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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: Westport 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 10/12/2024.

**Mandatory One-Year Compliance Date:** **10/12/2025**

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

| **Criterion** | **Criterion Title** | **Rating** |
| --- | --- | --- |
| 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 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 22 | IEP implementation and availability | Partially Implemented |
| SE 49 | Related services | Partially Implemented |
| CR 18 | Responsibilities of the school principal | Partially Implemented |

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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 and staff interviews indicated that the district does not always obtain consent from adult students with shared decision-making authority to continue their special education program. | | |
| **Description of Corrective Action:**  The district will conduct a root cause analysis and implement an action plan to ensure that the district always obtains consent from adult students with shared decision-making to continue their special education program.  The district will obtain consent from the students identified by the Department record review. The district will use the internal monitoring Age of Majority tracking system to identify and correct any additional noncompliance. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinators, Special Education Clerk, HS  Special Educators | | **Expected Date of Completion:**  05/02/2025 |
| **Evidence of Completion of the Corrective Action:**  Individual student correction, root cause analysis, any revised procedures, a description of an internal monitoring system, evidence of staff training, and results of the Department’s record review. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will train all relevant staff on the age of majority requirements. The district will implement an Age of Majority tracking system, reviewed at least quarterly by the Special Education Coordinator, 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:** 11/08/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By November 26, 2024, the district will submit a root cause analysis, any revised procedures, and a description of the district’s internal monitoring system. The district will also submit evidence that consent was obtained from the students identified by the Department record review as well as from any additional students with shared decision-making identified by the district’s internal tracking system.  By January 17, 2025, the district will submit evidence that all relevant staff have been trained on the age of majority requirements, district procedures, and internal monitoring system.  By May 2, 2025, the Department will conduct a review of a sample of transition-age student records to ensure requirements are being met. For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  11/26/2024  01/17/2025  05/02/2025 | | |

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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 and staff interviews indicated that the district does not always provide a proposed IEP and placement to the parent within forty-five school days of receipt of written consent to an initial evaluation or a re-evaluation. | | |
| **Description of Corrective Action:**  The district will conduct a root cause analysis and implement an action plan to ensure that  the district always provides parents a proposed IEP and placement within 45 school working days of receiving written parental consent to an initial evaluation or re-evaluation. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinators, Team Chairs | | **Expected Date of Completion:**  05/02/2025 |
| **Evidence of Completion of the Corrective Action:**  Root cause analysis, any revised procedures, a description of an internal monitoring system, evidence of staff training, and results of the Department’s record review. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will train all relevant staff on eligibility timelines, district procedures to ensure the timelines are met, and the district internal monitoring system. The district will implement a timeline tracking system, reviewed at least quarterly by the Special Education Coordinators, to ensure continued compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility | **Corrective Action Plan Status:** Approved  **Status Date:** 11/08/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By November 26, 2024, the district will submit a root cause analysis, any revised procedures, and a copy of the tracking system.  By January 17, 2025, the district will submit evidence that all relevant staff have been trained on the eligibility determination evaluation timeline requirements, district procedures, and internal monitoring system.  By May 2, 2025, the Department will conduct a review of a sample of student records to ensure requirements are met. For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  11/26/2024  01/17/2025  05/02/2025 | | |

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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:**  The district will conduct a root cause analysis and implement an action plan to ensure that the district always issues a proposed IEP and placement to the parent immediately following the development of the IEP. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinators | | **Expected Date of Completion:**  05/02/2025 |
| **Evidence of Completion of the Corrective Action:**  Root cause analysis, any revised procedures, a description of an internal monitoring system, evidence of staff training, and results of the Department’s record review. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will train all relevant staff on provision of the IEP and determination of placement requirements, district procedures to ensure the requirements are met, and the district internal monitoring system. The district will implement a tracking system, reviewed at least quarterly by the Special Education Coordinators, 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:** 11/08/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By November 26, 2024, the district will submit any revised procedures and a copy of the tracking system.  By January 17, 2025, the district will submit evidence that all relevant staff have been trained on the summary of performance progress reporting requirements, district procedures, and internal monitoring system.  By May 2, 2025, the Department will conduct a review of a sample of student records to ensure requirements are met. For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  11/26/2024  01/17/2025  05/02/2025 | | |

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| **Criterion & Topic:**  SE 22 IEP implementation and availability | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of student records and staff interviews indicated that, at times, the district delays implementation of some IEP consultation and related services due to lack of personnel. In such circumstances, the district makes concerted efforts to immediately inform parents in writing of the delayed services, reasons for delay, and the actions the district is taking to address the lack of personnel. The district was successful in hiring appropriate personnel for the 2024-2025 school year. In an effort to offer alternative methods to meet the goals on the accepted IEPs, the district logged the hours of service missed throughout the 2023-2024 school year and will provide appropriate compensatory services, as determined by IEP Teams, throughout the 2024-2025 school year. | | |
| **Description of Corrective Action:**  The district will ensure that all related services are provided to students as described in the IEP. The district successfully filled all related services positions for the 2024-2025 school year. The district provided compensatory services, as determined by IEP Teams, and completed evaluations for students over the summer of 2024. The district will ensure all outstanding evaluations are completed during the 2024-2025 school year. The district will develop a monitoring system to track the completion of outstanding evaluations. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinators, Team Chairs | | **Expected Date of Completion:**  05/02/2025 |
| **Evidence of Completion of the Corrective Action:**  Compensatory service decisions; compensatory services plans; compensatory services progress reports; copy of monitoring system to track delivery of services; copy of monitoring system to track completion of evaluations. | | |
| **Description of Internal Monitoring Procedures:**  The district will continue to log any missed services, immediately inform parents in writing of delayed services, and provide compensatory services as needed. The district will implement a tracking system of service provision, reviewed at least quarterly by Special Education Coordinators, to ensure continued compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 22 IEP implementation and availability | **Corrective Action Plan Status:** Approved  **Status Date:** 11/08/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By November 26, 2024, the district will submit evidence of compensatory services decisions for the students impacted by the lack of personnel in the 2023-2024 school year; student-specific compensatory services progress reports; and a copy of the monitoring system to track delivery of services and evaluation completion.  By January 17, 2025, the district will submit evidence of completing outstanding evaluations.  By May 2, 2025, the district will submit evidence that all compensatory services have been provided. | | |
| **Progress Report Due Date(s):**  11/26/2024  01/17/2025  05/02/2025 | | |

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| **Criterion & Topic:**  SE 49 Related services | | **Rating:**  Partially Implemented |
| **Department Findings:**  Please see SE 22 for information regarding related services. | | |
| **Description of Corrective Action:**  Please see SE 22 for information regarding related services. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Coordinators, Team Chairs | | **Expected Date of Completion:**  05/02/2025 |
| **Evidence of Completion of the Corrective Action:**  Please see SE 22 for information regarding related services. | | |
| **Description of Internal Monitoring Procedures:**  Please see SE 22 for information regarding related services. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 49 Related services | **Corrective Action Plan Status:** Approved  **Status Date:** 11/08/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  Please see SE 22 for information regarding related services. | | |
| **Progress Report Due Date(s):**  11/26/2024  01/17/2025  05/02/2025 | | |

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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 promote instructional practices responsive to student needs or ensure that adequate instructional supports are available for teachers and students, specifically for linguistic minority students. OLA issued an ELE 5 Program Placement and Structure finding in March 2024 indicating that the district does not have an ESL curriculum and has not adopted procedures to identify English learners (ELs) who do not meet English proficiency benchmarks.  Furthermore, the district has not established a process to do the following:  Identify areas in which identified ELs need improvement;  Establish personalized goals for ELs to attain English proficiency;  Assess and track the progress of ELs;  Review resources and services available to ELs; and  Incorporate input from parents or legal guardians. | | |
| **Description of Corrective Action:**  Please see the district’s Continuous Improvement and Monitoring Plan (CIMP) approved by the Office of Language Acquisition (OLA) in May 2024. | | |
| **Title/Role(s) of Responsible Persons:**  English Language Learner Director | | **Expected Date of Completion:**  12/31/2024 |
| **Evidence of Completion of the Corrective Action:**  Please see the district’s Continuous Improvement and Monitoring Plan (CIMP) approved by the Office of Language Acquisition (OLA) in May 2024. | | |
| **Description of Internal Monitoring Procedures:**  Please see the district’s Continuous Improvement and Monitoring Plan (CIMP) approved by the Office of Language Acquisition (OLA) in May 2024. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved  **Status Date:** 11/08/2024  **Correction Status:** Corrected | |
| **Required Elements of Progress Report(s):**  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 May 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.  OLA Progress Report Due Dates: 07/04/2024, 10/02/2024, 12/31/2024 | | |
| **Progress Report Due Date(s):**  11/26/2024  01/17/2025 | | |