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

##### INTEGRATED MONITORING REVIEW

## CORRECTIVE ACTION PLAN

Hatfield Public Schools

Monitoring Onsite Year: 2024-2025

Program Area: Special Education and Civil Rights

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 Special Education and Civil Rights Monitoring Report dated 03/19/2025.

**Mandatory One-Year Compliance Date:** **03/19/2026**

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

| **Criterion** | **Criterion Title** | **Rating** |
| --- | --- | --- |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| SE 51 | Appropriate special education teacher licensure | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |

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| SPECIAL EDUCATION AND CIVIL RIGHTS  MONITORING REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and interviews indicated that the district has not established a special education parent advisory council (SEPAC). | | |
| **Description of Corrective Action:**  We are in the process of scheduling three training sessions for parents (one is completed) before the end of the year. We had applied for a waiver earlier in the year but need to expand on this to show that we are seeking alternative means of bringing parents together for meeting the requirement for not having a parent-led SEPAC.  The district had utilized the Basic Rights training to promote the need for parents to be involved in the SEPAC. There was not interest from parents at the time and the district did ask the regional collaborative if there was interest in a regional SEPAC for this area.  At this time the district is working on setting up two additional trainings to meet the alternative means of compliance and will expand on the earlier SEPAC waiver.  Root cause: lack of parent involvement in the SEPAC in recent years. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Interim Student Services Director | | **Expected Date of Completion:**  06/30/2025 |
| **Evidence of Completion of the Corrective Action:**   * Posted flyers on Federation lead training * Emails to the Federation concerning additional trainings * SEPAC waiver document * MassPAC membership | | |
| **Description of Internal Monitoring Procedures:**  At the beginning of the 2025-26 school year the district will schedule three training opportunities for parents at the beginning of the year and do continued outreach to promote parent involvement. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 04/25/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By June 30, 2025, the district will submit evidence that the district has established a Special Education Parent Advisory Council (SEPAC), including names of board members and by-laws or a request a SEPAC waiver from the Department. | | |
| **Progress Report Due Date(s):**  06/30/2025 | | |

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| SPECIAL EDUCATION AND CIVIL RIGHTS  MONITORING REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  SE 51 Appropriate special education teacher licensure | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and interviews indicated that three individuals who design and/or provide direct special education services described in IEPs are not appropriately licensed. | | |
| **Description of Corrective Action:**  We have met with three staff that where one was hired over the summer, one that was hired part way into the school year, and one that had an older certification. These staff have been met with individually to discuss the need for additional certification.  To date, one staff member has applied for and received more accurate certification for her PreK position.  One staff member has resigned and will be ending her time in the district before the end of April 2025.  The third person has stated that they will apply for the certification but there is no evidence they have done so yet.  Root cause: Limited applicants applying for vacant positions. There were no other suitable applicants at the time of the hirings. There was no review of the need for additional/different certifications during the hiring process. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Interim Student Services Director | | **Expected Date of Completion:**  06/30/2025 |
| **Evidence of Completion of the Corrective Action:**  Completed application for certifications and new certifications awarded to the two remaining staff that were out of compliance.  An updated procedure will include a review of accurate certification. | | |
| **Description of Internal Monitoring Procedures:**  1.) The district will monitor the certification of new staff to review if their certifications align with the job posting.  2.) If not, the district will meet with the potential hire as part of the hiring process and request they seek additional certifications.  3.) The district will seek a one year waiver and monitor the progress the staff member is making toward completion of the certification requirements or apply for an additional year of the waiver if the staff member is making progress toward the certification. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 51 Appropriate special education teacher licensure | **Corrective Action Plan Status:** Approved  **Status Date:** 04/25/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  The Department has verified licensure for one of the identified individuals and acknowledges one individual will no longer be employed by the district after April 30, 2025.  By June 30, 2025, the district will submit evidence that the remaining identified individual is appropriately licensed. If that individual is not appropriately licensed or on an approved waiver, the district will submit detailed corrective action steps to ensure the individual is appropriately licensed or on an approved waiver.  By June 30, 2025, the district will submit procedures for monitoring educator licensure to ensure that individuals who design and provide direct special education services are appropriately licensed. Procedures will include the role(s) of the person(s) responsible for monitoring educator licensure. | | |
| **Progress Report Due Date(s):**  06/30/2025 | | |

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| **Criterion & Topic:**  SE 54 Professional development | | **Rating:**  Partially Implemented |
| **Department Findings:**  The district did not provide evidence demonstrating the following:   * Training of special education and general education staff at the middle and high school levels on state and federal special education requirements; and * In-service training for all transportation providers before they begin transporting any special education student receiving special transportation. | | |
| **Description of Corrective Action:**  Transportation: We have reached out to the bussing company that provides some of our transportation needs for professional development verification. We have not received this at this time. In examining a root cause for this issue, we did not find that the district had a mechanism in place that monitored training of bus drivers/vendors.  We will continue to reach out to vendors that are used by the district, but have decided to create an information sheet for each student that identifies the student’s disability, how they communicate, individual needs during transportation, and other recommendations. This will be distributed to transportation vendors and in-district special education transportation drivers before the beginning of the 2025-26 school year.  Federal and State Special Education laws and Regulations: The district was not able to met with all staff this past year to review Federal and State Special Education Laws and Regulations. Elementary staff were met with, but secondary level staff were not.  The district will take one of the professional development/orientation days at the beginning of the years and review IDEA, Section 504 (29U.S.C. 794), Title 34/Chapter III and Chapter 45, MA 603 28.00, MGL c. 111G and 151c, and other related laws. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Interim Student Services Director | | **Expected Date of Completion:**  09/30/2025 |
| **Evidence of Completion of the Corrective Action:**   * Samples of the individual transportation information sheets and logs indicating when they were distributed * Special Education Laws training sign in sheets * Distributed handouts/PowerPoints describing what was covered | | |
| **Description of Internal Monitoring Procedures:**  As new students are set up for transportation, the Transportation Information Sheets will be distributed to vendor/driver upon a referral for the route. This information will be kept in the student’s files for reference and monitoring purposes.  The district will plan on doing an overview of Federal and State Special Education Laws and Regulation on a yearly basis during orientation and professional development time at the beginning of the year. This will be part of our professional development practices moving forward. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **Corrective Action Plan Status:** Approved  **Status Date:** 04/25/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By June 30, 2025, the district will submit the professional development plan for the 2025-2026 school year which includes the date(s) of district trainings on federal and state special education regulations and the date(s) of trainings provided to transportation providers.  By September 30, 2025, the district will submit evidence that all staff have been trained on federal and state special education regulations. Evidence will include training materials and attendance sheets.  By September 30, 2025, the district will submit evidence that all transportation providers have been provided in-service training and have been provided with information on the specific needs of students requiring specialized transportation. Evidence will include training materials, attendance sheets, and samples of transportation information sheets provided to drivers. | | |
| **Progress Report Due Date(s):**  06/30/2025  09/30/2025 | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents indicated that the district's code of conduct does not contain all necessary procedural requirements for the discipline of students with disabilities in accordance with IDEA and Section 504.  Specifically, the code of conduct does not include the following requirements:   * When a suspension constitutes a change in placement of a student with disabilities, conduct a manifestation determination within ten days of the decision to suspend to determine whether the behavior was caused by or had a direct and substantial relationship to the disability or was the direct result of the district's failure to implement the IEP; * When placed in an interim alternative educational setting, such a setting enables the student to continue in the general curriculum and continue receiving services identified on the IEP, including services to address the problem behavior; and * Notification to the parent/guardian of the decision of disciplinary action and provision of written notice of procedural safeguards no later than the date of the start of any disciplinary action. | | |
| **Description of Corrective Action:**  The district will add language to the current student handbooks during a review this spring and presented to the school committee over the summer.  Root cause: Earlier language in the handbooks had been thought to be in alignment with State guidance.  The goal will be to have the handbooks updated by the beginning of August 2025, and posted to the website before school starts. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Interim Student Services Director | | **Expected Date of Completion:**  09/30/2025 |
| **Evidence of Completion of the Corrective Action:**   * Updated handbooks posted to the website * Updated language in the handbooks with updated procedural requirements regarding students with disabilities and discipline and processes | | |
| **Description of Internal Monitoring Procedures:**  Handbooks will be reviewed yearly in the spring, submitted to the school committee for review, and distributed via the school/district website. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 04/25/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By June 30, 2025, the district will submit proposed procedures that include all procedural requirements for the discipline of students with disabilities.  By September 30, the district will submit student handbooks and codes of conduct that contain the revised procedures for the discipline of students with disabilities, as well as evidence of dissemination to the school community. Evidence will include the distribution of revised student handbooks and codes of conduct, via district website, and notification to the school community of the revisions to student handbooks and codes of conduct. | | |
| **Progress Report Due Date(s):**  06/30/2025  09/30/2025 | | |

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| **Criterion & Topic:**  CR 24 Curriculum review | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and interviews indicated that the district does not ensure that individual teachers review all instructional materials for simplistic and demeaning generalizations on the basis of race, color, sex, gender identity, religion, national origin, and sexual orientation. Furthermore, the district does not ensure that teachers provide appropriate activities, discussions, and/or supplementary materials to provide balance and context for any such stereotypes depicted in such materials. | | |
| **Description of Corrective Action:**  Using the Washington Model, the district will have staff form work groups by department (including counseling supports) to conduct bias reviews of available texts, fliers, informational resources, etc. The district will develop a database of materials reviewed and will review this data base each year to add to when new materials are considered for use on the district as part of the curriculum, and examine older materials if it is considered to be used in other grades/classes.  Root Cause: The district did not have a full district wide bias review process in place prior to the Integrated Monitoring Review. | | |
| **Title/Role(s) of Responsible Persons:**  John Salovardos, Interim Student Services Director | | **Expected Date of Completion:**  12/31/2025 |
| **Evidence of Completion of the Corrective Action:**  Worksheet of materials ungoing a bias review using the Washington Model. | | |
| **Description of Internal Monitoring Procedures:**  Monitoring will be done yearly during the orientation/professional development process and at staff members where work groups will conduct reviews when considering new sample materials for use in the curriculum. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 04/25/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By June 30, 2025, the district will develop and submit protocols and tools for individual teacher review, that includes internal monitoring, of 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, and provide balance and context using appropriate activities, discussions and/or supplementary materials for any stereotypes depicted in the materials.  By September 30, 2025, the district will submit evidence that all staff have been trained on the use of the protocols and tools. Evidence will include training materials and signed attendance sheets.  By December 31, 2025, the district will submit evidence of an administrative review that ensures individual teachers are implementing the procedures and tools. Evidence will include a summary of the results of the review, that includes a root cause analysis for any identified concerns, and a summary of additional feedback and/or support provided to teachers, as necessary. | | |
| **Progress Report Due Date(s):**  06/30/2025  09/30/2025  12/31/2025 | | |