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

##### SPECIAL EDUCATION AND CIVIL RIGHTS

##### INTEGRATED MONITORING REVIEW

## CORRECTIVE ACTION PLAN

Amherst-Pelham Regional 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 04/25/2025.

**Mandatory One-Year Compliance Date:** **04/25/2026**

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

| **Criterion** | **Criterion Title** | **Rating** |
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| SE 9 | Timeline for determination of eligibility | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |

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| INTEGRATED 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 and staff interviews indicated that within 45 school working days after receipt of the parent's written consent to an initial evaluation or re-evaluation, the district does not always determine whether the student is eligible for special education and provide the parent with a proposed IEP. | | |
| **Description of Corrective Action:**  Due to several contributing factors, including staffing shortages, onboarding of new personnel, and an overall increase in student numbers, the district was found to be out of compliance with certain requirements.  Planned Outcomes and Corrective Actions: The district will develop and implement tracking systems to ensure compliance with Individualized Education Program (IEP) requirements. Existing procedures and timelines will be reviewed and revised as necessary to support compliance. These updated procedures will be incorporated into training for both new and returning staff.  Key Milestones: By September 30, 2025, the district will provide documentation demonstrating completion of staff training on revised procedures. By January 30, 2026, the district will submit evidence of internal monitoring, including data collected from a random sample of IEP records. The district will collaborate with the Department to collect and review a second data set for further analysis. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  04/25/2026 |
| **Evidence of Completion of the Corrective Action:**  The district will submit the following documentation to demonstrate progress toward compliance:   * A copy of the IEP Team Meeting Checklist along with detailed procedures used to guide compliant IEP meetings; * Evidence of staff training, including training materials (e.g., agendas, presentation slides, handouts), signed attendance sheets or verification forms indicating staff participation, and acknowledgment of content understanding; and * A compliance tracking report for each school site, outlining the status of IEP implementation and adherence to timelines. | | |
| **Description of Internal Monitoring Procedures:**  The Office of Student Services will conduct a random sampling of student files to verify that Individualized Education Plans (IEPs) are provided to caregivers within 45 days of receiving signed caregiver consent. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility | **Corrective Action Plan Status:** Approved  **Status Date:** 05/16/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  On November 27, 2024, the district submitted updated timeline procedures as a component of its Indicator 11 Corrective Action Plan. The procedures were reviewed and approved by PSM staff. By September 30, 2025, the district will submit evidence of training provided to relevant staff on the procedures. Evidence will include training materials, agenda, and attendance sheets.  By January 30, 2026, The Office of Public School Monitoring will conduct a review of student records across all grade levels and schools in the regional district, to ensure the district issued the proposed IEP and proposed placement to the parent within 45 school-working days of receipt of written parental consent to an initial evaluation or re-evaluation. For any identified non-compliance, the district will submit a root cause analysis and a description of appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  09/30/2025  01/30/2026 | | |

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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 and interviews indicated the district does not always provide the proposed IEP and proposed placement to the parent immediately following the development of the IEP. | | |
| **Description of Corrective Action:**  Due to several contributing factors, including staffing shortages, onboarding of new personnel, and an overall increase in student numbers, the district was found to be out of compliance with certain requirements.    Planned Outcomes and Corrective Actions: The district will develop and implement tracking systems to ensure compliance with Individualized Education Program (IEP) requirements. Existing procedures and timelines will be reviewed and revised as necessary to support compliance. These updated procedures will be incorporated into training for both new and returning staff.  Key Milestones: By September 30, 2025: The district will provide documentation demonstrating completion of staff training on revised procedures. By January 30, 2026: The district will submit evidence of internal monitoring, including data collected from a random sample of IEP records. The District will collaborate with the Department to collect and review a second data set for further analysis. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services | | **Expected Date of Completion:**  04/25/2026 |
| **Evidence of Completion of the Corrective Action:**  The district will submit the following documentation to demonstrate progress toward compliance:   * A copy of the IEP Team Meeting Checklist along with detailed procedures used to guide compliant IEP meetings; * Evidence of staff training, including training materials (e.g., agendas, presentation slides, handouts), signed attendance sheets or verification forms indicating staff participation, and acknowledgment of content understanding; and * A compliance tracking report for each school site, outlining the status of IEP implementation and adherence to timelines. | | |
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| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved  **Status Date:** 05/16/2025  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  On November 27, 2024, the district submitted updated timeline procedures as a component of its Indicator 11 Corrective Action Plan. The procedures were reviewed and approved by PSM staff.  By September 30, 2025, the district will submit evidence of training provided to relevant staff on the procedures. Evidence will include training materials, agenda, and attendance sheets.  By January 30, 2026, The Office of Public School Monitoring will conduct a review of student records across all grade levels and schools in the regional district to ensure the district issued the proposed IEP and proposed placement to the parent immediately following the development of the IEP. For any identified non-compliance, the district will submit a root cause analysis and a description of appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  09/30/2025  01/30/2026 | | |