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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: Weymouth 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 08/31/2024.

**Mandatory One-Year Compliance Date:** **08/31/2025**

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

| **Criterion** | **Criterion Title** | **Rating** |
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| SE 45 | Procedures for suspension up to 10 days and after 10 days | Partially Implemented |
| SE 46 | Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 10C | Student Discipline | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 23 | Comparability of facilities | 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 45 Procedures for suspension up to 10 days and after 10 days | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of student records and staff interviews indicated that when an eligible student with disabilities has been suspended for 10 days in any school year, during any subsequent removal the district does not always provide sufficient services for the student to continue to receive a free and appropriate public education. | | |
| **Description of Corrective Action:**  For the student(s) identified by the Department record review, the district will reconvene the Team to determine whether compensatory services are owed. The district will conduct a root cause analysis and implement an action plan to ensure that when an eligible student with disabilities has been suspended for 10 days in any school year, during any subsequent removal the district provides sufficient services for the student to continue to receive a free and appropriate public education. | | |
| **Title/Role(s) of Responsible Persons:**  Principals, Special Education Department Heads and Director of Student Services | | **Expected Date of Completion:**  02/14/2025 |
| **Evidence of Completion of the Corrective Action:**  For the student identified by the Department record review, the district will submit evidence of reconvening the Team, the Team determination, and evidence of compensatory services, if necessary. The district will submit a root cause analysis, any revised procedures, a description of an internal monitoring system, and evidence of staff training. The Department will conduct a review of records to ensure compliance. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will train all relevant staff on the discipline requirements for students with disabilities, including the determination and provision of FAPE services after 10 cumulative removals in the same school year; district procedures to ensure the requirements are met; and the district internal monitoring system. The district will implement a discipline data tracking system, reviewed at least quarterly by the Special Education Department Heads and the Director of Student Services to ensure ongoing compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 45 Procedures for suspension up to 10 days and after 10 days | **Corrective Action Plan Status:** Approved  **Status Date:** 09/25/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By October 25, 2024, the district will submit the meeting invitation, signed meeting attendance, meeting notes, N1, and, if necessary, a compensatory services plan for the student identified by the Department record review. The district will also submit a root cause analysis, any revised procedures, and a description of the district's internal monitoring system.  By December 13, 2024, the district will submit evidence that all relevant staff have been trained on the requirements for discipline of students with disabilities, district procedures, and internal monitoring system.  By February 14, 2025, the Department will select and review a sample of special education discipline 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):**  10/25/2024  12/13/2024  02/14/2025 | | |

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| **Criterion & Topic:**  SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of student records and staff interviews indicated that when a suspension constitutes a change in placement for a student with disabilities, the district does not always provide the notice of procedural safeguards to the parent no later than the date of the decision to take disciplinary action. | | |
| **Description of Corrective Action:**  The district will conduct a root cause analysis and implement an action plan to ensure that when a suspension constitutes a change in placement for a student with disabilities, the district always provides the notice of procedural safeguards to the parent no later than the date of the decision to take disciplinary action. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Student Services, Special Education Department Heads and Special Education Liaisons | | **Expected Date of Completion:**  02/14/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit a root cause analysis, any revised procedures, a description of an internal monitoring system, and evidence of staff training. The Department will conduct a review of records to ensure compliance. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will train all relevant staff on the requirements when a student with disabilities receives a suspension that results in a change of placement, 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 Department Heads, to ensure continued compliance. Data will also be reviewed annually by the Director of Student Services. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 46 Procedures for suspension of students with disabilities when suspensions exceed 10 consecutive school days or a pattern has developed for suspensions exceeding 10 cumulative days; responsibilities of the Team; responsibilities of the district | **Corrective Action Plan Status:** Approved  **Status Date:** 09/25/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By October 25, 2024, the district will submit a root cause analysis, any revised procedures, and a description of the district's internal monitoring system.  By December 13, 2024, the district will submit evidence that all relevant staff have been trained on the requirements, district procedures, and internal monitoring system.  By February 14, 2025, the Department will select and review a sample of 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):**  10/25/2024  12/13/2024  02/14/2025 | | |

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of floor plans, facilities observations, and staff interviews indicated that occupational therapy services and board certified behavior analysis (BCBA) interventions at Pingree Elementary School are provided on a stage in the gymnasium.  Please see CR 23 for additional facility concerns. | | |
| **Description of Corrective Action:**  The district will conduct a review of the school building to gather information and implement a plan to maximize inclusion of students in special education programs into the life of the school, provide accessibility in order to implement fully each student's IEP, and ensure that special education facilities are adequate for the type of instruction and number of students. The district will make building improvements at Pingree Elementary School that will involve substantial renovations projected to be completed by August 31, 2025. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Asst Superintendent, Principals, Director of Student Services | | **Expected Date of Completion:**  08/31/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit the results of the building review and the action plan, including proposed floor plans for Pingree Elementary School, along with short-term (immediate) and long-term solutions to address the identified concerns. The Department will conduct a facilities observation to ensure compliance. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district’s Special Education Department will review special education facilities assignments prior to the start of the school year to ensure that special education instructional spaces maximize inclusion opportunities, provide accessibility, and are adequate for the type of instruction and number of students. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved  **Status Date:** 09/25/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By October 25, 2024, the district will submit the results of the building review and the plan to address facilities concerns, including updated floor plans for Pingree Elementary School.  By February 14, 2025, the Department will conduct facilities observations of Pingree Elementary School to ensure interim special education facilities maximize the inclusion of special education students into the life of the school and provide accessibility to implement fully each student's IEP.  By May 23, 2025, the Department will conduct facilities observations of Pingree Elementary School to ensure special education facilities are compliant. | | |
| **Progress Report Due Date(s):**  10/25/2024  02/14/2025  05/23/2025 | | |

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| **Criterion & Topic:**  CR 10C Student Discipline | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents, student records, and staff interviews indicated that district procedures and practices do not include the following requirements:  Provision of written notice of in-school suspensions to the student and the parent;  Provision of written notice of suspension hearings to the student and parent;  Long-term suspension decision notices that make clear the right of the student or parent to request and receive from the superintendent an extension of up to seven calendar days for filing a written appeal; and  The district's responsibility, when a student has been suspended for more than ten cumulative days in a school year, to consider any subsequent suspensions as long-term suspensions for due process, appeal, and reporting purposes. | | |
| **Description of Corrective Action:**  The district will conduct a root cause analysis and implement an action plan to ensure that all student discipline requirements are met, including provision of written notice of in-school suspensions, provision of out-of-school suspension hearing notices prior to the hearing, and the district’s responsibility, when a student has been suspended for more than ten cumulative days in a school year, to consider any subsequent suspensions as long-term suspensions for due process, appeal, and reporting purposes. The district will also review and update all discipline notice templates, if necessary, to ensure they meet requirements, including ensuring that long-term suspension decision notices make clear the right of the student or parent to request and receive from the superintendent an extension of up to seven calendar days for filing a written appeal. | | |
| **Title/Role(s) of Responsible Persons:**  Principals, Deans and Director of Student Services | | **Expected Date of Completion:**  02/14/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit a root cause analysis, any revised procedures, a description of an internal monitoring system, and evidence of staff training. The district will also submit updated discipline hearing and decision notice templates. The Department will conduct a review of records to ensure compliance. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will train all relevant staff on student discipline requirements, district procedures to ensure the requirements are met, any updated discipline notices, and the district internal monitoring system. At least quarterly, Principals will review a sample of discipline records to ensure the required procedures are implemented. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10C Student Discipline | **Corrective Action Plan Status:** Approved  **Status Date:** 09/25/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By October 25, 2024, the district will submit a root cause analysis, any revised procedures, discipline notice templates, and a description of the district's internal monitoring system.  By December 13, 2024, the district will submit evidence that all relevant staff have been trained on the requirements, district procedures, updated district notices, and internal monitoring system.  By February 14, 2025, the Department will select and review a sample of student records to ensure the 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):**  10/25/2024  12/13/2024  02/14/2025 | | |

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of documents and staff interviews indicated that although the district sends notice to parents and students 16 or over, the notice is not sent within five days of the student's tenth consecutive absence and does not include at least two dates and times for an exit interview prior to the student permanently leaving school.  Furthermore, the district does not send annual written notice to former students who attended the high school within the past two years, have not yet earned their competency determination, and have not transferred to another school to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs. | | |
| **Description of Corrective Action:**  The district will conduct a root cause analysis and implement an action plan to ensure that all requirements are met when students 16 or over leave school or consider leaving school. The district will also review all relevant procedures, practices, and notice templates and revise as necessary to ensure they meet requirements, including sending notice to students within five days of the student’s tenth consecutive absence that includes at least two dates and times for an exit interview, and sending annual written notice to former students who attended the high school within the past two years, have not yet earned their competency determination, and have not transferred to another school to inform them of the availability of publicly funded post-high school academic support programs and MCAS retest opportunities. | | |
| **Title/Role(s) of Responsible Persons:**  Counseling Director and WHS Associate Principal | | **Expected Date of Completion:**  02/14/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit a root cause analysis, any revised procedures and notice templates, a description of an internal monitoring system, and evidence of staff training. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will train all relevant staff on the requirements for notice to students over 16 leaving school, district procedures to ensure the requirements are met, any updated notices, and the district internal monitoring system. At least quarterly, Principals will review the internal tracking system to ensure the required procedures are implemented. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Approved  **Status Date:** 09/25/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By October 25, 2024, the district will submit a root cause analysis, any revised procedures and notice templates, and a description of the district’s internal monitoring system.  By December 13, 2024, the district will submit evidence that all relevant staff have been trained on the requirements, district procedures, updated district notices, and internal monitoring system.  By February 14, 2025, the district will implement the internal monitoring system to ensure the required procedures are implemented. For any identified noncompliance, the district will conduct a root cause analysis and implement appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  10/25/2024  12/13/2024  02/14/2025 | | |

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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 the district's physical restraint procedures do not include the following required components:   * Methods for preventing student violence, self-injurious behavior, and suicide; * Methods for engaging parents in discussions about restraint prevention and use; * A description and explanation of the program's alternatives to physical restraint; * A description of the program's training requirements, reporting requirements, and follow-up procedures; * A procedure for receiving and investigating complaints regarding restraint practices; * A procedure for conducting periodic review of data and documentation on the use of physical restraints; * A procedure for implementing the full reporting requirements as described in 603 CMR 46.06, including reporting all restraints not just those resulting in serious injury; and * Procedures for obtaining principal approval of a time-out that extends beyond 30 minutes.   Additionally, the district all-staff restraint training does not include the following requirements:   * The role of the student, family, and staff in preventing restraint; * The district's restraint prevention and behavior support policy and procedures, including use of time-out as a behavior support strategy distinct from seclusion; * The types of permitted physical restraints and related safety considerations, including information regarding the increased risk of injury to a student when any restraint is used, in particular a restraint of extended duration; and * Identification of program staff who have received in-depth training pursuant to 603 CMR 46.03(3) in the use of physical restraint. | | |
| **Description of Corrective Action:**  The district will conduct a root cause analysis and implement an action plan to ensure that the district’s physical restraint procedures and physical restraint training meet all requirements. The district will revise the physical restraint procedures to ensure they meet all requirements, including:   * Methods for preventing student violence, self-injurious behavior, and suicide; * Methods for engaging parents in discussions about restraint prevention and use; * A description and explanation of the program's alternatives to physical restraint; * A description of the program's training requirements, reporting requirements, and follow-up procedures; * A procedure for receiving and investigating complaints regarding restraint practices; * A procedure for conducting periodic review of data and documentation on the use of physical restraints; * A procedure for implementing the full reporting requirements as described in 603 CMR 46.06, including reporting all restraints not just those resulting in serious injury; and * Procedures for obtaining principal approval of a time-out that extends beyond 30 minutes.     The district will update all-staff physical restraint training materials to ensure they include all requirements, including:   * The role of the student, family, and staff in preventing restraint; * The district's restraint prevention and behavior support policy and procedures, including use of time-out as a behavior support strategy distinct from seclusion; * The types of permitted physical restraints and related safety considerations, including information regarding the increased risk of injury to a student when any restraint is used, in particular a restraint of extended duration; and * Identification of program staff who have received in-depth training pursuant to 603 CMR 46.03(3) in the use of physical restraint. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Director of Special Education, District BCBA | | **Expected Date of Completion:**  02/14/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit a root cause analysis, revised procedures and training materials, a description of an internal monitoring system to ensure procedures and training materials are up-to-date, and evidence of staff training. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will review restraint policies, procedures, and training materials to ensure they meet all requirements. Within the first month of each school year and, for employees hired after the school year begins, within a month of their employment, the district will provide all staff with training regarding the district’s restraint prevention and behavior support policy and requirements when restraint is used. | | |
| 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:** 09/25/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By October 25, 2024, the district will submit a root cause analysis, revised restraint procedures, updated restraint training materials, and a description of the district's internal monitoring system.  By December 13, 2024, the district will submit evidence that all staff have been trained on the physical restraint requirements and district procedures, including all the required elements. The evidence will include agenda and attendance records. | | |
| **Progress Report Due Date(s):**  10/25/2024  12/13/2024 | | |

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| **Criterion & Topic:**  CR 23 Comparability of facilities | | **Rating:**  Partially Implemented |
| **Department Findings:**  A review of floor plans, facilities observations, and staff interviews indicated the following:  The English learner classrooms at Academy Avenue and Pingree Elementary School are smaller than other classrooms and not adequately sized to accommodate the number of students and staff in the instructional groupings.  The library at Pingree Elementary School is split into multiple instructional spaces, including special education pull-out, speech and language, and English learner services, using temporary dividers that do not reach the ceiling, creating increased auditory distractions when these services are provided concurrently or when the library is in use for classroom instruction. | | |
| **Description of Corrective Action:**  The district will conduct a review of the school building to gather information and implement a plan to ensure that when the district provides separate facilities for members of a specific group, those facilities are comparable to those offered other students in the district and are adequate for the type of instruction and number of students. Building/facilities improvement for Academy Avenue Elementary School will be completed by February 14, 2025, while Pingree Elementary School’s, which will involve substantial renovations, will be completed by August 31, 2025. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent, Asst Superintendent, Principals, Director of Student Services | | **Expected Date of Completion:**  08/31/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit the results of the building review and the action plan, including proposed floor plans for Academy Avenue and Pingree Elementary School. The district will also submit short-term (immediate) and long-term solutions to address the identified concerns at Pingree Elementary School. The Department will conduct a facilities observation to ensure compliance. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district’s building principals and Special Education Department will review facilities assignments prior to the start of the school year to ensure that where the district provides separate facilities for members of a specific group (for example, students with disabilities or English Learners), those facilities are comparable to those offered other students in the district and are adequate for the type of instruction and number of students. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 23 Comparability of facilities | **Corrective Action Plan Status:** Approved  **Status Date:** 09/25/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By October 25, 2024, the district will submit the results of the building review and the plan to address facilities concerns, including updated floor plans for Academy Avenue and Pingree Elementary School.  By February 14, 2025, the Department will conduct facilities observations of Academy Avenue and Pingree Elementary School to ensure the facilities are compliant.  By May 23, 2025, the Department will conduct facilities observations of Pingree Elementary School to ensure facilities are compliant. | | |
| **Progress Report Due Date(s):**  10/25/2024  02/14/2025  05/23/2025 | | |

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

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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 heads and instructional coaches, the district does not ensure that individual teachers review all educational materials for simplistic and demeaning generalizations 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 such stereotypes depicted in such learning materials. | | |
| **Description of Corrective Action:**  The district will conduct a root cause analysis and implement an action plan to ensure that individual teachers review all educational materials and use appropriate activities, discussions, and/or supplementary materials to provide balance and context for any simplistic and demeaning generalizations on the basis of race, color, sex, gender identity, religion, national origin, and sexual orientation. | | |
| **Title/Role(s) of Responsible Persons:**  Executive Director of Elementary Education, Principals, Instructional Coaches, Department Heads | | **Expected Date of Completion:**  02/14/2025 |
| **Evidence of Completion of the Corrective Action:**  The district will submit a root cause analysis, revised procedures and training materials, a description of an internal monitoring system, evidence of staff training, and evidence of individual curriculum review implementation. | | |
| **Description of Internal Monitoring Procedures:**  Annually, the district will provide all relevant staff with training regarding curriculum review, individual teacher responsibilities, and district internal monitoring procedures. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 09/25/2024  **Correction Status:** Not Corrected | |
| **Required Elements of Progress Report(s):**  By October 25, 2024, the district will submit a root cause analysis, revised curriculum review procedures, training materials, and a description of the district's internal monitoring system.  By December 13, 2024, the district will submit evidence that all relevant staff have been trained on the curriculum review requirements and district procedures, including internal monitoring procedures.  By February 14, 2025, the district will submit evidence that individual teachers review curriculum and instructional materials and provide balance and context for any simplistic and demeaning generalizations. For any identified noncompliance or areas of improvement, the district will submit a root cause analysis and a description of appropriate corrective actions. | | |
| **Progress Report Due Date(s):**  10/25/2024  12/13/2024  02/14/2025 | | |