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

##### SPECIAL EDUCATION AND CIVIL RIGHTS

##### MONITORING REVIEW

## CORRECTIVE ACTION PLAN

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

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 04/09/2025.

**Mandatory One-Year Compliance Date:** **04/09/2026**

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

| **Criterion** | **Criterion Title** | **Rating** |
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| SE 3 | Special requirements for determination of specific learning disability | Partially Implemented |
| 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 10 | End of school year evaluations | Partially Implemented |
| SE 12 | Frequency of re-evaluation | 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 |

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

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| **Criterion & Topic:**  SE 3 Special requirements for determination of specific learning disability | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of student records and staff interviews indicated that when a student suspected of having a specific learning disability is evaluated, the school does not always create a written determination as to whether or not the student has a specific learning disability, which is signed by all members of the Team. | | |
| **Description of Corrective Action:**  TECCA conducted root cause analysis for the noncompliance that indicated the following as leading to the noncompliance:   * Administrative staff turnover in the preceding years * Lack of a procedures manual to guide staff in understanding the regulations * Lack of staff buy-in to implement formal policies and procedures * Lack of oversight and internal monitoring.   The school will develop a procedures manual that includes the process for specific learning disability determination consistent with the regulations and conduct training for relevant staff on the procedures. The school will also implement internal monitoring and oversight to ensure ongoing compliance. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **Expected Date of Completion:**  12/19/2025 |
| **Evidence of Completion of the Corrective Action:**  Evidence of individual student correction, updated procedures, evidence of staff training, and an additional data set review by Public School Monitoring staff. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the school will train all relevant staff on the special requirements for determination of specific learning disability. Staff will document the specific learning disability determination in the N1 or N2, confirming Team members consent or dissent with the decision. Team chairs and supervisors will monitor compliance prior to sending out the N1 or N2. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3 Special requirements for determination of specific learning disability | **Corrective Action Plan Status:** Approved  **Status Date:** 05/19/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By July 18, 2025, the school will submit the written determination of specific learning disability signed by all members of the Team for the identified student; revised procedures for written determination of specific learning disability; and training materials.  By September 30, 2025, the school will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system.  By December 19, 2025, the Department will conduct a review of a sample of specific learning disability evaluation records to ensure requirements are being met. For any identified noncompliance, the school will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  07/18/2025  09/30/2025  12/19/2025 | | |

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| SPECIAL EDUCATION AND CIVIL RIGHTS  MONITORING 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, staff interviews, and documents indicated that at least one year prior to the student reaching age 18, the school does not always inform the student and the parent/guardian of the rights that will transfer from the parent/guardian to the student upon the student's 18th birthday. In addition, upon reaching the age of 18, the school does not always obtain consent from the student with decision-making authority to continue the student's special education program. | | |
| **Description of Corrective Action:**  TECCA conducted root cause analysis for the noncompliance that indicated the following as leading to the noncompliance:   * Administrative staff turnover in the preceding years * Lack of a procedures manual to guide staff in understanding the regulations * Lack of staff buy-in to implement formal policies and procedures * Lack of oversight and internal monitoring.   The school will develop procedures for sending notification to the student and the parent informing them of the special education making rights that will transfer from the parent to the student at age 18, along with obtaining consent from students with sole or shared decision making upon attaining the age of majority. The school will conduct training for relevant staff on the procedures and implement internal monitoring and oversight to ensure ongoing compliance. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **Expected Date of Completion:**  12/19/2025 |
| **Evidence of Completion of the Corrective Action:**  Evidence of individual student correction, updated procedures, evidence of staff training, and an additional data set review by Public School Monitoring staff. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the school will train all relevant staff on the special requirements for transfer of rights notification and obtaining consent at the age of majority. The school will implement an Age of Majority tracking system, reviewed at least quarterly by the Director of Special Education, 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:** 05/19/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By July 18, 2025, the school will submit evidence of obtaining consent from the two identified adult students; revised procedures for notification of transfer of rights by the student's 17th birthday and obtaining consent from adult students with sole or shared decision-making at the age of majority; and training materials.  By September 30, 2025, the school will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system.  By December 19, 2025, the Department will conduct a review of a sample of relevant student records to ensure the requirements are met. For any identified noncompliance, the school will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  07/18/2025  09/30/2025  12/19/2025 | | |

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| SPECIAL EDUCATION AND CIVIL RIGHTS  MONITORING 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, staff interviews, and documents indicated that within 45 school working days after receipt of the parent's written consent to an initial evaluation or re-evaluation, the school does not always determine whether the student is eligible for special education and provide the parent with a proposed IEP and proposed placement. | | |
| **Description of Corrective Action:**  TECCA conducted root cause analysis for the noncompliance that indicated the following as leading to the noncompliance:   * Administrative staff turnover in the preceding years * Lack of a procedures manual to guide staff in understanding the regulations * Lack of staff buy-in to implement formal policies and procedures * Delays in receiving accurate special education records for new students enrolled throughout the year * Lack of oversight and internal monitoring   The school has hired special education supervisors and chairpersons to oversee timelines. The school will develop procedures ensuring evaluation Teams determine eligibility and provide a proposed IEP and placement within 45 days of consent to an initial evaluation or re-evaluation. The school will conduct training for relevant staff on the procedures and implement internal monitoring and oversight to ensure ongoing compliance. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **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 school 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 school will implement an evaluation timeline tracking system, reviewed at least quarterly by the Director of Special Education, to ensure continued compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility | **Corrective Action Plan Status:** Approved  **Status Date:** 05/19/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By July 18, 2025, the school will submit evidence of compensatory services determinations for the 7 identified students; 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 school will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system.  By December 19, 2025, the Department will conduct a review of a sample of relevant student records to ensure requirements are being met. For any identified noncompliance, the school will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  07/18/2025  09/30/2025  12/19/2025 | | |

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| **Criterion & Topic:**  SE 10 End of school year evaluations | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of student records, staff interviews, and documents indicated that when consent is received between 30 and 45 school working days before the end of the school year, the school does not always ensure that a Team meeting is scheduled so as to allow for the provision of a proposed IEP or written notice of the finding that the student is not eligible no later than 14 days after the end of the school year. | | |
| **Description of Corrective Action:**  TECCA conducted root cause analysis for the noncompliance that indicated the following as leading to the noncompliance:   * Administrative staff turnover in the preceding years * Lack of a procedures manual to guide staff in understanding the regulations * Lack of staff buy-in to implement formal policies and procedures * Lack of oversight and internal monitoring   The school has hired special education supervisors and chairpersons to oversee evaluation timelines. The school will develop procedures ensuring end-of-year evaluations are completed and meetings scheduled to allow for the determination of eligibility and provision of proposed IEP and placement no later than 2 weeks after the end of the school year. The school will conduct training for relevant staff on the procedures and implement internal monitoring and oversight to ensure ongoing compliance. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **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 end of school year evaluation timelines; and an additional data set review by Public School Monitoring staff. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the school will train all special education chairs on the requirements for convening a Team, determining eligibility, and, for eligible students, providing a proposed IEP and placement within two weeks of the end of the school year when parental consent to an initial evaluation or re-evaluation is received between 30 and 45 school days before the end of the school year. The school will implement an evaluation timeline tracking system, reviewed at least quarterly by the Director of Special Education, to ensure continued compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 10 End of school year evaluations | **Corrective Action Plan Status:** Approved  **Status Date:** 05/19/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By July 18, 2025, the school will submit evidence of compensatory services determination for the identified student; student-specific compensatory services plan and progress reports, if applicable; any revised procedures; a copy of the monitoring system to track end of school year evaluation timelines.  By September 30, the school will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system.  By December 19, the Department will conduct a review of a sample of records to ensure requirements are being met. For any identified noncompliance, the school will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  07/18/2025  09/30/2025  12/19/2025 | | |

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

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| **Criterion & Topic:**  SE 12 Frequency of re-evaluation | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of student records indicated that the school does not always conduct a re-evaluation every three years. | | |
| **Description of Corrective Action:**  TECCA conducted root cause analysis for the noncompliance that indicated the following as leading to the noncompliance:   * Administrative staff turnover in the preceding years * Lack of a procedures manual to guide staff in understanding the regulations * Lack of staff buy-in to implement formal policies and procedures * Delays in receiving accurate special education records for new students enrolled throughout the year * Lack of oversight and internal monitoring   The school has hired special education supervisors and chairpersons to oversee evaluation timelines. The school will develop procedures ensuring reevaluations are completed every 3 years for eligible students unless the parent and school agree that it is unnecessary. The school will conduct training for relevant staff on the procedures and implement internal monitoring and oversight to ensure ongoing compliance. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **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 re-evaluation timelines; and an additional data set review by Public School Monitoring staff. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the school will train all relevant staff on the requirements for conducting a re-evaluation every 3 years unless the parent and school agree that it is unnecessary. The school will implement an evaluation timeline tracking system, reviewed at least quarterly by the Director of Special Education, to ensure continued compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 12 Frequency of re-evaluation | **Corrective Action Plan Status:** Approved  **Status Date:** 05/19/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By July 18, 2025, the school 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 school will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system.  By December 19, 2025, the Department will conduct a review of a sample of records to ensure requirements are being met. For any identified noncompliance, the school will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  07/18/2025  09/30/2025  12/19/2025 | | |

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| SPECIAL EDUCATION AND CIVIL RIGHTS  MONITORING 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 indicated that the school does not always provide the parent with the proposed IEP immediately following the development of the IEP. | | |
| **Description of Corrective Action:**  TECCA conducted root cause analysis for the noncompliance that indicated the following as leading to the noncompliance:   * Administrative staff turnover in the preceding years * Lack of a procedures manual to guide staff in understanding the regulations * Lack of staff buy-in to implement formal policies and procedures * Lack of oversight and internal monitoring   The school has hired special education supervisors and chairpersons to oversee IEP development and provision timelines. The school will develop procedures ensuring IEPs are provided to parents immediately following the development of the IEP. The school will conduct training for relevant staff on the procedures and implement internal monitoring and oversight to ensure ongoing compliance. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **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 IEP provision timelines; and an additional data set review by Public School Monitoring staff. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the school 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 school will implement an IEP provision timeline tracking system, reviewed at least quarterly by the Director of Special Education, 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:** 05/19/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By July 18, 2025, the school will submit evidence of compensatory services determinations for the 5 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 school will submit evidence that all relevant special educators have been trained on the requirements, procedures, and internal monitoring system.  By December 19, 2025, the Department will conduct a review of a sample of records to ensure requirements are being met. For any identified noncompliance, the school will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  07/18/2025  09/30/2025  12/19/2025 | | |

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

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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 and staff interviews indicated that 12 instructional groupings exceed the maximum instructional grouping student to staff ratios for eligible students receiving services outside the general education classroom:   * Elementary School Sub-Separate: 13 students, 1 special educator, no aide * Middle School Sub-Separate: 14 students, 1 special educator, no aide * High School Sub-Separate Transition 1/2: 13 students, 1 special educator, no aide * High School Sub-Separate Geometry: 12 students, 1 special educator, no aide * High School Sub-Separate English: 12 students, 1 special educator, no aide * High School Sub-Separate World History 1: 13 students, 1 special educator, no aide * High School Sub-Separate World History 2: 13 students, 1 special educator, no aide * High School Sub-Separate Earth Science 1: 14 students, 1 special educator, no aide * High School Sub-Separate Earth Science 2: 15 students, 1 special educator, no aide * High School Sub-Separate Transition 1: 14 students, 1 special educator, no aide * High School Sub-Separate Transition 2: 14 students, 1 special educator, no aide * High School Sub-Separate Multi: 12 students, 1 special educator, no aide | | |
| **Description of Corrective Action:**  TECCA conducted root cause analysis for the noncompliance that indicated the following as leading to the noncompliance:   * Challenges in recruiting and retaining adequate staffing * TECCA’s model of enrolling and withdrawing students throughout the year, resulting in instructional groupings shifting in and out of compliance during the school year * Administrative staff turnover in the preceding years * Lack of a procedures manual to guide staff in understanding the regulations * Lack of staff buy-in to implement formal policies and procedures * Lack of oversight and internal monitoring   The school has hired special education supervisors and chairpersons to oversee and monitor instructional groupings. The school will develop procedures for ensuring instructional groupings meet regulatory requirements. The school will conduct training for relevant staff on the procedures and implement internal monitoring and oversight to ensure ongoing compliance. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education | | **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 school will train all relevant staff on instructional grouping requirements for students age five and older. The school will implement an instructional grouping tracking system, reviewed at least quarterly by the Director of Special Education, 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:** 05/19/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By July 18, 2025, the school will submit any revised procedures; a copy of the monitoring system to track instructional groupings; and training materials.  By September 30, 2025, the school will submit evidence that all relevant special educators have been trained on the requirements, procedures, and the internal monitoring system. Additionally, the school will submit evidence indicating that all the identified instructional groupings meet the requirements for student to staff ratios. | | |
| **Progress Report Due Date(s):**  07/18/2025  09/30/2025 | | |