

**Norfolk County Agricultural High School**

**Tiered Focused Monitoring Report**

**Continuous Improvement and Monitoring Plan**

**For** **Group B Universal Standards**

**Tier Level** **1**

**Dates of Onsite Visit:** **December 7- 8, 2022**

**Date of Final Report:** **March 15, 2023**

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**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**

**TIERED FOCUSED MONITORING REPORT**

**Norfolk County Agricultural High School**

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**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**

# **TIERED FOCUSED MONITORING REPORT INTRODUCTION**

During the 2022-2023 school year, Norfolk County Agricultural High School participated in a Tiered Focused Monitoring Review (TFM) conducted by the Department’s Office of Public School Monitoring (PSM). The purpose of the Tiered Focused Monitoring Review is to monitor compliance with regulatory requirements focusing on special education and civil rights.

Each school district, charter school, vocational school, and virtual school undergoes a Tiered Focused Monitoring Review every three years. The statewide Tiered Focused Monitoring cycle is posted at <<https://www.doe.mass.edu/psm/tfm/6yrcycle.html>>.

Regularly monitored standards are divided into two groups, known as Group A Universal Standards and Group B Universal Standards. Districts and schools are monitored on an alternate set of Universal Standards every three years.

Group A Universal Standards address:

* Student identification
* IEP development
* Programming and support services
* Equal opportunity

Group B Universal Standards address:

* Licensure and professional development
* Parent/student/community engagement
* Facilities and classroom observations
* Oversight
* Time and learning
* Equal access

The Department has also reserved a specific set of criteria, collectively known as Targeted Standards, employed if LEA or school level risk assessment data indicate there is a potential issue; the identified Targeted Standards are assessed in addition to the Universal Standards.

Universal Standards and Targeted Standards are aligned with the following regulations:

Special Education (SE)

* Selected requirements from the federal Individuals with Disabilities Education Act (IDEA-2004); the federal regulations promulgated under that Act at 34 CFR Part 300; M.G.L. c. 71B, and the Massachusetts Board of Education’s Special Education regulations (603 CMR 28.00), as amended effective March 1, 2007.

Civil Rights Methods of Administration and Other General Education Requirements (CR)

* Selected federal civil rights requirements, including requirements under the Every Student Succeeds Act (ESSA); Title VI of the Civil Rights Act of 1964; the Equal Educational Opportunities Act of 1974; Title IX of the Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; and Title II of the Americans with Disabilities Act of 1990, together with selected state requirements under M.G.L. c. 76, Section 5 as amended by Chapter 199 of the Acts of 2011 and M.G.L. c. 269 §§ 17 through 19.
* Selected requirements from the Massachusetts Board of Education’s Physical Restraint regulations (603 CMR 46.00).
* Selected requirements from the Massachusetts Board of Education’s Student Learning Time regulations (603 CMR 27.00).
* Various requirements under other federal and state laws.

**PSM Team:**

Depending upon the size of a school district and the number of special education programs to be reviewed, a team of one to four Department staff members conducts onsite activities over one to five days in a school district or charter school.

**Tier Level:**

The level of monitoring varies based on tier designation, aligning supports to the level of need and ensuring that districts and schools with greater needs receive appropriate supports to make sustained improvements.

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| Tier | Title | Description |
| 1 | Self-Directed Improvement | Data points indicate no concern on compliance and student outcomes. |
| 2 | Directed Improvement | No demonstrated risk in areas with close link to student outcomes. |
| 3 | Corrective Action | Areas of concern include both compliance and student outcomes. |
| 4 | Cross-unit Support and Corrective Action | Areas of concern have a profound effect on student outcomes and ongoing compliance. |

For the 2022-2023 school year, the tier assignments are based on:

* Annual drop-out rate for students with disabilities
* Five-year cohort graduation rate for students with disabilities
* Public School Monitoring compliance data from the previous review
* Problem Resolution System data, specifically findings of noncompliance
* Special education SPP/APR compliance Indicator data for Indicators 4B, 9 & 10
  + Indicator 4B: Significant discrepancy by race or ethnicity in removal of students with

IEPs greater than 10 days

* + Indicator 9: Overall disproportionate representation of racial and ethnic groups identified

as eligible for special education

* + Indicator 10: Disproportionate representation of racial and ethnic groups within specific

disability categories

* Special education SPP/APR performance Indicator data for Indicators 5 & 6
  + Indicator 5: Education Environments (6-21)
  + Indicator 6: Preschool Environments
* Significant Disproportionality data 2021-2022 & 2022-2023

Tiering adjustments may be made for districts engaged in work with the Department’s Statewide System of Support and have schools identified as requiring assistance and intervention. Tiering assignments may also be adjusted for schools and districts unable to remedy noncompliance within one year of the previous TFM review, as well as for charter schools requiring additional oversight based on conditions of their charter.

**Report: For Tier 1 & 2 Tiered Focused Monitoring Reviews**

Following the onsite visit, the PSM team holds an informal exit meeting to summarize the review for the superintendent or charter school leader. Within approximately 20 business days of the onsite visit, the chairperson forwards the TFM Feedback Summary that includes findings from the Tiered Focused Monitoring Review to the superintendent or charter school leader.

As part of the reporting process, all districts/charter schools in Tiers 1 and 2 then develop a Continuous Improvement and Monitoring Plan (CIMP) for any criteria receiving a rating of "Partially Implemented," "Not Implemented," and “Implementation in Progress.” The CIMP is due to the Department within 20 business days after the issuance of the Feedback Summary and is subject to the Department’s review and approval. The CIMP outlines an action plan, identifies the success metric, describes the measurement mechanism, and provides a completion timeframe to bring those areas into compliance with the controlling statute or regulation. Department staff provide support and assistance to districts and charter schools on the development of a CIMP.

Once the CIMP is approved, it is issued as the Final Report.

Department staff also provide ongoing technical assistance as the school or district is implementing the approved CIMP. **School districts and charter schools must demonstrate effective resolution of noncompliance identified by the Department as soon as possible but in no case later than one year from the issuance of the Department’s Feedback Summary.**

For more information regarding the TFM Review Process, including district and parent resources, please visit < <https://www.doe.mass.edu/psm/tfm/default.html>>.

# **TIERED FOCUSED MONITORING FINAL REPORT**

**for Norfolk County Agricultural High School**

The Massachusetts Department of Elementary and Secondary Education conducted a Tiered Focused Monitoring Review at Norfolk County Agricultural High School during the week of December 5, 2022, to evaluate the implementation of Group B Universal Standards in the program areas of special education, civil rights, and other related general education requirements. The team appreciated the opportunity to interview staff and parents, to observe classroom facilities, and to review the programs underway in the school.

In preparing this report, the team reviewed extensive written documentation regarding the operation of the school’s programs, together with information gathered by means of the following Department program review methods:

**Self-Assessment Phase:**

* School review of special education and civil rights documentation for required elements including document uploads.
* Upon completion of the self-assessment, the school submitted the data to the Department for review.

**On-site Verification Phase:**

* Interviews of administrative, instructional, and support staff consistent with those criteria selected for onsite verification.
* Interview of a parent advisory council (PAC) representative.
* Review of additional documents for special education and civil rights.
* Surveys of parents of students in special education: Parents of students in special education were sent a survey that solicited information regarding their experiences with the school’s implementation of special education programs, related services, and procedural requirements.
* Observations of classrooms and other facilities: The onsite team visited a sample of classrooms and other school facilities used in the delivery of programs and services to determine general levels of compliance with program requirements.

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| The Tiered Focused Monitoring Report includes those criteria that were found by the team to be implemented in a “Commendable” manner, as well as criteria receiving a rating of "Partially Implemented," "Not Implemented," and “Implementation in Progress.” (Refer to the “Definition of Compliance Ratings” section of the report.) Tiered Focused Monitoring Reports do not include criteria receiving a rating of “Implemented” or “Not Applicable.” This will allow the district/school and the Department to focus their efforts on those areas requiring corrective action. Districts are expected to incorporate the corrective actions into their district and school improvement plans, including their professional development plans. |
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# **DEFINITION OF COMPLIANCE RATINGS**

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| **Commendable** | Any requirement or aspect of a requirement implemented in an exemplary manner significantly beyond the requirements of law or regulation. |
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| **Implemented** | The requirement is substantially met in all important aspects. |
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| **Implementation in Progress** | This rating is used for criteria containing new or updated legal requirements; the district has implemented any old requirements contained in the criterion and is training staff or beginning to implement the new requirements in such a way that the onsite team anticipates that the new requirements will be implemented by the end of the school year. |
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| **Partially Implemented** | The requirement, in one or several important aspects, is not entirely met. |
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| **Not Implemented** | The requirement is totally or substantially not met. |
| **Not Applicable** | The requirement does not apply to the school district or charter school. |

**Norfolk County Agricultural High School**

# **SUMMARY OF COMPLIANCE CRITERIA RATINGS**

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|  | **Universal Standards**  **Special Education** | **Universal Standards**  **Civil Rights and Other General Education Requirements** |
| **IMPLEMENTED** | SE 15, SE 32, SE 35, SE 36, SE 50, SE 51, SE 52, SE 52A, SE 54, SE 55, SE 56 | CR 3, CR 7, CR 7A, CR 7B, CR 7C, CR 8, CR 10A, CR 10B, CR 10C,  CR 12A, CR 16, CR 20, CR 21,  CR 22, CR 23 |
| **PARTIALLY**  **IMPLEMENTED** |  | CR 17A, CR 24, CR 25 |
| **NOT**  **IMPLEMENTED** | None |  |
| **NOT**  **APPLICABLE** | None |  |

The full list of criteria and information regarding the requirements can be found in Appendix B of the Tiered Focused Monitoring Toolkit available at < <https://www.doe.mass.edu/psm/resources/tfm-toolkit.docx>>.

| **CONTINUOUS IMPROVEMENT AND MONITORING PLAN** |
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| **Improvement Area** **1** |
| **Criterion:** CR 17A - Use of physical restraint on any student enrolled in a publicly-funded education program |
| **Rating:** Partially Implemented |
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| **Description of Current Issue:** A review of documents and staff interviews indicated that the school's restraint policy and procedures are inconsistent with 603 CMR 46.00. Specifically, the procedures do not include the following:   * A statement prohibiting mechanical restraint, medication restraint, prone restraint, and seclusion; * Specific circumstances when prone restraint may be permitted; * Methods for preventing student violence, self-injurious behavior, and suicide; * Methods for engaging parents in discussions about restraint prevention and use; and * Procedures for receiving and investigating complaints. |
| **LEA Outcome:** The school's restraint prevention and behavior support policy and procedures will be consistent with the regulations under 603 CMR 46.00 regarding appropriate responses to student behavior that may require immediate intervention. Additionally, all staff will be trained on the updated physical restraint prevention and behavioral support policy and procedures. |
| **Action Plan:** By April 12, 2023, the school will revise the physical restraint prevention and behavior support policy and procedures to be consistent with 603 CMR 46.00.  By September 15, 2023, the revised restraint prevention and behavior support policy and procedures will be approved by the Board of Trustees and disseminated to members of the school community.  By September 15, 2023, the school will conduct training for all staff on the revised restraint prevention and behavior support policy and procedures. |
| **Success Metric:** By September 2023 and beyond, the school's restraint prevention and behavior support policy and procedures will be consistent with regulations under 603 CMR 46.00. All staff will be trained on the revised policy and procedures.  Evidence:   * Revised restraint prevention and behavior support policy and procedures * Board of Trustees agenda and minutes demonstrating approval * Link to a posting of the revised policy and procedures on the school website * Staff training materials, agenda, and attendance |
| **Measurement Mechanism:** Continuing after the completion deadline, the Dean of Student Life will ensure the school conducts an annual review of the physical restraint policy and procedures for consistency with the regulations and all staff receive the required annual training. |
| **Completion Timeframe:** 09/15/2023 |
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| **Improvement Area 2** |
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| **Criterion:** CR 24 - Curriculum review |
| **Rating:** Partially Implemented |
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| **Description of Current Issue:** A review of documents and staff interviews indicated that while the school has contracted with an equity consultant to provide ongoing cultural proficiency training to faculty and staff, the school does not currently ensure that individual teachers review all 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. Furthermore, the school has not developed procedures to ensure that individual teachers use appropriate activities, discussions, and/or supplementary materials to provide balance and context for any stereotypes depicted in learning materials. |
| **LEA Outcome:** The school will ensure that individual teachers review all 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. The school will also ensure that appropriate activities, discussions, and/or supplementary materials are used to provide balance and context for any such stereotypes depicted in materials. |
| **Action Plan:** By April 12, 2023, the school leadership team will meet with staff from the Office of Public School Monitoring to learn more about the specific requirements of individual teacher curriculum review and the resources available in the DESE LEA Equity Guide and CR 24/25 Toolkit.  By September 15, 2023, the school will develop procedures, protocols, and tools to ensure individual teachers review all educational materials for bias and provide balance and context for any stereotypes depicted in materials. The school will also conduct training for teachers and other relevant staff on the newly developed procedures.  By November 20, 2023, the school will conduct internal monitoring of the implementation of the curriculum review process and document the results. Additional training will be provided as needed. |
| **Success Metric:** By November 2023, and beyond, all teachers will review all 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. Additionally, the school will ensure that appropriate activities, discussions and/or supplementary materials are used to provide balance and context for any stereotypes depicted in materials.  **Evidence:**   * Procedures, protocols, and tools for individual teacher review * Staff training materials, agenda, and attendance * Results of internal monitoring and additional training, as required |
| **Measurement Mechanism:** At the beginning of each school year, the school will provide training to all staff on the procedures, tools, and protocols for individual teacher review of all educational materials. The school will also implement quarterly internal monitoring of the implementation of curriculum review protocols and conduct additional training to address any identified needs. New staff will receive training as part of the onboarding process. |
| **Completion Timeframe:** 11/20/2023 |
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| **Improvement Area 3** |
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| **Criterion:** CR 25 - Institutional self-evaluation |
| **Rating:** Partially Implemented |
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| **Description of Current Issue:** A review of documents and staff interviews indicated that although the school has contracted with an equity consultant to provide ongoing cultural proficiency training to faculty and staff, the school does not currently evaluate all aspects of its 9-12 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. |
| **LEA Outcome:** The school will review all aspects of its 9-12 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 extracurricular activities. |
| **Action Plan:** By April 12, 2023, the school leadership team will meet with staff from the Office of Public School Monitoring to learn more about the elements of an institutional self-evaluation and the resources available in the Success Gaps Toolkit. This discussion will include guidance on assembling an appropriate team, preparing and sharing data, determining root causes, developing and implementing an action plan, and monitoring progress. The school will also develop procedures to ensure that an institutional self-evaluation occurs annually.  By September 15, 2023, the school will assemble an appropriate data team that will analyze relevant student data including achievement data, graduation data, special education placement data, discipline data, and any other relevant program access data. The team will also obtain stakeholder feedback on student access to all school programs by surveying athletics administrators, teachers, parents, and students. The team will use this information to identify any gaps or discrepancies in access by student subgroups.  By November 20, 2023, the school leadership and the data team will conduct an actionable root cause analysis of the identified gaps and create a corresponding action plan to address concerns. School leadership and the data team will also develop a timeline for implementation that includes progress monitoring. The school will maintain documentation of the progress monitoring activities and any additional actions taken to ensure equitable access. |
| **Success Metric:** By November 2023 and beyond, the school will complete an institutional self-evaluation, identify root causes, and develop corresponding action steps based upon the identified areas of concern. The school will also create procedures for ensuring the institutional self- evaluation occurs annually.  **Evidence:**   * Data analysis * Stakeholder surveys * Statement(s) identifying discrepancies * Actionable root cause analysis * Action plans that include progress monitoring |
| **Measurement Mechanism:** Continuing after the completion of the deadline, the school will annually conduct an institutional self-evaluation of its 9-12 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. The school leadership will implement appropriate actions as indicated by the results of the self-evaluation to address any access gaps. |
| **Completion Timeframe:** 11/20/2023 |
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