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

##### SPECIAL EDUCATION AND CIVIL RIGHTS

##### MONITORING REVIEW

## CORRECTIVE ACTION PLAN

Holbrook 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 07/08/2024.

**Mandatory One-Year Compliance Date:** **July 8, 2025**

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

| **Criterion** | **Criterion Title** | **Rating** |
| --- | --- | --- |
| SE 2 | Required and optional assessments | Partially Implemented |
| SE 6 | Determination of transition services | Partially Implemented |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 9 | Timeline for determination of eligibility | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 42 | Programs for young children three and four years of age | Partially Implemented |
| CR 10C | Student Discipline | Partially Implemented |
| CR 13 | Availability of information and academic counseling on general curricular and occupational/vocational opportunities | 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 2 Required and optional assessments | **Rating:** Partially Implemented |
| **Department Findings:** A review of student records and staff interviews indicated that the district does not always conduct all required assessments for initial and re-evaluations. Specifically, evaluations do not always include an educational assessment completed by a school representative that includes a history of the student's educational progress in the general curriculum (Educational Assessment A) and an assessment completed by a teacher(s) with current knowledge of the student's specific abilities, attention skills, participation behaviors, communication skills, memory, and social skills (Educational Assessment B). |
| **Description of Corrective Action:** The district will * Review and update the evaluation procedures specific to conducting required assessments to address 1) an educational assessment completed by a school representative that includes a history of the student’s educational progress in the general curriculum (Educational Assessment A) and 2) an assessment completed by a teacher(s) with current knowledge of the student's specific abilities, attention skills, participation behaviors, communication skills, memory, and social skills (Educational Assessment B).
* Provide training to all applicable staff on the updates to the procedures to streamline the processes across all evaluation teams.
* Create and implement a monitoring tracker for all required evaluations that includes current and pending evaluations.
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| **Title/Role(s) of Responsible Persons:**Director of Special Education, Building Administration, School Psychologist. | **Expected Date of Completion:**08/29/2024 |
| **Evidence of Completion of the Corrective Action:*** Updated evaluation procedures
* Internal monitoring and tracking system to include an Individualized Education Program (IEP)/evaluation Team Chair checklist
* Training materials, agenda(s), attendance sheet(s)
 |
| **Description of Internal Monitoring Procedures:** The Director of Special Education, in conjunction with building special education leaders and school psychologists, will consistently review the monitoring tracker to ensure required evaluations are conducted and completed. The tracker will be updated weekly to reflect changes in any evaluation data and status. For any noncompliance, the district will identify the appropriate corrective action including but not limited to additional training or coaching. This tracker will also incorporate evaluation timelines (See also SE 9/18B). |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved **Status Date:** 08/27/2023 **Correction Status:** Not Corrected |
| **Required Elements of Progress Reports:** By September 30, 2024, the district will complete educational assessments and reconvene the Team for students identified at the time of the onsite. Evidence will include Educational Assessments A and B, Meeting Invite (N3), Meeting Attendance (N3A), meeting summary notes and updated IEP and/or amendments, if applicable.By October 28, 2024, the district will submit evidence that its special education staff are trained on the new evaluation procedures. Evidence will include meeting agendas, attendance sheets, and the materials used to train staff on the updates.By January 13, 2025, the Department will conduct a review of student records across all grade levels, for evidence that the district completes an educational assessment by a school representative that includes a history of the student's educational progress in the general curriculum (Educational Assessment A) and an assessment completed by a teacher(s) with current knowledge of the student's specific abilities, attention skills, participation behaviors, communication skills, memory, and social skills (Educational Assessment B). For any identified noncompliance, the district will submit a root cause analysis and a description of appropriate corrective action. |
| **Progress Report Due Dates:** 09/30/202410/28/202401/13/2025 |

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

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| **Criterion & Topic:** SE 6 Determination of transition services | **Rating:** Partially Implemented |
| **Department Findings:** A review of a student record indicated that when one purpose of the Team meeting is to discuss transition services, the district does not always invite a representative of a participating public agency that is likely to be responsible for providing or paying for transition services. |
| **Description of Corrective Action:** The district identified through a root cause analysis that there is no current procedure for tracking agency representative invitations to Team meetings, and that the requirement to invite an agency is not known by all special education staff. The district will * Conduct an internal review utilizing its new tracking system of secondary special education student files to ensure that a representative of a participating public agency that is likely to be responsible for providing or paying for transition services in invited to the Team meeting.
* Track active 688 referrals
* Provide professional development and training to all special education staff of secondary special education students
 |
| **Title/Role(s) of Responsible Persons:**Director of Special Ed. Building Admin. Secondary Special Ed. Staff | **Expected Date of Completion:**08/29/2024 |
| **Evidence of Completion of the Corrective Action:*** Newly developed secondary transition procedures
* Internal monitoring and tracking system
* Training materials, agenda(s), attendance sheet(s)
 |
| **Description of Internal Monitoring Procedures:** The Director of Special Education, in conjunction with the high school special education coordinator, will review the tracking system updated weekly by the coordinator.The Director of Special Education and high school special education coordinator will conduct a quarterly internal review of records of students transitioning with agency involvement. For any noncompliance the district will identify the appropriate corrective action, including but not limited to training or coaching and reconvening Team meetings as necessary. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 6 Determination of transition services | **Corrective Action Plan Status:** Approved **Status Date:** 08/27/2024 **Correction Status:** Not Corrected |
| **Required Elements of Progress Reports:** By September 30, 2024, the district will reconvene the IEP team meetings for the students identified at the time of the onsite. Evidence will include the Meeting Invitation (N3), Attendance Sheet (N3A), the updated IEP and/or an amendment.By October 28, 2024, the district will create and submit a tracker for 688 referrals and agency contact information. The tracker will include a checkpoint for agency invitation to Team meetings.By October 28, 2024, the district will submit evidence that all secondary special education staff are trained on the requirements of inviting agency representatives to student Team meetings where applicable, and on the updated agency referral and IEP Team meeting invitation procedures. Evidence of training will include attendance sheets, agendas, and materials used to train staff on the requirements. By January 13, 2025, the Department will conduct a review of student records of secondary students, for evidence that when one purpose of the Team meeting is to discuss transition services, the district invites a representative of a participating public agency that is likely to be responsible for providing or paying for transition services. For any identified noncompliance, the district will submit a root cause analysis and a description of appropriate corrective action. |
| **Progress Report Due Dates:** 09/30/202410/28/202401/13/2025 |

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| **Criterion & Topic:** SE 8 IEP Team composition and attendance | **Rating:** Partially Implemented |
| **Department Findings:** A review of student records and staff interviews indicated that when a Team member does not attend the Team meeting, the district does not always follow the required procedures, including the following: * Documenting, in writing, that the district and the parent agree the attendance of the Team member is not necessary because the member's area of the curriculum or related services is not being modified or discussed; or
* Documenting, in writing, the district and the parent agree to excuse a required Team member's participation, and the excused member provides written input into the development of the IEP to the parent and the IEP Team prior to the meeting.
 |
| **Description of Corrective Action:** Provide professional development to building administration and special education staff on use of excusal forms. Specifically on district procedures that clearly outlines 1) The district documents, in writing, that the district and the parent agree the attendance of the Team member is not necessary because the member's area of the curriculum or related services is not being modified or discussed; or 2) Documents, in writing, the district and the parent agree to excuse a required Team member's participation and the excused member provides written input into the development of the IEP to the parent and the IEP Team prior to the meeting. |
| **Title/Role(s) of Responsible Persons:**Director of Special Education, Building Administration, Special Education Staff | **Expected Date of Completion:**08/29/2024 |
| **Evidence of Completion of the Corrective Action:*** Root cause analysis and action plan
* Develop an internal monitoring and tracking system
* Training materials, agenda (s), attendance sheets
 |
| **Description of Internal Monitoring Procedures:** The Director of Special Education, in conjunction with the building special education administrators, will conduct a quarterly internal review of records across all grade levels to ensure the excusal process/procedures are documented in the IEP. For any noncompliance, the district will identify the appropriate corrective action, including but not limited to, training or coaching and reconvening Team meetings as necessary.  |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Approved **Status Date:** 08/27/2024 **Correction Status:** Not Corrected |
| **Required Elements of Progress Reports:** By October 28, 2024, the district will submit a root cause analysis regarding IEP Team attendance procedures and documentation. The analysis will include an action plan based on the findings identified to prevent future noncompliance, including a system for tracking Team attendance. For any identified gaps and discrepancies, the district will update the procedures accordingly.By October 28, 2024, the district will submit evidence of training special education staff on the updated Team meeting procedures. Evidence will include agendas, attendance sheets, and training documents. By January 13, 2025, the Department will conduct a review of student records across all grade levels, for evidence that the district follows the required procedures for IEP Team attendance documentation. For any identified non-compliance, the district will submit a root cause analysis and a description of appropriate corrective action. |
| **Progress Report Due Dates:** 10/28/202401/13/2025 |

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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 determine whether the student is eligible for special education and provide a proposed IEP and proposed placement to the parent within 45 school-working days of receiving written consent to an initial evaluation or re-evaluation. |
| **Description of Corrective Action:** The district will conduct a root cause analysis of its internal procedures for all initial and re-evaluations to determine and address gaps and discrepancies in tracking evaluation timelines. The district will implement a shared timeline document that includes testing, consent, and 30 and 45-day dates for all initial and re-evaluations and train all special education staff on the new evaluation timeline tracking procedures.  |
| **Title/Role(s) of Responsible Persons:**Director of Special Education, Building Administration, School Psychologist | **Expected Date of Completion:**08/29/2024 |
| **Evidence of Completion of the Corrective Action:*** Root cause analysis and action plan
* Develop an internal monitoring and tracking system
* Training materials, agenda (s), attendance sheets
 |
| **Description of Internal Monitoring Procedures:** The Director of Special Education, in conjunction with the building special education administrators, will conduct a quarterly internal review of records across all grade levels to ensure the timeline process/procedures are documented in the IEP. For any noncompliance, the district will identify the appropriate corrective action, including but not limited to, training or coaching and reconvening Team meetings as necessary. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 9 Timeline for determination of eligibility | **Corrective Action Plan Status:** Approved **Status Date:** 08/27/2024 **Correction Status:** Not Corrected |
| **Required Elements of Progress Reports:** By October 28, 2024, the district will submit a root cause analysis of its internal procedures for tracking evaluation timelines for all initial and re-evaluations to determine and address gaps and discrepancies in the procedures which lead to non-compliance. For the identified gaps and discrepancies, the district will update the procedures accordingly. By January 13, 2024, the Department will conduct a review of student records across all grade levels, for evidence that the district determines whether the student is eligible for special education and provides a proposed IEP and proposed placement to the parent within 45 school-working days of receiving written consent to an initial evaluation or re-evaluation. |
| **Progress Report Due Dates:** 10/28/202401/13/2025 |

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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 always issue the proposed IEP and proposed placement to the parent immediately following the development of the IEP. |
| **Description of Corrective Action:** A root cause analysis indicated that the non-compliance was a result of a lack of training of special education staff on requirements of provision of IEP to parents/guardians and a deficiency in the procedures for monitoring timelines. The action steps to be completed in the 2024-2025 school year include the following: * Review of procedures with special education administrative staff
* Provide training on the revised procedures to all relevant staff.
* Implement the internal monitoring and tracking system/procedures described below
 |
| **Title/Role(s) of Responsible Persons:**Special Education Director, Building Administration, Department Chairs | **Expected Date of Completion:**08/29/2024 |
| **Evidence of Completion of the Corrective Action:*** Training materials, agenda (s), attendance sheets
* Results of internal monitoring, include internal review of student records
 |
| **Description of Internal Monitoring Procedures:** At least annually, the leadership team will conduct a review of a representative sample of student records to determine the efficacy of the procedures and ensure that the district issues the proposed IEPs and proposed placements to the parent immediately following the development of the IEP.  For any noncompliance, the district will identify the appropriate corrective action, including but not limited to, training or coaching and reconvening Team meetings as necessary. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved **Status Date:** 08/27/2024 **Correction Status:** Not Corrected |
| **Required Elements of Progress Reports:** By October 28, 2024, the school will submit evidence that relevant staff have been trained in the updated procedures to ensure that the district issues the proposed IEP and proposed placement to the parent immediately following the development of the IEP. Evidence will include training materials, agenda, and attendance sheets. By January 13, 2025, the Department will conduct a review of student records across all grade levels, for evidence that the district issues 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 Dates:** 10/28/202401/13/2025 |

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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 five instructional groupings at John F. Kennedy Elementary School do not meet the following requirements for appropriate student to staff ratios and class sizes: Inclusionary programs:For public school programs that integrate students with and without disabilities, the class size does not exceed 20 students with 1 teacher and 1 aide and no more than 5 students with disabilities. If the number of students with disabilities is 6 or 7 then the class size does not exceed 15 students with 1 teacher and 1 aide. Substantially separate programs: Substantially separate programs are programs in which more than 50% of the students have disabilities. Substantially separate programs operated by the district limit class sizes to 9 students with 1 teacher and 1 aide. Specifically, four of the groupings listed below are identified by the district as inclusion classes, however, more than 50% of students in each grouping are students with disabilities. Groupings in which students with disabilities make up more than 50% of enrollment are considered substantially separate and must align with requirements identified above. Additionally, the substantially separate grouping contains 13 students, exceeding the allowable class size limit of 9 students.Integrated AM: Teachers:1; Aides:1; Students w/disabilities:8; Students w/o disabilities:5Integrated AM 2: Teachers:1; Aides:1; Students w/disabilities: 7; Students w/o disabilities:4Integrated PM 1: Teachers:1; Aides:1; Students w/disabilities:5; Students w/o disabilities:4Integrated PM 2: Teachers:1; Aides:1; Students w/disabilities: 7; Students w/o disabilities:5Substantially Separate: Teachers:1; Aides:2; Students w/disabilities: 13; Students w/o disabilities:0 |
| **Description of Corrective Action:** The district’s special education leadership and Preschool Coordinator conducted a root cause analysis to determine the reasons for noncompliance with instructional groupings at the preschool level. Results indicated that there was a challenge to enroll role model students for the integrated classrooms. In addition, the district determined that in cases where services could be provided outside of the school setting, some parents requested services to be provided in a setting with peers instead, and as such, the district fell out of compliance with ratio requirements to meet parental requests. To combat this from happening again, the district has re-allocated special education students in each cohort/class and has additional space for more special education students. If the district identifies that instructional groupings numbers are going to be noncompliant, the district has also been approved to add two new preschool classrooms with teachers and aides. |
| **Title/Role(s) of Responsible Persons:**Early Intervention Coordinator, Special education Director, Building Administration | **Expected Date of Completion:**07/01/2025 |
| **Evidence of Completion of the Corrective Action:*** Preschool classroom instructional grouping for SY 25
* Internal monitoring and tracking system, including root cause analysis for any noncompliance
 |
| **Description of Internal Monitoring Procedures:** District leadership and the Preschool Special Education Coordinator will conduct monthly reviews of placement data at a district-wide level and will check preschool instructional groupings as part of the review. As reviews continue, if the number of students who are undergoing special education/found eligible affect the requirements for appropriate to student to staff ratios and class sizes, it will open its new approved preschool classroom(s).  |
| 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:** 08/27/2024 **Correction Status:** Not Corrected |
| **Required Elements of Progress Report:** By October 28, 2024, the district will submit the instructional groupings for each preschool classroom for the 2024-2025 school year using the Preschool Grouping Worksheet located in the Document Library of WBMS under the heading Public School Templates. If applicable, for any noncompliance identified, the district will conduct a root cause analysis and action plan to address the noncompliance. |
| **Progress Report Due Date:** 10/28/2024 |

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| **Criterion & Topic:** CR 10C Student Discipline | **Rating:** Partially Implemented |
| **Department Findings:** A review of documents and staff interviews indicated that the district has not developed a school-wide education service plan describing the education services that the school district will make available to students placed on long-term suspension or expulsion. Additionally, the district does not periodically review and disaggregate discipline data by race and ethnicity, gender, socioeconomic status, English language learner status, and disability status to assess the extent and impact of disciplinary actions, such as in-school suspensions, short and long-term suspensions, expulsions, and emergency removals, on selected student populations so that disciplinary practices can be modified to address any discrepancies. |
| **Description of Corrective Action:** The district will conduct an internal review of its discipline policies and procedures to ensure that a school-wide education service plan is in place and contains the requirements. Additionally, the district will create procedures for periodic review of discipline data, to include disaggregation by race, ethnicity, gender, socioeconomic status, English language learner status, and disability status to assess the extent and impact of disciplinary actions. The data review procedures will also include modification as needed for addressing discrepancies in the data. Lastly, the district train administrative staff involved in the discipline data reviews on the new procedures, and all staff on the updates to the procedures including the school-wide education service plan. Both the updated procedures and the school-wide education service plan will be disseminated to the community.  |
| **Title/Role(s) of Responsible Persons:**Building Administration, Director of Pupil Personnel, School Committee sub committee | **Expected Date of Completion:**07/01/2025 |
| **Evidence of Completion of the Corrective Action:*** Updated policy/procedures re: periodic review and disaggregation of discipline data
* School-Wide Education Service Plan (SWESP)
* Dissemination of procedures and SWESP
* Training materials, agenda (s), attendance sheets
 |
| **Description of Internal Monitoring Procedures:** District leadership, including the Superintendent, building principals and Director of Special Education, will conduct an annual review of the discipline procedures and policies, including the School-Wide Education Service Plan, to ensure that all requirements are met, and conduct a quarterly review of all discipline data to assess the extent and impact of disciplinary actions for addressing discrepancies. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10C Student Discipline | **Corrective Action Plan Status:** Approved **Status Date:** 08/27/2024 **Correction Status:** Not Corrected |
| **Required Elements of Progress Reports:** By October 28, 2024, the district will disseminate and submit a school-wide education service plan that contains all the required elements. By October 28, 2024, the district will create procedures for district leadership to periodically review discipline data, including disaggregation by race, ethnicity, gender, socioeconomic status, English language learner status, and disability status. By October 28, 2024, the district will submit evidence of training staff on the updated discipline procedures, including discipline data reviews and the school-wide education service plan. By January 13, 2024, the district will submit its most recent discipline data review conducted by district leadership. For any discrepancies identified, the district will conduct and submit a root cause analysis and action plan to address the issues noted. |
| **Progress Report Due Dates:** 10/28/202401/13/2025 |

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| **Criterion & Topic:** CR 13 Availability of information and academic counseling on general curricular and occupational/vocational opportunities | **Rating:** Partially Implemented |
| **Department Findings:** During the 2023-2024 monitoring review conducted by the Office of Language Acquisition (OLA), it was determined that the district does not ensure that English learners (ELs) are taught to the same academic standards and curriculum as all students. OLA issued an ELE 5 Program Placement and Structure finding in April 2024 indicating the following: * English Immersion (SEI) classes do not consistently shelter core content to make it accessible for ELs; and
* ELs do not consistently receive the required sheltered content instruction or strategies necessary for them to access instruction that is grade level appropriate.
 |
| **Description of Corrective Action:** The district is working on the Continuous Improvement and Monitoring Plan (CIMP) provided by the Office of Language Acquisition (OLA).  |
| **Title/Role(s) of Responsible Persons:**Stefanie DeRosa, Director of Curriculum, Rob Compton, Special Education Director | **Expected Date of Completion:**07/25/2025 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 13 Availability of information and academic counseling on general curricular and occupational/vocational opportunities | **Corrective Action Plan Status:** Approved **Status Date:** 08/27/2024 **Correction Status:** Corrected |
| **Basis for Decision:** Corrective action for this finding will be reviewed and approved by the Office of Language Acquisition (OLA) through the district's Continuous Improvement Monitoring Plan (CIMP), approved by OLA in April 2024. The Office of Public School Monitoring (PSM) will maintain communication with OLA throughout the progress reporting stage to track the district's progress towards correction of noncompliance. |

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| **Criterion & Topic:** CR 18 Responsibilities of the school principal | **Rating:** Partially Implemented |
| **Department Findings:** During the 2023-2024 monitoring review conducted by the Office of Language Acquisition (OLA), it was determined that the district does not consistently offer adequate and appropriate services for linguistic minority students. OLA issued an ELE 5 Program Placement and Structure finding in April 2024 indicating the following: * The district does not consistently support an ESL curriculum across all grades and proficiency levels;
* The district has not established a process to assess and track the progress of English learners in identified areas of improvement; and
* The district lacks ESL staffing and district level administrative capacity to effectively provide essential components of an effective ELE program.
 |
| **Description of Corrective Action:** The district is working on the Continuous Improvement and Monitoring Plan (CIMP) provided by the Office of Language Acquisition (OLA). |
| **Title/Role(s) of Responsible Persons:**Stefanie DeRosa, Director of Curriculum, Josh Tarsky and Mallory Stevens, Principals | **Expected Date of Completion:**07/08/2025 |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved **Status Date:** 08/27/2024 **Correction Status:** Corrected |
| **Basis for Decision:** Corrective action for this finding will be reviewed and approved by the Office of Language Acquisition (OLA) through the district’s Continuous Improvement Monitoring Plan (CIMP), approved by OLA in April 2024. The Office of Public School Monitoring (PSM) will maintain communication with OLA throughout the progress reporting stage to track the district’s progress towards correction of noncompliance.  |