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

# INTEGRATED MONITORING REVIEWCORRECTIVE ACTION PLANCharter School or District: Dennis-Yarmouth Regional School DistrictMonitoring 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 05/10/2025.

**Mandatory One-Year Compliance Date:** **05/10/2026**

## Summary of Required Corrective Action Plans in this Report

| **Criterion** | **Criterion Title** | **Rating** |
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| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 9 | Timeline for determination of eligibility | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 40 | Instructional grouping requirements for students aged five and older | Partially Implemented |
| SE 41 | Age span requirements | Partially Implemented |
| SE 42 | Programs for young children three and four years of age | Partially Implemented |
| CR 18 | Responsibilities of the school principal | Partially Implemented |

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| SPECIAL EDUCATION AND CIVIL RIGHTSMONITORING REVIEW**CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:** SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Rating:** Partially Implemented |
| **Department Findings:** A review of student records indicated that the district does not always obtain consent from adult students with sole or shared decision-making authority to continue the student's special education program. |
| **Description of Root Cause Analysis:** Dennis-Yarmouth conducted root cause analysis which indicated that insufficient training or awareness among staff; the lack of an effective system to track students approaching or having reached the age of majority; and failure to document consent in the student record led to the noncompliance. |
| **Title/Role(s) of Responsible Persons:**Assistant Superintendent of Student Services and Instruction, Assistant Directors of Student Services | **Expected Date of Completion:**12/19/2025 |
| **Evidence of Completion of the Corrective Action:**The district provided evidence of individual student correction on March 6, 2025. The district will also submit updated procedures, evidence of staff training, and results of additional student record review by Public School Monitoring staff. |
| **Description of Internal Monitoring Procedures:** Annually, the district will train all relevant staff on obtaining adult student consent at the age of majority. The district will implement an Age of Majority tracking system, reviewed at least quarterly by the Assistant Director of Student Services, to ensure continued compliance.  |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Approved **Status Date:** 06/13/2025 **Correction Status:** Not Corrected |
| **Required Elements of Progress Report(s):** By July 31, 2025, the district will submit revised procedures for obtaining consent from adult students with sole or shared decision-making at the age of majority, a copy of the Age of Majority tracking system, and staff training materials. By September 30, 2025, the district will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system.By December 19, 2025, Public School Monitoring staff will conduct a review of a sample of records to ensure requirements are met. For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. |
| **Progress Report Due Date(s):** 07/31/202509/30/202512/19/2025 |

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| SPECIAL EDUCATION AND CIVIL RIGHTSMONITORING REVIEW**CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:** SE 9 Timeline for determination of eligibility | **Rating:** Partially Implemented |
| **Department Findings:** A review of student records and staff interviews indicated that the district does not always provide the parent with a proposed IEP within 45 school working days after receipt of the parent's written consent to an initial evaluation or re-evaluation. |
| **Description of Root Cause Analysis:** Dennis-Yarmouth conducted root cause analysis indicated that outdated procedures; lack of adequate staff training; and the absence of an effective monitoring system led to the noncompliance. |
| **Title/Role(s) of Responsible Persons:**Assistant Superintendent of Student Services and Instruction, Assistant Directors of Student Services | **Expected Date of Completion:**12/19/2025 |
| **Evidence of Completion of the Corrective Action:**Compensatory service decisions; compensatory services plans and progress reports, if applicable; any updated procedures; evidence of staff training; copy of monitoring system to track eligibility timelines; and an additional data set review by Public School Monitoring staff. |
| **Description of Internal Monitoring Procedures:** Annually, the district will train all relevant staff on the requirements for convening a Team, determining eligibility, and, for eligible students, providing a proposed IEP and placement within 45 school days from receipt of parent consent to an initial evaluation or re-evaluation. The district will implement an evaluation timeline tracking system, reviewed at least quarterly by the Assistant Directors of Student Services, to ensure continued compliance.  |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 9 Timeline for determination of eligibility | **Corrective Action Plan Status:** Approved **Status Date:** 06/13/2025 **Correction Status:** Not Corrected |
| **Required Elements of Progress Report(s):** By July 31, 2025, the district will submit evidence of compensatory services determinations for the identified student; student-specific compensatory services plans and progress reports, if applicable; any revised procedures; a copy of the monitoring system to track evaluation timelines; and training materials. By September 30, 2025, the district will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system.By December 19, 2025, Public School Monitoring staff will conduct a review of a sample of records to ensure the requirements are met. For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. |
| **Progress Report Due Date(s):** 07/31/202509/30/202512/19/2025 |
| SPECIAL EDUCATION AND CIVIL RIGHTSMONITORING REVIEW**CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:** SE 18B Determination of placement; provision of IEP to parent | **Rating:** Partially Implemented |
| **Department Findings:** A review of student records and staff interviews indicated that the district does not consistently issue the proposed IEP and proposed placement to the parent immediately following the development of the IEP. |
| **Description of Root Cause Analysis:** Dennis-Yarmouth conducted root cause analysis which indicated that the absence of a clear, mandatory, and consistently implemented procedure for distributing the proposed IEP and proposed placement documents to parents immediately after the IEP is developed led to the noncompliance.  |
| **Title/Role(s) of Responsible Persons:**Assistant Superintendent of Student Services and Instruction, Assistant Directors of Student Services | **Expected Date of Completion:**12/19/2025 |
| **Evidence of Completion of the Corrective Action:**Compensatory service decisions; compensatory services plans and progress reports, if applicable; updated procedures; evidence of staff training; copy of monitoring system to track IEP provision timelines; and results of additional student record review by Public School Monitoring staff. |
| **Description of Internal Monitoring Procedures:** Annually, the district will train all relevant staff on the requirements for providing the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice immediately following the development of the IEP. The district will implement an IEP provision timeline tracking system, reviewed at least quarterly by the Assistant Director of Student Services, to ensure continued compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved **Status Date:** 06/13/2025 **Correction Status:** Not Corrected |
| **Required Elements of Progress Report(s):** By July 31, 2025, the district will submit evidence of compensatory services determinations for the 2 identified students; student-specific compensatory services plans and progress reports, if applicable; any revised procedures; a copy of the monitoring system to track IEP provision timelines; and training materials. By September 30, 2025, the district will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system.By December 19, 2025, Public School Monitoring staff will conduct a review of a sample of records to ensure requirements are met. For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. |
| **Progress Report Due Date(s):** 07/31/202509/30/202512/19/2025 |

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| **Criterion & Topic:** SE 40 Instructional grouping requirements for students aged five and older | **Rating:** Partially Implemented |
| **Department Findings:** A review of documents indicated that twenty instructional groupings at Dennis-Yarmouth Regional High School exceed the maximum instructional grouping student to staff ratios for eligible students receiving services outside the general education classroom. |
| **Description of Root Cause Analysis:** Dennis-Yarmouth conducted root cause analysis which indicated that a combination of procedural shortcomings, insufficient staff training, and a lack of a monitoring system for student-to-staff ratios in instructional groupings led to the noncompliance.  |
| **Title/Role(s) of Responsible Persons:**Assistant Superintendent of Student Services and Instruction, Assistant Directors of Student Services | **Expected Date of Completion:**09/30/2025 |
| **Evidence of Completion of the Corrective Action:**Updated procedures; evidence of staff training; copy of monitoring system to track instructional groupings; and evidence of meeting instructional grouping requirements. |
| **Description of Internal Monitoring Procedures:** Annually, the district will train all relevant staff on instructional grouping requirements for students age five and older. The district will implement an instructional grouping tracking system, reviewed at least quarterly by the Assistant Directors of Student Services, to ensure continued compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 40 Instructional grouping requirements for students aged five and older | **Corrective Action Plan Status:** Approved **Status Date:** 06/13/2025 **Correction Status:** Not Corrected |
| **Required Elements of Progress Report(s):** By July 31, 2025, the district will submit the revised procedures; a copy of the monitoring system to track instructional groupings; and training materials. By September 30, 2025, the district will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system. The district will also submit an Instructional Grouping Worksheet to ensure that: * When eligible students are assigned to instructional groupings outside of the general education classroom for 60% or less of the students' school schedule, group size does not exceed
	+ 8 students with a licensed special educator;
	+ 12 students if the licensed special educator is assisted by 1 aide, and
	+ 16 students if the licensed special educator is assisted by 2 aide
* For eligible students served in settings that are substantially separate, serving solely students with disabilities for more than 60% of the students' school schedule, the district provides instructional groupings that do not exceed
	+ 8 students to 1 licensed special educator, or
	+ 12 students to 1 licensed special educator and 1 aide.

For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. |
| **Progress Report Due Date(s):** 07/31/202509/30/2025 |

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| **Criterion & Topic:** SE 41 Age span requirements | **Rating:** Partially Implemented |
| **Department Findings:** A review of documents indicated that three instructional groupings at Dennis-Yarmouth Regional High School exceed the maximum 48-month age span requirement for eligible students receiving services outside the general education classroom. |
| **Description of Root Cause Analysis:** Dennis-Yarmouth conducted root cause analysis which indicated that lack of clear procedures, insufficient staff knowledge and training, and the absence of an effective monitoring system led to the noncompliance.  |
| **Title/Role(s) of Responsible Persons:**Assistant Superintendent of Student Services and Instruction, Assistant Directors of Student Services | **Expected Date of Completion:**09/30/2025 |
| **Evidence of Completion of the Corrective Action:**Updated procedures; evidence of staff training; copy of monitoring system to track age spans within special education groupings; and evidence of meeting age span requirements. |
| **Description of Internal Monitoring Procedures:** Annually, the district will train all relevant staff on age span requirements for students age five and older. The district will implement an age span tracking system, reviewed at least quarterly by Assistant Directors of Student Services, to ensure continued compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 41 Age span requirements | **Corrective Action Plan Status:** Approved **Status Date:** 06/13/2025 **Correction Status:** Not Corrected |
| **Required Elements of Progress Report(s):** By July 31, 2025, the district will submit any revised procedures; a copy of the monitoring system to track age spans; and training materials. By September 30, 2025, the district will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system. The district will also submit evidence indicating that the identified special education instructional groupings meet regulatory requirements.  |
| **Progress Report Due Date(s):** 07/31/202509/30/2025 |

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| **Criterion & Topic:** SE 42 Programs for young children three and four years of age | **Rating:** Partially Implemented |
| **Department Findings:** A review of documents and staff interviews indicated that the following three instructional groupings at the Ezra H. Baker Innovation School do not meet the grouping requirements of programs for children three and four years of age:Inclusion AM 1: 1 teacher, 2 aides, 4 students with disabilities, 2 students w/o disabilitiesInclusion AM 3: 1 teacher, 2 aides, 4 students with disabilities, 3 students w/o disabilitiesInclusion AM 4: 1 teacher, 2 aides, 5 students with disabilities, 2 students w/o disabilitiesSpecifically, these groupings are identified as inclusion classes, however, more than 50% of students in the groupings are students with disabilities. Groupings in which students with disabilities make up more than 50% of enrollment are considered substantially separate. |
| **Description of Root Cause Analysis:** Dennis-Yarmouth conducted root cause analysis which indicated that flaws in the preschool student placement and grouping process, lack of clear procedures, insufficient staff training, and the absence of an effective monitoring system led to the noncompliance.  |
| **Title/Role(s) of Responsible Persons:**Assistant Superintendent of Student Services and Instruction  | **Expected Date of Completion:**09/30/2025 |
| **Evidence of Completion of the Corrective Action:**Updated procedures; evidence of staff training; copy of monitoring system to track preschool instructional groupings; and evidence of meeting preschool instructional grouping requirements. |
| **Description of Internal Monitoring Procedures:** Annually, the district will train all relevant staff on instructional grouping requirements for preschool students. The district will implement an instructional grouping tracking system, reviewed at least quarterly by the Assistant Superintendent of Student Services and Instruction, to ensure continued compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 42 Programs for young children three and four years of age | **Corrective Action Plan Status:** Approved **Status Date:** 06/13/2025 **Correction Status:** Not Corrected |
| **Required Elements of Progress Report(s):** By July 31, 2025, the district will submit any revised procedures; a copy of the monitoring system to track preschool instructional groupings; and training materials. By September 30, 2025, the district will submit evidence that all relevant staff and any additional parties necessary for the approval of procedure elements, such as budgeting and staffing, have been trained on the preschool special education grouping requirements and the internal monitoring system to ensure preschool groupings meet the requirements. The district will also submit updated preschool instructional grouping worksheets. For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. |
| **Progress Report Due Date(s):** 07/31/202509/30/2025 |

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| **Criterion & Topic:** CR 18 Responsibilities of the school principal | **Rating:** Partially Implemented |
| **Department Findings:** A review of student records, documents, and staff interviews indicated that the district does not assess the reading ability and progress in literacy skills for all students in kindergarten through third grade as required. Specifically, the district does not always conduct early literacy screening for English learners (ELs) who recently arrived to the United States (newcomers)or Proficiency Level 1 English Learners (as determined by ACCESS English language proficiency tests). |
| **Description of Root Cause Analysis:** Dennis-Yarmouth conducted root cause analysis which indicated that procedural gaps; lack of staff training/awareness; and inconsistent implementation of screening requirements, specifically for newcomer and Proficiency Level 1 EL students in grades K-3, led to noncompliance.  |
| **Title/Role(s) of Responsible Persons:**Humanities Director, Elementary Principals, English Learner Coordinator | **Expected Date of Completion:**12/19/2025 |
| **Evidence of Completion of the Corrective Action:**Any updated procedures; evidence of staff training and evidence of early literacy screening for English learners who recently arrived to the United States (newcomers)or Proficiency Level 1 English Learners (as determined by ACCESS English language proficiency tests). |
| **Description of Internal Monitoring Procedures:** Annually, the district will train all relevant staff on the requirements for assessing all kindergarten through third grade students’ reading ability and progress in literacy skills, including screening English Learners who recently arrived to the United States (newcomers) or Proficiency Level 1 English Learners (as determined by ACCESS English language proficiency tests). The district will implement an early literacy screening process that includes all students from kindergarten through at least third grade. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved **Status Date:** 06/13/2025 **Correction Status:** Not Corrected |
| **Required Elements of Progress Report(s):** By July 31, 2025, the district will submit revised procedures; a description of the approved screening assessment(s) that will be used for newcomers and Proficiency Level 1 English Learners; and training materials. By September 30, 2025, the district will submit evidence that all relevant staff have been trained on the requirements, procedures, and internal monitoring system.By December 19, 2025, the district will submit evidence of assessing all kindergarten through third grade students’ reading ability and progress in literacy skills, including screening English Learners who recently arrived to the United States (newcomers) or Proficiency Level 1 English Learners (as determined by ACCESS English language proficiency tests). |
| **Progress Report Due Date(s):** 07/31/202509/30/202512/19/2025 |