:1:2 Commerce High School ELA Intervention 11/12 17:1:2 Commerce High School STEM Intervention 15:1:1 Commerce High School Math Intervention 11/12 19:1:2 Commerce High School Math Intervention 11/12 17:1:2 Hiram L. Dorman School Reading 14:1:1 Hiram L. Dorman School Reading 15:1:1 Hiram  L. Dorman School Math 9:1:0 Hiram L. Dorman School Math 16:1:1 Hiram L. Dorman School Writing 9:1:0 Alfred M. Glickman School Language Learning Disabilities 5 13:1:1 Alfred M. Glickman School Language Learning Disabilities 2-4 13:1:1 Alfred M. Glickman School Pull-Out 4/5 16:1:1 Milton Bradley School Student Support 3 14:1:1 Milton Bradley School Student Support 4 15:1:1 Milton Bradley School Student Support 5 14:1:1  The following instructional groupings exceed the requirements for students scheduled outside of the general education classroom for 60% or more of their school schedules:  School Instructional Group Student/Teacher/Aide Ratio Springfield Approved Public Day High School US History I 9:1:0 Springfield Approved Public Day High School US History II 10:1:0 Springfield Approved Public Day High School Advisory 11:1:0 Springfield Approved Public Day High School Algebra Support 14:1:1 Springfield Approved Public Day High School Algebra Support 16:1:1 Springfield Approved Public Day High School Intro to Physics 13:1:1 Springfield Approved Public Day High School Intro to Physics 13:1:1 Springfield Approved Public Day High School Physical Ed. 9 9C 13:1:1 Springfield Approved Public Day High School Algebra I 9C 15:1:1 Springfield Approved Public Day High School World History 9 9C 14:1:1 | |
| **Description of Corrective Action:**  A root cause analysis of this non-compliant criterion indicates a lack of ongoing monitoring of instructional groupings by special education supervisors and school principals leading to placements made without clear knowledge of classroom enrollment numbers. Further analysis indicates a lack of understanding of the specific instruction grouping requirements 603 CMR 28.06 by school administrators.  Applicable school and district administrators will be provided training on 603 CMR 28.06 at the September Principal Meeting. Special Education Supervisors will oversee and collect quarterly classroom census reports using the DESE template to monitor compliance. | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Anne Morris  Executive Director of Special Education and Related Services | **Expected Date of Completion:** 04/23/2020 |
| **Evidence of Completion of the Corrective Action:** | |

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| Agenda, attendance sheets and training materials for the Principal Meeting and random samples of census reports. Special Education Supervisors will meet monthly with School Principals or designee to review instructional groupings at each school to monitor compliance, problem solve and submit waivers when deemed necessary. | |
| **Description of Internal Monitoring Procedures:**  Monthly meetings with building administrators or designee to review instructional groupings. | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | |
| **Criterion:**  SE 40 Instructional grouping requirements for students aged five and older | **Corrective Action Plan Status:** Approved  **Status Date:** 07/03/2019  **Correction Status:** Not Corrected |
| **Basis for Decision:** | |
| **Department Order of Corrective Action:** | |
| **Required Elements of Progress Report(s):**  By September 30, 2019, submit evidence of training provided to applicable staff to ensure that instructional groupings for eligible students scheduled outside of the general education classroom do not exceed the maximum student to staff ratios. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By September 30, 2019, submit an updated Special Education Instructional Grouping and Age Span document, which can be found in the WBMS Document Library, for all instructional groupings identified by the Department. Include increased instructional group size waiver(s), if applicable. | |
| **Progress Report Due Date(s):**  09/30/2019 | |

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

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| **Criterion & Topic:**  SE 41 Age span requirements | | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  At both Springfield Public Schools and Springfield Empowerment Zone, document review and staff interviews indicated that the ages of the youngest and oldest student in the following groupings differ by more than 48 months:  School Instructional Group Age Span Commerce High School STEM Intervention EI 49 months Commerce High School STEM Intervention P4 51 months Commerce High School STEM Intervention E2 56 months Commerce High School Math Intervention P6 58 months High School of Science and Technology MUDAWAR (all periods) 63 months Springfield Approved Public Day High School Sculpture 52 months Springfield Approved Public Day High School Intro to Physics 53 months Springfield Approved Public Day High School English 9 53 months Springfield Approved Public Day High School R & W Enrich 9A 53 months Springfield Approved Public Day High School Physical Education 9 9A 53 months Springfield Approved Public Day High School World History 53 months | | |
| **Description of Corrective Action:**  A root cause analysis of this non-compliant criterion indicates a lack of ongoing monitoring of age span requirements in instructional groupings by special education supervisors and school principals. Further analysis indicates a lack of understanding of age span requirements under 603 CMR 28.06 by school administrators.  Applicable school and district administrators will be provided training on 603 CMR 28.06 at the September 2019 Principal Meeting. Special Education Supervisors will oversee and collect quarterly classroom census reports using the DESE template to monitor compliance. | | |
| **Title/Role(s) of Responsible Persons:**  Dr. Mary Anne Morris  Executive Director of Special Education and Related Services | | **Expected Date of Completion:** 04/23/2020 |
| **Evidence of Completion of the Corrective Action:**  Agenda, attendance sheets and training materials for the Principal Meeting and random samples of census reports. Special Education Supervisors will meet monthly with School Principals or designee to monitor age span requirements at each school and submit waivers when deemed necessary. | | |
| **Description of Internal Monitoring Procedures:**  Monthly meetings with building administrators or designee to review age span requirements for each school. | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 41 Age span requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 07/03/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):** | | |

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| By September 30, 2019, submit evidence of training provided to applicable staff to ensure that the ages of the youngest and oldest student in any instructional grouping do not differ by more than 48 months. Include the training materials, agenda, and signed attendance sheet with staff name, role, and signature.  By September 30, 2019, submit an updated Special Education Instructional Grouping and Age Span document, which can be found in the WBMS Document Library, for all instructional groupings identified by the Department. Include increased age range waiver(s), if applicable. |
| **Progress Report Due Date(s):**  09/30/2019 |