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

##### SPECIAL EDUCATION AND CIVIL RIGHTS

##### MONITORING REVIEW

## CORRECTIVE ACTION PLAN

Lawrence Family Development Charter School

Monitoring Onsite Year: 2023-2024

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 08/16/2024.

**Mandatory One-Year Compliance Date:** **08/16/2025**

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

| **Criterion** | **Criterion Title** | **Rating** |
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| SE 9 | Timeline for determination of eligibility | 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 9 Timeline for determination of eligibility | **Rating:** Partially Implemented |
| **Department Findings:** A review of records and interviews indicated that the charter school does not consistently provide a proposed IEP and proposed placement to the parent within 45 school-working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation. |
| **Description of Corrective Action:** LFDCS previously submitted a description of the root cause analysis that led to non-compliance in this area as part of the charter school’s self-assessment in September 2023. Following the self-assessment, LFDCS committed to improving the process by hiring a full-time school psychologist to complete a majority of the evaluations as well as provide counseling to special education students. In addition, LFDCS maintains a contract with an outside neuropsychological service to complete additional and extended evaluations. As part of the CAP for the finding of non-compliance, the district submitted updated procedures to ensure that parents are provided with a proposed IEP or notification of the Team's determination that the student is or is not eligible for special education services within 45 days of the district's receipt of a signed consent for evaluations to determine initial or continued eligibility for special education services and programs. The current-year information will be posted in the shared special education drive for easy access and reference.The charter school will submit evidence that all relevant staff have participated in professional development on updated procedures for completing evaluations and scheduling IEPmeetings to ensure that the district determines eligibility and provides the parent either the proposed IEP or notification that the student is not eligible within 45 school-working days of receipt of signed consent for evaluations. Training will include a review of the regulations and the district's expectations regarding setting dates for completing evaluations, scheduling IEP meetings, and providing parents with a proposed IEP. The training will also include the responsibility of Team members responsible for the district's internal monitoring procedures.The training will be conducted at one of the monthly special education staff meetings led by the Special Education Director. Participants will sign an attendance sheet acknowledging their participation in the training and understanding of regulations, district procedures, and their responsibilities.The Department will conduct a review of student records across all grade levels to ensure compliance with the requirement to provide the parent with a proposed IEP for students found eligible, or a notice of refusal for students determined to be not eligible for special education services within 45 school-working days after receipt of the parent's written consent to an initial evaluation or a re-evaluation. For any identified non-compliance, the district will submit a root cause analysis and a description of appropriate corrective actiontaken. |
| **Title/Role(s) of Responsible Persons:**Special Education Director | **Expected Date of Completion:**03/30/2025 |
| **Evidence of Completion of the Corrective Action:*** Revision of procedures
* Evidence of staff training including the training agenda, training materials, and staff attendance sheet(s)
* Internal tracking and monitoring system
* Results of the Department's review of student records and, if applicable, root cause of any noncompliance and steps taken to address findings.
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| **Description of Internal Monitoring Procedures:** The Special Education Director will provide training to all relevant special education staff at least annually on procedures to follow when the district receives signed consent for initial or re-evaluations. This annual training will include a review of legal requirements, the role and responsibilities of Team members in this process, and district internal monitoring procedures.The Special Education Director will conduct quarterly internal monitoring to ensure compliance with timelines for determining eligibility for special education services and programs. For any noncompliance identified, the district will submit a root cause analysis and implement appropriate corrective actions.The Special Education Director will conduct a monthly review of internal monitoring tracking with staff to assess compliance with timelines. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 9 Timeline for determination of eligibility | **Corrective Action Plan Status:** Approved **Status Date:** 09/25/2024 **Correction Status:** Not Corrected |
| **Required Elements of Progress Report(s):** By November 6, 2024, submit the procedures for tracking timelines, scheduling Team meetings, training agenda and signed attendance for the training.By January 24, 2025, submit a copy of the completed tracking sheet for evaluations and IEP meetings timelines.By March 28, 2025, the Department will conduct a student record review across schools for evidence that all requirements are completed for eligibility determination timelines and for holding IEP Team meetings. For any identified non-compliance, the district will submit a root cause analysis and a description of appropriate corrective actions. Subsequent progress reports may be required. |
| **Progress Report Due Date(s):** 11/06/202401/24/202503/28/2025 |

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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 charter school does not consistently offer adequate and appropriate services for linguistic minority students. In response, OLA issued an ELE 5 Program Placement and Structure finding in June 2024 indicating the following:The charter school does not have an ESL curriculum that is implemented with fidelity.The charter school does not have enough ESL staff to implement its ELE program with fidelity.The charter school does not have clearly established personalized goals for English learners (ELs) who do not meet English proficiency benchmarks, nor is there a process to track and assess the progress of ELs in the identified areas in need of improvement. |
| **Description of Corrective Action:** n/a |
| **Title/Role(s) of Responsible Persons:**Principal | **Expected Date of Completion:**08/10/2025 |
| **Evidence of Completion of the Corrective Action:**n/a |
| **Description of Internal Monitoring Procedures:** n/a |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved **Status Date:** 09/25/2024 **Correction Status:** Corrected |
| **Basis for Decision:** CR 18 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. |