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

##### SPECIAL EDUCATION AND CIVIL RIGHTS

##### MONITORING REVIEW

## CORRECTIVE ACTION PLAN

District: Fall River Public Schools

Monitoring Onsite Year: 2023-2024

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 April 30, 2024.

**Mandatory One-Year Compliance Date:** **05/01/2025**

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

| **Criterion** | **Criterion Title** | **Rating** |
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| SE 51 | Appropriate special education teacher licensure | Partially Implemented |
| SE 53 | Use of paraprofessionals | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |

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

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| **Criterion & Topic:**  SE 51 Appropriate special education teacher licensure | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and staff interviews indicated that two special education teachers at the elementary level are not appropriately licensed. Additionally, at the high school, one staff member currently designing and providing special education services described in IEPs is not appropriately licensed to do so. | | |
| **Description of Corrective Action:**  All special education teachers who design and/or provide direct special education services on IEPs will hold an appropriate license or an approved waiver. The district will provide the Department with evidence that all teachers are appropriately licensed or on an approved waiver | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education, Executive Director of Human Resources | | **Expected Date of Completion:**  03/25/2025 |
| **Evidence of Completion of the Corrective Action:**  All staff members will have an appropriate license or approved waiver that will be submitted to the Department as evidence of the completion of corrective action. | | |
| **Description of Internal Monitoring Procedures:**  The district, through the Human Resource Department and the Special Education Department, will monitor special education teacher licensure on a monthly basis and contact both the special education teachers and supervisor of any non-compliance via email. The special education supervisor will follow up with special education teachers to ensure appropriate licensure or waiver is obtained. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 51 Appropriate special education teacher licensure | **Corrective Action Plan Status:** Approved  **Status Date:** 07/22/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By September 27, 2024, the district and the Department will review licensure status in the state’s Educator Licensure and Renewal (ELAR) system to ensure the three identified staff members hold an appropriate license or approved waiver. For each staff member who remains unlicensed, the district will develop and submit individual action plans designed to ensure the staff members obtain the appropriate license or approved waiver. Subsequent progress reports will be based on the licensure status of the identified staff. | | |
| **Progress Report Due Date(s):**    09/27/2024 | | |

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| **Criterion & Topic:**  SE 53 Use of paraprofessionals | | **Rating:**  Partially Implemented |
| **Department Findings:**  Document review and staff interviews indicated that nine paraprofessionals at the elementary level design and implement instruction for students with disabilities without the supervision of an appropriately certified or licensed professional who is proximate and readily available to provide such supervision. | | |
| **Description of Corrective Action:**  The district will conduct a root cause analysis and implement an action plan to ensure that paraprofessional staff who implement instruction are supervised by a licensed or certified staff member who is proximate and readily available to provide such supervision. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education, Special Education Supervisors in the building where the paraprofessionals are located | | **Expected Date of Completion:**  11/25/2024 |
| **Evidence of Completion of the Corrective Action:**  The district will submit evidence of conducting a root cause analysis and implementing action plan to ensure that paraprofessional staff who implement instruction are appropriately certified or licensed professionals. The district will also submit paraprofessional staff supervision logs. | | |
| **Description of Internal Monitoring Procedures:**  The district will maintain monthly supervision schedule/logs for each paraprofessional implementing instruction. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 53 Use of paraprofessionals | **Corrective Action Plan Status:** Approved  **Status Date:** 07/22/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By September 27, 2024, the district will review the current special education staffing status for instructional groupings. For any classrooms in which paraprofessionals continue to implement instruction, the district will submit a plan for supervision by an appropriately certified or licensed professional who is proximate and readily available to provide supervision. The plan will identify the title, role, and license of the person providing the supervision; a description of who will be designing instruction; how supervision will be provided; and how implementation of the supervisory plan will be monitored.  The plan will ensure that identified supervisory staff members are proximate and readily available to provide supervision and support to the paraprofessional. The plan will also make clear that paraprofessionals do not design instruction for students with disabilities.  By November 25, 2024, the district will provide evidence of internal monitoring, including specific supervision support provided for each paraprofessional implementing instruction. | | |
| **Progress Report Due Date(s):**  09/27/2024  11/25/2024 | | |

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | **Rating:**  Partially Implemented |
| **Department Findings:**  Facilities observation and staff interviews indicated that not all special education classrooms at Morton Middle School maximize the inclusion of special education students into the life of the school. Specifically, special education classrooms A116, A117, A118, and A119 on the first floor and A216, A218, and A219 on the second floor are clustered in a hallway separate from general education classrooms. Special education classroom B016, located on the ground floor, is also separate from general education classrooms. Furthermore, facility observations conducted at the Stone Therapeutic School indicated that three time-out rooms are not appropriate for the purposes of calming. | | |
| **Description of Corrective Action:**  This district conducted a walkthrough of the middle school building to gather information and develop a plan to maximize inclusion of students in special education programs into the life of the school. The plan includes revising floor plans and facilities allocation to maximize inclusion. Additionally, Stone Therapeutic School is moving to a new location in the next school year and all calming spaces will be large enough and appropriate for the purpose of calming. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Special Education, Principals, Chief Operating Officer | | **Expected Date of Completion:**  11/25/2024 |
| **Evidence of Completion of the Corrective Action:**  The district will submit floor plans of the classrooms at Morton Middle School and Stone Therapeutic School. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district’s Special Education Department will review special education facilities assignment prior to the start of the school year to ensure that special education instructional spaces maximize inclusion opportunities and calming spaces are appropriate for calming and of a size that can accommodate both a staff member and a student. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved  **Status Date:** 07/22/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By August 30, 2024, the district will submit updated floor plans for Morton Middle School and Stone Therapeutic School.  By November 25, 2024, the Department will conduct facilities observations of Morton Middle School and Stone Therapeutic School to ensure special education facilities are compliant. | | |
| **Progress Report Due Date(s):**  08/30/2024  11/25/2024 | | |

**CIVIL RIGHTS**

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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 has recently updated the student handbook to include procedures for in-school suspension; alternatives to suspension; discipline procedures for special education students and students not yet determined eligible; and procedures for placement in interim alternative educational settings. However, the updated student handbook has not been shared with the school committee or disseminated to members of the school community. | | |
| **Description of Corrective Action:**  The district will ensure that the student handbooks are shared with the school committee and disseminated to members of the school community. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Executive Director of Human Resources | | **Expected Date of Completion:**  8/30/2024 |
| **Evidence of Completion of the Corrective Action:**  By August 30, 2024, the district will submit links to the approved handbooks as well as the school committee agenda and minutes indicating approval. The district will also submit the faculty meeting agenda where revisions were discussed. | | |
| **Description of Internal Monitoring Procedures:**  The district will ensure that handbooks are reviewed annually and updated as necessary to ensure consistency with the regulations. Additionally, the updated student handbooks will be shared with the school committee and 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:** 07/22/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By August 30, 2024, the district will submit evidence that the revised handbooks, including procedures for in-school suspension; alternatives to suspension; discipline procedures for special education students and students not yet determined eligible; and procedures for placement in interim alternative educational settings, have been approved by the school committee and disseminated to staff, students, and families. | | |
| **Progress Report Due Date(s):**  08/30/2024 | | |

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| **Criterion & Topic:**  CR 10B Bullying Intervention and Prevention | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and staff interviews indicated that although the district provides training to staff on bullying intervention and prevention, the training does not include the following required topics:   * Developmentally appropriate strategies to prevent bullying incidents; * Developmentally appropriate strategies for immediate, effective interventions to stop bullying incidents; * Information regarding the complex interaction and power differential that can take place between and among a perpetrator, victim, and witnesses to the bullying; * Research findings on bullying, including information about specific categories of students who have been shown to be particularly at risk for bullying in the school environment; and * Internet safety issues as they relate to cyber-bullying. | | |
| **Description of Corrective Action:**  The district will update the bullying prevention and intervention training provided to all staff to include all the required elements. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Student Supports and Executive Director of Human Resources | | **Expected Date of Completion:**  11/25/2024 |
| **Evidence of Completion of the Corrective Action:**  The district will submit the approved revised bullying prevention and intervention training materials and evidence of staff training. | | |
| **Description of Internal Monitoring Procedures:**  The Assistant Superintendent will annually review the district's bullying prevention and intervention plan to ensure it addresses all the required components. The plan shall be updated at least biennially in accordance with M.G.L.c.71, s.37O. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 07/22/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By August 30, 2024, the district will submit evidence that the bullying prevention and intervention training has been updated to meet all requirements.  By November 25, 2024, the district will submit evidence that all staff have received the updated bullying prevention and intervention training. | | |
| **Progress Report Due Date(s):**  08/30/2024  11/25/2024 | | |

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| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and staff interviews indicated that although the district has developed new restraint and behavior support policy and procedures that include the use of time-out, such procedures do not include a process for obtaining the principal's approval of time-out that extends beyond 30 minutes. | | |
| **Description of Corrective Action:**  The district will revise the current procedures related to use of physical restraint and time-out to include a process for obtaining principal approval of a time-out that extends beyond 30 minutes and provide all relevant staff with training on the updated procedures. | | |
| **Title/Role(s) of Responsible Persons:**  Chief Compliance Officer for Special Education | | **Expected Date of Completion:**  11/25/2024 |
| **Evidence of Completion of the Corrective Action:**  Revised procedures that include a process for obtaining principal approval of a time-out that extends beyond 30 minutes and evidence of staff training. | | |
| **Description of Internal Monitoring Procedures:**  The Executive Director of Human Resources will review the restraint and behavior support policy and procedures annually to ensure alignment with the current regulations prior to the start of the school year. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Approved  **Status Date:** 07/22/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By August 30, 2024, the district will submit the revised time-out room procedures that include a process for obtaining the principal's approval of a time-out that extends beyond 30 minutes.  By November 25, 2024, the district will submit evidence that all staff have been trained on the revised time-out procedures. | | |
| **Progress Report Due Date(s):**  08/30/2024  11/25/2024 | | |

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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 training to all school personnel on civil rights responsibilities, the training does not address the prevention of discrimination and harassment or the appropriate methods for responding to it in the school setting. | | |
| **Description of Corrective Action:**  The district will update the content of the civil rights training to include prevention of discrimination and harassment and the appropriate methods for responding to discrimination and harassment in the school setting. The district will also conduct all staff training using the updated materials. | | |
| **Title/Role(s) of Responsible Persons:**  Executive Director of Human Resources | | **Expected Date of Completion:**  11/25/2024 |
| **Evidence of Completion of the Corrective Action:**  Revised civil rights responsibilities training documents that include all the required content and evidence of staff training. | | |
| **Description of Internal Monitoring Procedures:**  The Human Resources Department will annually review all training materials related to civil rights responsibilities prior to the start of the school year to ensure they are consistent with the current regulations. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date:** 07/22/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By August 30, 2024, the district will submit revised civil rights training that addresses the prevention of discrimination and harassment and the appropriate methods for responding to it in the school setting.  By November 25, 2024, the district will submit evidence that all staff have received the updated civil rights training. | | |
| **Progress Report Due Date(s):**  08/30/2024  11/25/2024 | | |

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| **Criterion & Topic:**  CR 24 Curriculum review | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and staff interviews indicated that while the district has a curriculum review process and provides training on the process to department chairs and instructional coaches, the district does not 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 district does not ensure that teachers use appropriate activities, discussions, and/or supplementary materials to provide balance and context for any stereotypes depicted in such learning materials. | | |
| **Description of Corrective Action:**  The district will review its process for curriculum review for bias and revise the procedures to ensure that individual teachers review all educational materials for bias and use appropriate activities, discussions, and/or supplementary materials to provide balance and context for any stereotypes depicted in such learning materials. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  01/03/2025 |
| **Evidence of Completion of the Corrective Action:**  Revised curriculum review protocol and templates, evidence of training all teachers on curriculum review protocols, completed samples of curriculum review templates from across the district. | | |
| **Description of Internal Monitoring Procedures:**  The district will conduct quarterly reviews of completed curriculum review templates and conduct a teacher survey on curriculum review at least twice per year to ensure the curriculum review procedures are implemented consistently. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 07/22/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By September 27, 2024, the district will submit updated curriculum review protocols and templates.  By November 25, 2024, the district will submit evidence that all teachers have received training on the curriculum review protocols and templates and the of use appropriate activities, discussions, and/or supplementary materials to provide balance and context for any stereotypes depicted in learning materials.  By January 3, 2025, the district will submit evidence of implementation of the curriculum review protocols including samples of completed curriculum review templates. The district will also submit a summary of the results of the review and any proposed actions secondary to the results. | | |
| **Progress Report Due Date(s):**  09/27/2024  11/25/2024  01/03/2025 | | |