



Norwood High School Schedule Committee Update: October 2020

The NHS Schedule committee was formed in February 2020 to begin the process of researching, analyzing, and proposing revisions to our current bell schedule, program offerings, and schedule format that will allow the school to better serve our students and meet our school improvement goals. The committee has been meeting 1-2 times per month and has made great progress, currently in Phase 3 of the timeline below.

- Phase 1: Conduct a needs assessment of the NHS schedule (March-April 2020).
- Phase 2: Research options that other high schools have used to address their own needs (May-September 2020).
- Phase 3: Develop, examine, and solicit feedback regarding potential options for a revised NHS schedule (October 2020 -January 2021).
- Phase 4: Recommend (or not) a schedule for implementation in September 2021. (February 2021).

During Phase 1, based on feedback and research of best practices, the committee identified the following “core needs” of the NHS schedule.

- Educator collaboration time
- Personalized learning time for students (intervention, MTSS, flex block, WIN, etc.)
- Career preparation and project-based learning integration
- Choice and voice for students (electives, majors/minors, virtual)

During Phase 2, the committee studied, met with, surveyed, and researched high school schedules in the area and beyond. Our focus during this phase was to identify common scheduling strategies that high schools used to meet their local staff and student needs. The committee identified the following common strategies and methodologies that other schools had used:

- Schools identified and utilized a common planning time block for teachers, either by content area, grade, or cross-discipline/grade.
- Schools created a flexible time in the schedule for students. Commonly known as “flex block,” “x block,” “WIN block,” etc. this time is meant to be a “catch all” time for students to receive intervention, get extra help, study, participate in enrichment activities, participate in meetings, etc.
- Schools felt that they were not using their time effectively or efficiently, and wanted to create a schedule aligned to their goals.
- Schools wanted to increase offerings or choices for students. To do this, schools implemented a range of strategies including: increasing the number of periods or classes, changing the length of a period, or varying the frequency of meetings for a class (full year vs. semesterised, major vs. minor).
- Schools wanted to better address the mental health and social emotional needs of their students.

- Schools implemented a grade based approach to account for transition to high school (i.e. freshman academy).

Currently in Phase 3, the committee has begun to look at the “nuts and bolts” and “cause and effect” of potential schedule changes aimed at addressing our four “core needs.” This phase will be the most difficult phase, as the things we “wish” we could do are met with realities that may present roadblocks to achieving our goals. As we progress, we will be sharing with you and soliciting feedback on what you view as most important to our student’s success.

Ultimately in phase 4, the committee hopes to propose one or more revised NHS schedules to consider for implementation. Please note that this schedule would be designed for in-person learning, and the trajectory of Covid-19 may impact the timing of the implementation phase of a new schedule.

The NHS Schedule Committee members are:

Howard Allen	Teresa Drummey	Kristen McDonnell	Nancy Prieto
Philipp Buhler	Hugh Galligan	Laurie Mead-McGrory	Ryan Quigley
Steven Conant	Jennifer Hartnett	Emily Mullaney	John Quinn
Cindy Derrane	Allison Leichtman	Rebecca Newman	Jennifer Rodger