**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**

**Public School Monitoring**

**FOCUSED MONITORING REVIEW CORRECTIVE ACTION PLAN**

**Charter School or District: TEC Connections Academy Commonwealth Virtual School District**

**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 06/05/2019.*

**Mandatory One-Year Compliance Date: 06/05/2020**

**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 9 | Timeline for determination of eligibility | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| CR 18 | Responsibilities of the school principal | Partially Implemented |

**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 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 Transition Planning Form do not always include appropriate measurable post-secondary goals and the IEP does not always include measurable annual skill-based goals related to the student's transition service needs. | | |
| **Description of Corrective Action:**  Therese will develop an internal monitoring data tracking system to ensure all transition requirements are met.  Therese will provide training to all special education staff working with students 14 and older regarding effective transition planning and appropriate measurable post-secondary goals based on the vision statement and IEP development around including measurable skill-based goals related to the student's transition service needs.  For students identified, IEP teams will reconvene to adjust each student's transition needs and include appropriate measurable post-secondary goals that are based on the student's transition service needs.  Therese will review a sample of student records across all grade levels to ensure compliance each semester. | | |
| **Title/Role(s) of Responsible Persons:**  Therese Green Special Education Director TECCA | | **Expected Date of Completion:** 06/05/2020 |
| **Evidence of Completion of the Corrective Action:**  -Staff meeting/training agenda, attendance sheets and training materials.  -For identified students IEP meeting attendance, updated Transition Planning Form, copy of updated post-secondary goals/vision statement, copy of updated annual skill-based goals  -Student record review results | | |
| **Description of Internal Monitoring Procedures:**  Therese will review student records every semester to ensure that every eligible student's Transition Planning Form includes appropriate measurable post-secondary goals and the IEP goals include measurable annual skill-based goals related to the student's transition service needs. | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 6 Determination of transition services | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/09/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district indicated they will develop an internal monitoring tracking system, train special education staff on transition planning, reconvene IEP Teams for identified | | |

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| students, and conduct student record reviews to ensure compliance. However, the district did not indicate follow-up actions to be taken should the record review identify non- compliance. |
| **Department Order of Corrective Action:**  Upon conducting a student record review, the district must also submit a root-cause analysis and a description of additional corrective actions taken to address any identified non-compliance, if applicable. |
| **Required Elements of Progress Report(s):**  By September 30, 2019, for the two students identified by the Department, submit evidence that IEP Teams reconvened to discuss transition planning. Revise each student's IEP Vision Statement and Transition Planning Form so that they include appropriate measurable post-secondary goals. Teams will also revise the annual post-secondary IEP goals so that they align to the student's IEP Vision statement and Transition Planning Form. Include meeting attendance, copy of updated IEP Vision Statement, updated Transition Planning Form, updated annual post-secondary IEP goals, summary notes and N1.  By December 3, 2019, submit evidence of training of applicable staff regarding transition planning and developing appropriate measurable post-secondary goals. The training will address the requirement that the IEP Vision Statement and Transition Planning Form must include appropriate measurable post-secondary goals and a student's annual post- secondary IEP goals must align to the student's IEP Vision Statement and Transition Planning Form. Include training agenda, attendance sheets, and training materials.  By March 2, 2020, submit evidence of the district's internal student record review results. 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  12/03/2019  03/02/2020 |

**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 indicated that the school does not consistently provide the parent a proposed IEP and proposed placement within forty-five school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation. | | |
| **Description of Corrective Action:**  -Therese will review and update Special Education procedures to make clear that all 45 day timelines are met.  -Therese will develop a timeline monitoring data tracking management spreadsheet that will include all relevant compliance dates.  -Therese will provide training to all special education staff on monitoring timelines to ensure that parents are in receipt of the IEP and proposed placement within 45 school working days of the signed consent.  -Therese will review a minimum of 15 student records across all grade levels to ensure compliance each semester. | | |
| **Title/Role(s) of Responsible Persons:**  Therese Green, Special Education Administrator TECCA | | **Expected Date of Completion:** 06/05/2020 |
| **Evidence of Completion of the Corrective Action:**  -Updated special education procedures that make clear all timelines, specifically the 45 day timelines are met.  -All special education staff meeting agendas, attendance sheets and training materials.  -Student record review results | | |
| **Description of Internal Monitoring Procedures:**  Team Chair will update the timeline monitoring data tracking spreadsheets monthly with each student's name, the date of signed consent and the date of parent receipt of proposed IEP and placement to ensure consistent adherence to the 45 day timelines, Therese will review a minimum of 15 student records across all grade levels to ensure compliance each semester. | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 07/09/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district indicated they will update special education timeline procedures, implement an internal monitoring tracking system, train special education staff on timeline monitoring, and conduct student record reviews to ensure compliance. However, the district did not indicate follow-up actions to be taken should the record review identify non-compliance. | | |
| **Department Order of Corrective Action:**  Upon conducting a student record review, the district must also submit a root-cause analysis and a description of additional corrective actions taken to address any identified non-compliance, if applicable. | | |
| **Required Elements of Progress Report(s):**  By November 4, 2019, submit evidence of the updated special education procedures that make clear the school must consistently provide the parent a proposed IEP and proposed placement within forty-five school working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation.  By December 3, 2019, submit evidence of training of applicable staff regarding monitoring timelines to ensure that parents are in receipt of the IEP and proposed placement within 45 school working days of the signed consent. Include training agenda, attendance sheets, and training materials.  By March 2, 2020, submit evidence of the district's internal student record review results. 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):**  11/04/2019  12/03/2019  03/02/2020 | | |

**FOCUSED MONITORING REVIEW CORRECTIVE ACTION PLAN**

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| **Criterion & Topic:**  SE 18A IEP development and content | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  A review of student records indicated that the Team does not always address all elements of the most current IEP format provided by the Department of Elementary and Secondary Education. Specifically, the Present Levels of Educational Performance A and/or B are not always completed, as appropriate, to describe the specially designed instruction that is necessary for the student to make effective progress. | |
| **Description of Corrective Action:**  Therese will review and update special education procedures to make clear that IEP teams are consistently completing all components of the most current IEP format, including Present Levels of Educational A and/or B  Therese will provide training to all special education staff on the requirements of the most current IEP format provided by DESE specifically the Present Levels of Education Performance A and B to describe the specifically designed instruction that is necessary for the student to make effective progress  For identified students, the IEP team will reconvene to complete the Present Levels of Education Performance A and/or B to describe the specially designed instruction that is necessary for the student to make effective progress  Therese will review a sample of at least 15 student records across all grade levels to ensure compliance each semester | |
| **Title/Role(s) of Responsible Persons:**  Therese Green, Administrator of Special Education TECCA | **Expected Date of Completion:** 06/05/2020 |
| **Evidence of Completion of the Corrective Action:**  -Special Education procedures that make clear that IEP teams are consistently completing all components of the most current IEP format, including Present Levels of Educational Performance A and/or B  -Staff meeting agenda, attendance sheets, and training materials  - IEP meeting attendance, copy of updated Present Levels of Educational Performance A and/or B  -Student record review results and action plan if necessary | |
| **Description of Internal Monitoring Procedures:**  Therese will review student records each semester to ensure that Present Level of Educational Performance Part A and/or B are completed and individualized to describe the | |

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| specially designed instruction that is necessary for the student to make effective progress | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Approved  **Status Date:** 07/09/2019  **Correction Status:** Not Corrected |
| **Basis for Decision:** | |
| **Department Order of Corrective Action:** | |
| **Required Elements of Progress Report(s):**  By September 30, 2019, for the two students identified by the Department, submit evidence IEP Teams reconvened to complete each student's Present Levels of Educational Performance A and/or B. Include IEP meeting attendance, completed Present Levels of Educational Performance A and/or B, summary notes and N1.  By November 4, 2019, submit evidence of updated special education procedures that make clear IEP Teams must consistently complete all components of the most current IEP format, including Present Levels of Educational A and/or B.  By December 3, 2019, submit evidence of training of applicable staff regarding the completion of all elements of the most current IEP format. The training will address the completion of the Present Levels of Educational Performance A and B, as appropriate, to describe the specifically designed instruction that is necessary for the student to make effective progress. Include training agenda, attendance sheets, and training materials.  By March 2, 2020, submit evidence of the district's internal student record review results. 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  11/04/2019  12/03/2019  03/02/2020 | |

**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:**  A review of student records indicated that if a student is removed from the general education classroom at any time, the Team does not always state 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:**  Therese will provide training to all special education staff on when selecting the Least Restrictive Environment, stating why a removal is considered critical to a student's program and the basis for the conclusion is clearly stated in the Non-participation Justification statement in the IEP.  Therese will review a sample of at least 15 records across all grade levels to ensure compliance each semester | | |
| **Title/Role(s) of Responsible Persons:**  Therese Green, Administrator of Special Education | | **Expected Date of Completion:** 06/05/2020 |
| **Evidence of Completion of the Corrective Action:**  -Staff meeting agenda, attendance sheets and training materials  -Example of appropriate Non-Participation Justification statements  -Student record review results and action plan, if needed | | |
| **Description of Internal Monitoring Procedures:**  Therese will review student records each semester to ensure that Non-Participation statements include the reason for removal from the general education classroom is considered critical to the student's program as well as the basis for the conclusion that education of the student in a less-restrictive environment, with the use of supplementary aids and services could not be achieved satisfactorily. | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date:** 07/09/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By December 3, 2019, submit evidence of training of applicable staff to ensure that if a student is removed from the general education classroom at any time, the Team states why the removal is considered critical to the student's program and the basis for its conclusion that the education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. Include training agenda, attendance sheets, and training materials.  By March 2, 2020, submit evidence of the district's internal student record review results. 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):**  12/03/2019  03/02/2020 | | |

**FOCUSED MONITORING REVIEW CORRECTIVE ACTION PLAN**

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| **Criterion & Topic:**  CR 18 Responsibilities of the school principal | | **FMR Rating:**  Partially Implemented |
| **Department FMR Findings:**  A review of documentation and administrative interviews indicated that the school has not developed procedures for arranging the provision of educational services in a home or hospital setting when it is deemed medically necessary for a student to remain in such a setting for a period of not less than fourteen school days in any school year. | | |
| **Description of Corrective Action:**  TECCA will develop a Home/Hospital policy to include the following: when the district is in receipt of a physician's order, it arranges educational services for students who are out for a period of not less that 14 school days in any school year due to medical reasons  Therese will present the new policy to TECCA's Board of Directors for approval  Therese will provide training to appropriate staff o the Home/Hospital policy procedures Therese will disseminate Home/Hospital policy to the school community | | |
| **Title/Role(s) of Responsible Persons:**  Therese Green, Administrator of Special Education TECCA | | **Expected Date of Completion:** 06/05/2020 |
| **Evidence of Completion of the Corrective Action:**  -Updated Home/Hospital policy  -School Board agenda and approved minutes  -Staff meeting agenda, attendance sheets, and training materials  -Documentation of dissemination of Home/Hospital policy | | |
| **Description of Internal Monitoring Procedures:**  Therese will annually review Home/Hospital policy to ensure compliance and make changes as necessary | | |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION** | | |
| **Criterion:**  CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved  **Status Date:** 07/09/2019  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By September 30, 2019, submit the district's policy for providing educational services in the home or hospital that includes arrangements of educational services for students who are out for a period of not less than 14 school days in any school year due to medical reasons and in receipt of a physician's order.  By November 4, 2019, submit evidence of school board approval of the home/hospital policy. Include school board agenda and approved minutes.  By December 3, 2019, submit evidence of training of applicable staff regarding the district's home/hospital policy. Include training agenda, attendance sheets, and training materials.  By March 2, 2020, submit evidence of dissemination of the home/hospital policy to the school community. | | |
| **Progress Report Due Date(s):**  09/30/2019  11/04/2019  12/03/2019  03/02/2020 | | |