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| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**  **Public School Monitoring** |

##### TIERED FOCUSED MONITORING REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Hanover

TFM Onsite Year: 2023-2024

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 theTiered Focused Monitoring Report dated 01/19/2024.

**Mandatory One-Year Compliance Date:**

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

| **Criterion** | **Criterion Title** | **FMR Rating** |
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| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |

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

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **FMR Rating:**  Partially Implemented |
| **Department TFM Findings:**  A review of documents and staff interviews indicated that although the district has developed a Bullying Prevention and Intervention Plan (Plan) that is consistent with the regulations, the content of the bullying training provided to all staff does not include the following requirements:  Developmentally appropriate strategies to prevent bullying incidents;  Developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents;  Information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim, and witnesses to the bullying; and  Research findings on bullying, including information about students who have been shown to be particularly at risk for bullying in the school environment. | | |
| **Description of Corrective Action:**  The Hanover Public School district conducted an analysis of policies and procedures to determine the root causes for the identified issue of non-compliance. The root cause indicated that training materials were outdated and did not reflect the most recent policy adopted in June 2023. Based upon that analysis, the district has identified corrective actions necessary to address the root causes and ensure future compliance to meet the requirements related to content of the district?s bullying plan training including:  By August 2024 develop training content.  By September 2024 train appropriate staff on the updated content. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  01/19/2025 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completed corrective actions will include revised bullying training slides, training agendas, and signed training attendance sheets. | | |
| **Description of Internal Monitoring Procedures:**  Continuing after the completion due date, the district will conduct an annual review of the bullying training content to ensure ongoing compliance with the current regulations. The district will also ensure annual staff training on the updated requirements at the start of every school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 04/05/2024  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By April 29, 2024, the district will submit revised training materials that include developmentally appropriate strategies to prevent bullying incidents; developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents; information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim, and witnesses to the bullying; and research findings on bullying, including information about students who have been shown to be particularly at risk for bullying in the school environment.  By September 30, 2024, the district will provide training to all staff using the revised training materials and submit a dated agenda and signed attendance sheets. | | |
| **Progress Report Due Date(s):**  04/29/2024  09/30/2024 | | |

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

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **FMR Rating:**  Partially Implemented |
| **Department TFM Findings:**  A review of documentation and staff interviews indicated that although the district has developed the notice sent to students within five days of the student's 10th consecutive absence, the notice does not indicate that the meeting shall occur within ten days of the notice. Additionally, the district does not send annual written notice to former students who have not yet earned their competency determination and who have not transferred to another school to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in such programs. | | |
| **Description of Corrective Action:**  The Hanover Public School district conducted an analysis of data, policies, and procedures to determine the root causes for the identified issue of non-compliance. The root cause indicated that we have not had a student that this regulation applied to in recent years resulting in the letters not containing the most up-to-date regulations. Based upon that analysis, the district has identified corrective actions necessary to address the root causes and ensure future compliance to meet the requirements related to content of the district?s notice to students 16 or over leaving school without a high school diploma, certificate of attainment or completion.  Hanover Public Schools will complete the following corrective actions:  By April 2024, the district will revise the absence notice so that it includes all requirements. The district will also develop an annual written notice to send to former students who have not yet earned their competency determination and who have not transferred to another school. Furthermore, the district will develop procedures and an internal monitoring system to ensure the letters are sent and exit meetings are held as required. By May 2024 district leadership will train all relevant staff on the updated notices, procedures, and internal monitoring system. By June 2024 the district will submit the results of internal monitoring to ensure that absence notices are sent to both the student and the parent/guardian within five days from the student's tenth consecutive absence and an exit meeting occurs prior to a student permanently leaving school. The results will also indicate whether annual written notices for former students are sent as required. The district will conduct a root cause analysis and implement corrective action for any noncompliance identified. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  01/19/2025 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completed corrective actions will include, revised notices, training materials, agendas, and signed attendance sheets. | | |
| **Description of Internal Monitoring Procedures:**  Continuing after the completion due date, the Director of Student Services will implement the internal monitoring system every quarter to ensure that the content of notices sent to students 16 or over leaving high school without a diploma is compliant with regulations and exit meetings are held prior to students permanently leaving school. Monitoring will also ensure that annual written notices are sent as required, and the content of the notices is current, and accurate, and encourages student re-engagement. For any noncompliance identified, district leadership will identify the root cause(s) and implement the necessary corrective actions. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Approved  **Status Date:** 04/05/2024  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By April 29, 2024, the district will revise the notice sent to students within five days of the student's 10th consecutive absence to include that the meeting shall occur within ten days of the notice. The district will also develop an annual written notice to send to former students who have not yet earned their competency determination and who have not transferred to another school.  By June 10, 2024, the district will develop procedures to ensure the notices are sent and exit meetings held as required. Additionally, district leadership will train all relevant staff on the updated notices and outreach procedures.  By June 10, 2024, the district will submit copies of the annual written notice sent to any former students who attended the district's high school within the past two years and who have yet to earn their competency determination and who have not transferred to another school. | | |
| **Progress Report Due Date(s):**  04/29/2024  06/10/2024 | | |

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| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **FMR Rating:**  Partially Implemented |
| **Department TFM Findings:**  A review of documents and staff interviews indicated that although the district has developed procedures for physical restraint consistent with 603 CMR 46.00, the content of the required annual staff training for all staff does not include the following requirements:  The role of the student, family, and staff in preventing restraint;  The program's restraint prevention and behavior support policy and procedures, including use of time-out as a behavior support strategy distinct from seclusion;  Interventions that may preclude the need for restraint, including de-escalation of problematic behaviors and other alternatives to restraint in emergency circumstances; and  When behavior presents an emergency that requires physical restraint, the types of permitted physical restraints and related safety considerations, including information regarding the increased risk of injury to a student when any restraint is used, in particular a restraint of extended duration. | | |
| **Description of Corrective Action:**  The Hanover Public School district conducted an analysis of data, policies, and procedures to determine the root causes for the identified issue of noncompliance. The root cause indicated that training materials need to be updated with new mandates. The annual training presentation had not been revised over the past few years. Based upon that analysis, the district has identified corrective actions necessary to address the root causes and ensure future compliance to meet the requirements related to content of the district?s physical restraint training.  By July 2024 develop training content.  By September 2024 train appropriate staff on the updated content. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  01/19/2025 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completed corrective actions will include revised physical restraint training slides, training agendas, and signed training attendance sheets. | | |
| **Description of Internal Monitoring Procedures:**  Continuing after the completion due date, the district will conduct an annual review of the physical restraint training content to ensure ongoing compliance with the current regulations. The district will also ensure annual staff training on the updated requirements at the start of every school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved  **Status Date:** 04/05/2024  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By April 29, 2024, the district will revise the content of the required annual staff training for all staff to include the role of the student, family, and staff in preventing restraint; the program's restraint prevention and behavior support policy and procedures, including use of time-out as a behavior support strategy distinct from seclusion; interventions that may preclude the need for restraint, including de-escalation of problematic behaviors and other alternatives to restraint in emergency circumstances; and when behavior presents an emergency that requires physical restraint, the types of permitted physical restraints and related safety considerations, including information regarding the increased risk of injury to a student when any restraint is used, in particular a restraint of extended duration.  By September 30, 2024, the district will train all staff on the revised physical restraint annual training and submit a dated agenda and signed attendance sheets. | | |
| **Progress Report Due Date(s):**  04/29/2024  09/30/2024 | | |

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| **Criterion & Topic:**  CR 24 Curriculum review | | **FMR Rating:**  Partially Implemented |
| **Department TFM Findings:**  A review of documents and staff interviews indicated that the district does not ensure that individual teachers review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin, and sexual orientation. Furthermore, the district does not ensure that teachers use appropriate activities, discussions, and/or supplementary materials to provide balance and context for any stereotypes that may be depicted in such materials. | | |
| **Description of Corrective Action:**  The Hanover Public Schools conducted an analysis of data, policies, and procedures to determine the root causes for identified issues of noncompliance. The root cause indicated that not all stakeholders have been involved with curriculum review. Based upon that analysis, the district has identified corrective actions necessary to address the root causes and ensure future compliance to meet the requirements related to curriculum review.  Hanover Public Schools will complete the following corrective actions:  By June 2024, the district leadership will receive training from the Department on reviewing educational materials for bias to support the development of culturally proficient practices that center diversity, equity, and inclusion in the learning environment.  By September 2024, the district will submit internal monitoring procedures, including any protocols and tools, to ensure teachers review all educational materials for bias. Additionally, the district will submit evidence that individual teachers have been trained on district procedures for reviewing instructional and educational materials for simplistic and demeaning generalizations and providing balance and context using appropriate activities, discussions and/or supplementary materials. The district will also submit evidence that staff have been trained on any district curriculum review protocols and tools as well as the district's internal monitoring procedures.  By October 2024 the district will submit the results of internal monitoring to ensure the curriculum review procedures are being implemented. The district will provide further teacher training and support, as needed, following the results of the internal monitoring. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  01/19/2025 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completed corrective actions will include:  ? Cultural proficiency workshop training attendance sheets.  ? Protocol for individual teacher review of educational materials.  ? Internal monitoring tools.  ? Administrator and teacher training materials, agenda, and signed attendance sheets.  ? Samples of completed internal monitoring tools. | | |
| **Description of Internal Monitoring Procedures:**  By December 2024, and beyond, individual teachers in the school will review all educational materials for simplistic and demeaning generalizations, lacking intellectual merit on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. In addition, the district will ensure that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in the materials. The district will also develop a tracking system to track individual teachers? review of curriculum materials.  If there are any instances of non-compliance identified, the Director of Student Services will conduct a root cause analysis and take appropriate corrective actions to address the issue(s) based upon that analysis. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 04/05/2024  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By April 29, 2024, the district leadership will receive training from the Department on reviewing educational materials for bias.  By September 30, 2024, the district will submit additional internal monitoring procedures, including protocols and tools, to ensure teachers review all educational materials for bias. Additionally, the district will submit evidence that individual teachers have been trained on district procedures for reviewing instructional and educational materials for bias; providing balance and context using appropriate activities, discussions, and/or supplementary materials; review protocol and tools; as well as the district's internal monitoring procedures.  By November 29, 2024, the district will submit the results of internal monitoring to ensure the educational material review procedures are implemented. The district will provide further teacher training and support, as needed, following the results of the internal monitoring. | | |
| **Progress Report Due Date(s):**  04/29/2024  09/30/2024  11/29/2024 | | |

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **FMR Rating:**  Partially Implemented |
| **Department TFM Findings:**  A review of documents and staff interviews indicated that although the district reviews different data points to support strategic planning, the district does not conduct an annual institutional self-evaluation to ensure all students have equal access to the K-12 programming, including athletics and other extracurricular activities, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status. | | |
| **Description of Corrective Action:**  The Hanover Public Schools conducted an analysis of data, policies, and procedures to determine the root causes for identified issues of noncompliance. The root cause indicated that not all stakeholders had input in the annual institutional self-evaluation. Based upon that analysis, the district has identified corrective actions necessary to address the root causes and ensure future compliance to meet the requirements related to an annual institutional self-evaluation.  Hanover Public Schools will complete the following corrective actions:  By June 2024, the district leadership will receive training from the Department on conducting institutional self-evaluation for access to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities.  By September 2024, the district will submit the procedures for conducting institutional self-evaluation that include data review, root cause analyses, and surveys for families, teachers, athletic directors, and students. Additionally, the district will submit evidence of training staff and other parties responsible for conducting the institutional self-evaluation on the evaluation procedures.  By December 2024, the district will submit the results of the self-evaluation, including a description of the data collected and analyzed, key findings, recommendations, and action plans. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  01/19/2025 |
| **Evidence of Completion of the Corrective Action:**  Evidence of completed corrective actions will include:  ? Evidence of review of DESE LEA Equity Guide and CR 24/25 Toolkit.  ? Plan for conducting the self-evaluation including timelines.  ? Summary of equity walks data.  ? Survey results and analysis.  ? Complete self-evaluation report. | | |
| **Description of Internal Monitoring Procedures:**  By December 2024, and beyond, the district will complete an annual institutional self-evaluation and develop an action plan to address any identified access gaps. If there are any instances of non-compliance identified, the Director of Student Services will conduct a root cause analysis and take appropriate corrective actions to address the issue(s) based upon that analysis. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 04/05/2024  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By April 29, 2024, the district leadership will receive training from the Department on conducting an institutional self-evaluation to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities.  By June 10, 2024, the district will develop and submit procedures for conducting an institutional self-evaluation that include review of relevant data, conducting root cause analyses, and surveys for families, teachers, athletic directors, and students.  By September 30, 2024, the district will submit evidence of training staff and other parties responsible for conducting the institutional self-evaluation on the evaluation procedures.  By December 20, 2024, the district will submit the results of the institutional self-evaluation, including a description of the data collected and analyzed, key findings, recommendations, and action plans. | | |
| **Progress Report Due Date(s):**  04/29/2024  06/10/2024  09/30/2024  12/20/2024 | | |