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

##### INTEGRATED MONITORING REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Norwood Public Schools

Monitoring Onsite Year: 2024-2025

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 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 54 | Professional development | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | 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 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |

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

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| **Criterion & Topic:**  SE 54 Professional development | | **Rating:**  Partially Implemented |
| **Department Findings:**  The district did not provide evidence demonstrating that it provides transportation providers with written information on specific student needs that may cause difficulties along with appropriate emergency measures. | | |
| **Description of Corrective Action:**  The district will ensure all transportation providers providing specialized transportation for students with disabilities have received written information on the specific student needs and appropriate emergency measures. The district will review and revise, as needed, procedures for transportation providers transporting any special education student receiving special transportation to include providing written information on the nature of specific student needs along with information on appropriate emergency measures. Additionally, the district will train all staff on the revised procedures. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  09/26/2025 |
| **Evidence of Completion of the Corrective Action:**  Evidence of providing transportation providers with written information on specific student needs and appropriate emergency measures. Revised procedures that meet all requirements. Evidence of staff training, including training agendas, attendance lists, and materials. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Student Services will review special education transportation procedures and train relevant staff on the procedures annually to ensure continued compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 54 Professional development | **Corrective Action Plan Status:** Approved  **Status Date:** 04/24/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By June 12, 2025, the district will submit revised procedures for providing special education transportation providers with written information on specific student needs and appropriate emergency measures.  By September 26, 2025, the district will submit evidence that relevant staff have been trained on the revised procedures, including training agendas, attendance lists, and materials. Additionally, the district will submit evidence that transportation providers providing specialized transportation for students with disabilities have received written information on the student needs and appropriate emergency measures. | | |
| **Progress Report Due Date(s):**  06/12/2025  09/26/2025 | | |

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

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | **Rating:**  Partially Implemented |
| **Department Findings:**  Facilities observations and staff interviews indicated that the district does not always provide facilities and classrooms for eligible students that are at least equal in all physical respects to the average standards of general education facilities and classrooms. Specifically, physical therapy services at the Balch Elementary School, Callahan Elementary School, and Cleveland Elementary School are provided in hallways without privacy. | | |
| **Description of Corrective Action:**  The district will conduct a review of the school buildings to gather information and implement a plan to provide facilities and classrooms for eligible students that are at least equal in all physical respects to the average standards of general education facilities and classrooms. Specifically, the district will identify new physical therapy facilities/spaces at the Balch Elementary School, Callahan Elementary School, and Cleveland Elementary School that are comparable to general education facilities and appropriate for the type of instruction. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Principals, Director of Student Services | | **Expected Date of Completion:**  09/26/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit the results of the school buildings review and the action plan for ensuring compliance, and proposed floor plans for Balch Elementary School, Callahan Elementary School, and Cleveland Elementary School indicating the new location where the identified services are provided in respective buildings. Results of the Department’s facilities observation for compliance. | | |
| **Description of Internal Monitoring Procedures:**  Annually, principals and the district’s Special Education Department will review special education facilities assignments prior to the start of the school year to ensure that special education instructional spaces are at least equal in all physical respects to the average standards of general education facilities and classrooms. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved  **Status Date:** 04/24/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By June 12, 2025, the district will submit the results of the building review and the plan to address facilities concerns, including updated floor plans for Balch Elementary School, Callahan Elementary School, and Cleveland Elementary School indicating the new location where the identified services are provided in respective buildings.  By September 26, 2025, the Department will conduct facilities observations of Balch Elementary School, Callahan Elementary School, and Cleveland Elementary School to ensure special education facilities are compliant. | | |
| **Progress Report Due Date(s):**  06/12/2025  09/26/2025 | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and staff interviews indicated that the district recently updated and obtained school committee approval for the elementary and middle school codes of conduct that now include the following responsibilities of the principal for in-school suspension:  Invite the parent/guardian to a meeting to discuss the student's academic performance and behavior, strategies for student engagement, and possible responses to the behavior; and  Send written notice to the student and the parent/guardian about the in-school suspension, inviting the parent to a meeting if such meeting has not occurred.  However, the updated codes of conduct have not been disseminated to members of the school community. | | |
| **Description of Corrective Action:**  The district will disseminate the updated student handbook that meets all requirements to members of the school community. | | |
| **Title/Role(s) of Responsible Persons:**  Principals | | **Expected Date of Completion:**  06/12/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit evidence that the updated handbook has been posted on the district website and that notification of the updated handbook has been provided to staff, students, and families. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district leadership will review the student handbooks and update them as necessary prior to the start of each school year to ensure consistency with the regulations. Additionally, the updated student handbooks will be disseminated to members of the school community. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 04/24/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By June 12, 2025, the district will submit evidence that the revised student handbook has been posted on the district website and that notification of the updated handbook has been provided to staff, students, and families. | | |
| **Progress Report Due Date(s):**  06/12/2025 | | |

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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 | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and staff interviews indicated that the absence notice is not sent within five days from the student's tenth consecutive absence. Additionally, the notice does not include the opportunity for the parent/guardian to request an extension of the time and the date of the exit interview for up to 14 days. Furthermore, the annual notice sent to students who have left school without earning their competency determination does not include information on academic support options outside of re-enrollment in the district. | | |
| **Description of Corrective Action:**  The district will conduct a root cause analysis and implement an action plan to ensure that all requirements are met when students 16 or over leave school or consider leaving school. The district will also review all relevant procedures, practices, and notice templates and revise as necessary to ensure they meet requirements, including sending notice to students within five days of the student’s tenth consecutive absence that includes the opportunity for the parent/guardian to request an extension of the time and the date of the exit interview for up to 14 days and sending annual written notice to former students who attended the high school within the past two years, have not yet earned their competency determination, and 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 those programs. | | |
| **Title/Role(s) of Responsible Persons:**  Principals, Guidance Counselors, Director of Student Services | | **Expected Date of Completion:**  12/19/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit a root cause analysis, any revised procedures and notice templates, a description of an internal monitoring system, evidence of staff training, and results of internal record review. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will train all relevant staff on the requirements for notice to students over 16 leaving school, district procedures to ensure the requirements are met, any updated notices, and the district internal monitoring system. At least quarterly, Principals will review the internal tracking system to ensure the required procedures are consistently implemented. | | |
| 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:** 04/24/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By June 12, 2025, the district will submit a root cause analysis, any revised procedures and notice templates, and a description of the district’s internal monitoring system.  By September 26, 2025, the district will submit evidence that all relevant staff have been trained on the requirements, district procedures, updated district notices, and internal monitoring system. Evidence will include training agendas, attendance lists, and materials.  By December 19, 2025, the district will implement the internal monitoring system to ensure the required procedures are implemented. For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  06/12/2025  09/26/2025  12/19/2025 | | |

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| **Criterion & Topic:**  CR 21 Staff training regarding civil rights responsibilities | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and staff interviews indicated that although the district provides staff training on civil rights responsibilities, the training does not include the prevention of discrimination and harassment and appropriate methods for responding to discrimination and harassment in the school setting. | | |
| **Description of Corrective Action:**  The district will review and update its civil rights training materials to ensure all school personnel are trained, at least annually, regarding civil rights responsibilities, including the prevention of discrimination and harassment on the basis of students' race, color, sex, gender identity, religion, national origin, and sexual orientation and appropriate methods for responding to it in the school setting. The district will also provide training to all staff using the updated materials. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent; Director of Safety, Compliance, and Communications; Principals | | **Expected Date of Completion:**  09/26/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit a root cause analysis, revised training materials, and evidence of staff training. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will train all staff on their civil rights responsibilities, including the prevention of discrimination and harassment on the basis of students' race, color, sex, gender identity, religion, national origin and sexual orientation and the appropriate methods for responding to it in the school setting. Prior to the start of the school year, principals and the Director of Safety, Compliance, and Communication will review training materials to ensure they meet regulatory requirements. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date:** 04/24/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By July 31, 2025, the district will submit a root cause analysis and revised civil rights training materials that include strategies for preventing discrimination and harassment and appropriate methods for responding to discrimination and harassment in the school setting.  By September 26, 2025, the district will submit evidence that all relevant staff have received the updated civil rights training. Evidence will include training agendas, attendance lists, and materials. | | |
| **Progress Report Due Date(s):**  07/31/2025  09/26/2025 | | |

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| **Criterion & Topic:**  CR 23 Comparability of facilities | | **Rating:**  Partially Implemented |
| **Department Findings:**  See SE 55 for concerns related to school facilities. | | |
| **Description of Corrective Action:**  See SE 55 | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Principals, Director of Student Services | | **Expected Date of Completion:**  09/26/2025 |
| **Evidence of Completion of the Corrective Action:**  See SE 55 | | |
| **Description of Internal Monitoring Procedures:**  See SE 55 | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 23 Comparability of facilities | **Corrective Action Plan Status:** Approved  **Status Date:** 04/24/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  See SE 55 | | |
| **Progress Report Due Date(s):**  06/12/2025  09/26/2025 | | |

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and staff interviews indicated that the district does not annually evaluate all aspects of the K-12 school program 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. | | |
| **Description of Corrective Action:**  The district will evaluate all aspects of its K-12 program annually 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. The district will collect stakeholder input, including students, staff, and family and analyze the results. Additionally, the district will review and analyze disaggregated student access data, including graduation, attendance, and discipline rates; course selection data; special education placement; and participation in athletics and other extracurricular activities. The district will make changes as indicated by the evaluation. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent; Principals | | **Expected Date of Completion:**  12/19/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit a root cause analysis and procedures for ensuring an institutional self-evaluation that addresses all requirements is conducted annually. The procedures will include data collection and analysis; walk-through tools; and self-evaluation stakeholder input tools, such as draft surveys for staff, family, and students. The district will submit a summary of the institutional self-evaluation that includes any identified access gaps, root cause analysis and prioritization, action plan with implementation timeline, and progress monitoring plan. The district will maintain documentation of the progress monitoring activities and any additional actions taken to ensure equal access. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will conduct an institutional self-evaluation through its strategic planning, school improvement plans, and state of the union process to ensure 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 the district's programs, including athletics and other extracurricular activities. As a result of the evaluation, the district will take appropriate actions to address identified issues of access. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 04/24/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By June 12, 2025, the district will submit a root cause analysis and procedures for ensuring an institutional self-evaluation that addresses all requirements is conducted annually. The district will also submit stakeholder data collection tools, such as draft surveys for staff, family, and students.  By September 26, 2025, the district will submit evidence of training relevant staff on the self-evaluation procedures and tools. Evidence will include training agendas, attendance lists, and materials.  By December 19, 2025, the district will submit evidence of obtaining and analyzing input from staff, families, and students. Additionally, the district will submit a summary analysis of disaggregated student access data, including graduation, attendance, and discipline rates; course selection data; special education placement; and participation in athletics and other extracurricular activities.  By January 16, 2026, the district will submit a summary of the institutional self-evaluation that includes any identified access gaps, root cause analysis and prioritization, action plan with implementation timeline, and progress monitoring plan. The district will maintain documentation of the progress monitoring activities and any additional actions taken to ensure equal access. | | |
| **Progress Report Due Date(s):**  06/12/2025  09/26/2025  12/19/2025  01/16/2026 | | |