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| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**  **Program Quality Assurance Services** |

##### COORDINATED PROGRAM REVIEW

## CORRECTIVE ACTION PLAN

Charter School or District: Southampton

CPR Onsite Year: 2013-2014

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 Coordinated Program Review Final Report dated 10/04/2014.

**Mandatory One-Year Compliance Date:** **10/04/2015**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 3 | Special requirements for determination of specific learning disability | Partially Implemented |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| SE 37 | Procedures for approved and unapproved out-of-district placements | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |

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| COORDINATED PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  SE 3 Special requirements for determination of specific learning disability | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicated that when a student suspected of having a specific learning disability is evaluated, the district does not consistently create a written determination as to whether or not the student has a specific learning disability, which is signed by all members of the Team, or if there is disagreement as to the determination, there is no evidence that one or more Team members document their disagreement. | | |
| **Description of Corrective Action:**  Specific Learning documents are not always included in the students' files. Staff will be provided with professional development on when and how to correctly complete and file the SLD paperwork. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  SLD forms will be completed and filed in the students' records.  Agendas and sign-ins of professional development. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3 Special requirements for determination of specific learning disability | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined the root cause for required documentation not being consistently found in the record of students evaluated for suspected specific learning disability (SLD) was that Team members require training on procedures for creating a written determination on whether a student has a SLD that is signed by all members of the Team or documenting if a Team member disagrees that the student has a SLD and filing this documentation in the student's record. The district will provide professional development for staff and monitor student records to ensure the IEP Teams of students suspected of having SLD are documenting their discussion and determination.  The description of district monitoring procedures to ensure the district documents Team determinations when a student is suspected of having a SLD is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  The district must provide a plan that details how it will conduct on-going internal record reviews to ensure the district staff complete required documents of a Team's determination of SLD, which are filed in the student record of all students suspected of having a SLD. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. | | |
| **Required Elements of Progress Report(s):**  Train staff on creating a written determination of whether or not the student has a specific learning disability that is signed by all members of the Team, or if there is disagreement as to the determination, document that one or more Team members disagree. Provide evidence of this training, including an agenda, handouts, and sign-in sheet with the signature and title of staff persons in attendance by March 5, 2015.  Develop a written plan that details how the district will conduct on-going internal record reviews to ensure ongoing compliance. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. Provide the Department with a copy of this written plan by March 5, 2015.  After staffs receive training on documenting SLD determination, conduct internal administrative review of all records for which the Team made an SLD determination. Provide the Department with a report on the findings, including the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by June 1, 2015.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/05/2015  06/01/2015 | | |

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| **Criterion & Topic:**  SE 8 IEP Team composition and attendance | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Interviews and student record review indicated that a representative of the school district who has the authority to commit the resources of the district is not always present for annual review Team meetings. | | |
| **Description of Corrective Action:**  The special education teacher or service provider who is functioning as the case manager is the chair of the IEP meeting. They are the person who has the authority to commit district resources. Upon review of the CPR findings, it became obvious that some special education staff who were chairing meetings and writing IEP's were not aware of their authority in their roles.  This was clarified for staff at the review of the CPR findings. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/04/2015 |
| **Evidence of Completion of the Corrective Action:**  Agenda and sign-in from October Special Education Department meeting. | | |
| **Description of Internal Monitoring Procedures:**  Ongoing monthly department meetings and professional development as needed. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Approved  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide evidence of the training provided for chair special education teachers and service providers who function as case managers and chair IEP meetings on their authority to commit the resources of the district, that was held in October 2014. Submit a copy of the agenda and sign-in sheet with title and signature of staff members in attendance at this training by March 5, 2015.  Provide a plan that details how the district will conduct on-going internal record reviews to ensure ongoing compliance. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. Provide the Department with a copy of this written plan by March 5, 2015. | | |
| **Progress Report Due Date(s):**  03/05/2015 | | |

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicated that while the district provides a summary to parents at the Team meeting that contains all the required elements, and provides a proposed IEP and placement along with the required notice to the parent within 10 days, the district does not provide the parent with two (2) full copies of the proposed IEP and proposed placement. | | |
| **Description of Corrective Action:**  Parents did receive a draft copy of the IEP at the meeting, however there was not one in the file to document this. Corrective Plan: -Parents will receive a copy of a draft IEP at the team meeting. Any changes that happen at the meeting will be noted on the parent copy. -When parents do not receive a copy of the draft IEP at the meeting, they will be given a meeting summary form that does contain a list of goals and a services delivery grid page. -Timelines: Staff will get the completed IEP's to the principal within 5 working days of the meeting. The principal will review, sign and pass along the IEP to the special education secretary in a timely way so that the IEP's can be to parents within 10 working days. Implementation of a checklist with teaching staff to ensure the all the required paperwork gets to the special education secretary to be filed, including an N1. Special Education Secretaries will be made aware that they need to send home two full copies of the IEP and make note of that in the file. Professional Development for all special education secretaries to include: -draft IEP or meeting summary to parents at the end of the team meeting -use of the checklist of required paperwork -time lines for required paperwork -updating them on the requirement of sending home two full copies of the IEP with an N1 to the parent within 10 working days with the date they were mailed. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Special education records will reflect the documentation of meeting this requirement.  Copies of the professional development agendas and sign-ins. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined the root cause parents did not always receive two copies of a draft IEP to sign was that the district needed to revise its procedures for processing IEPs and provide professional development to special education secretaries. The district's proposed plan does not indicate that revised procedures will include documenting on the Notice of Proposed District Action Form (N1) that two copies of the IEP are sent to parents, nor does it indicate that Team chairs, will participate in this training. In addition, the description of district monitoring procedures to ensure parents receive two copies of a proposed IEP is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  The district must provide a plan that details how it will conduct on-going internal record reviews to ensure it is documented on the Notice of Proposed District Action Form (N1) that parents received two copies of a proposed IEP for signature. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. | | |
| **Required Elements of Progress Report(s):**  Provide evidence of training held for special education secretaries and Team chairpersons on revised district procedures to ensure parents receive two copies of a proposed IEP and this is documented on the N1 in the student record, including an agenda, handouts, and sign-in sheet with the signature and title of staff persons in attendance by March 5, 2015.  Provide a plan that details how the district will conduct on-going internal record reviews to ensure ongoing compliance. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 5, 2015.  Review a sample of records for students who have had Team meetings after staff receives training on revised district procedures to ensure parents receive two copies of a proposed IEP, and provide the Department with a report on the findings of the review, including the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by June 1, 2015.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/05/2015  06/01/2015 | | |

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicated that the district does not state why the student's removal from the general education classroom at any time is considered critical to the student's program and state why education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. In almost every case, the district's Nonparticipation Justification statement for each student was identical, and did not reflect the individualized needs of the student. | | |
| **Description of Corrective Action:**  The non participation justification section was not individualized to the student and did not explain why students could not get their services in the general education setting.  Professional development on appropriate reasons for students to be seen in general education and special education settings that are individualized to the student. Some adjustment to the drop-down menu on the special education database is being considered as well to ensure that the statements are individualized. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  IEP's will reflect an individualized statement that clearly defines why a student cannot receive their services in the general education setting.  Agendas and sign-ins for professional development on this topic. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined the root cause for not documenting the reason for removal from the general education environment in student IEPs was that staffs require professional development to understand information that must be included in the non-participation justification statement in the IEP and that this statement must be individualized to each student.  The description of district monitoring procedures to ensure every IEP contains an individualized statement to explain why the student requires removal from the general education environment is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  The district must provide a plan that details how it will conduct on-going monitoring of student records to ensure the district documents on each IEP the basis for each individual student's removal from the general education environment and why the Team determined that the student cannot be educated in a less restrictive environment with the use of supplementary aids and services. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. | | |
| **Required Elements of Progress Report(s):**  Provide evidence that staff received training on how to document the reason for a student's removal from the general education environment in the IEP and why the Team determined that the student cannot be educated in a less restrictive environment with the use of supplementary aids and services. This evidence must include the agenda, handouts, and sign-in sheet with the signature and title of staff persons in attendance by March 5, 2015.  Provide a plan that details how the district will conduct on-going internal record reviews to ensure ongoing compliance. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 5, 2015.  Provide a report on the findings of an administrative review of records for students who had Team meetings after staff receives training on how to document on the IEP the basis for a student's removal from the general education environment and why the Team determined that the student cannot be educated in a less restrictive environment with the use of supplementary aids and services. For this report, submit the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by June 1, 2015. Also provide copies of the nonparticipation justification page of IEP for a sample of 5 students reviewed.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/05/2015  06/01/2015 | | |

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicated the district's Notice of Proposed School District Action (N1) does not consistently meet all of the federal content requirements. Specifically, the district is not consistently providing a description of the evaluation procedure, test, record or report used as a basis for the proposed action, and does not provide a description of other factors that were relevant to the district's decision. | | |
| **Description of Corrective Action:**  Notice of Proposed District Action forms in the records did not meet the standard of the regulations. Professional Development will address how to incorporate all parts of the N1 so that the forms will have complete information for parents and will meet the standards. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/01/2015 |
| **Evidence of Completion of the Corrective Action:**  N1's in the files will reflect the implementation of the professional development of all the required elements on the N1 form.  Agendas and sign-ins from professional development. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | **Corrective Action Plan Status:** Submitted  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined the root cause the district's Notice of Proposed School District Action (N1) did not consistently include a description of evaluation procedures, tests, records or reports used as a basis for proposed action, or describe other factors relevant to the district's decision was that staff require professional development in this area. In addition, the description of district monitoring procedures to ensure student records contain an N1 form with all required information is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  The district must provide a plan that details how it will conduct on-going internal record reviews to ensure the Notice of Proposed District Action (N1) includes all required information. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. | | |
| **Required Elements of Progress Report(s):**  Provide evidence of staff training on completing N1 forms with the required federal content that includes a description of the evaluation procedure, test, record or report used as a basis for the proposed action, and a description of other factors that were relevant to the district's decision. Provide the agenda, handouts, and sign-in sheet with the signature and title of staff persons in attendance by March 5, 2015.  Provide a plan that details how the district will conduct on-going internal record reviews to ensure ongoing compliance. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 5, 2015.  Review a sample of records for students who have Team meetings after staff receives training on completing N1 forms with required information, and provide the Department with a report on the findings, including the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by June 1, 2015.  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  03/05/2015  06/01/2015 | | |

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews indicated that Southampton Public Schools has not established its own Parent Advisory Council (PAC), but participates as a member of the larger Hampshire Regional School District PAC, approved by waiver by the Department for the 2012-2013 school year. That waiver has now expired and must be resubmitted for approval for the 2014-2015 school year. | | |
| **Description of Corrective Action:**  The Parent Advisory Council (PAC) is a regional council serving the parents of five schools and their five towns. The waiver filed has expired and a new one will be filed by the Pupil Services Director. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/04/2015 |
| **Evidence of Completion of the Corrective Action:**  The approved waiver. | | |
| **Description of Internal Monitoring Procedures:**  Annual application for PAC waiver. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district must provide a copy of a letter from the Department approving a waiver for the 2014-2015 school year from the regulation requiring the district to establish a parent advisory council on special education by March 5, 2015. | | |
| **Progress Report Due Date(s):**  03/05/2015 | | |

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| **Criterion & Topic:**  SE 37 Procedures for approved and unapproved out-of-district placements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews demonstrated that the student's file does not consistently contain contracts with out-of-district placements, monitoring plans and documentation of actual monitoring, as required. | | |
| **Description of Corrective Action:**  Although there is at least one annual visit and participation of at least one team meeting and ongoing review of incident reports and progress reports, there was no form that documented the monitoring. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/04/2015 |
| **Evidence of Completion of the Corrective Action:**  The monitoring will continue to be done and a copy of the form will be in each students' file to document the monitoring. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 37 Procedures for approved and unapproved out-of-district placements | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The proposed corrective action states the district will develop a form to document its efforts to monitor the progress of students placed out of district but does not indicate the district plans to file the contract for an out of district placement in the student's special education record or detail how the district will monitor the progress of a student placed out of district on an ongoing basis and review student records for documentation of the district's efforts to monitor the progress of students placed out of district. | | |
| **Department Order of Corrective Action:**  The district must provide a plan that details how it will conduct on-going administrative review of student records to ensure contracts and documentation of efforts to monitor the progress of students placed out of district are filed in student records. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented. | | |
| **Required Elements of Progress Report(s):**  Provide the Department with a list of students placed out of district, along with a copy of the completed monitoring form and contract that is found in the student's record by March 5, 2015.  Provide a plan that details how the district will conduct on-going internal record reviews to ensure ongoing compliance. This plan must include person(s) responsible for conducting record reviews, how often reviews will be conducted, how many records will be reviewed, what information will be collected from records, and how review activities will be documented by March 5, 2015. | | |
| **Progress Report Due Date(s):**  03/05/2015 | | |

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| **Criterion & Topic:**  SE 55 Special education facilities and classrooms | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Observations and interviews indicated that there are three classrooms (Rms. 21, 22, & 23) used for the provision of pull out special education services that are clustered at one end of a hallway in the Norris School, and do not maximize the inclusion of special education students into the life of the school. | | |
| **Description of Corrective Action:**  Although the finding states the rooms are clustered at one end of the hallway, students come from all over the building to get services. The three rooms are at the top of the stairs where there is traffic to all 3d and 4th grade classrooms and one second grade classroom on the second floor. This area is not in an isolated part of the building. All age groups from k-6th grade who are pulled out for speech services in one of the rooms. This intersection is one of the main hubs of the school and special education students are included in the life of the school by being in this hub.  The Pupil Services Director and Principal will work on an alternative arrangement of the rooms to make one of the small rooms a conference/meeting room to break up the cluster in the middle of the school. It would best meet student needs if this was done over the summer of 2015 so as to not disrupt the students in these classrooms. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/04/2015 |
| **Evidence of Completion of the Corrective Action:**  A new school map showing the changes. | | |
| **Description of Internal Monitoring Procedures:**  Once this change is made, the Principal and Pupil Services Director will work together to ensure that all students are included in the life of the school and that there will not be clusters of classrooms in one area of the building. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a map of the school that indicates changes to the classrooms used for the provision of pull out special education services in the middle of the school by March 5, 2015.  Contact the Department to make an appointment to visit the school to observe the new spaces for the provision of special education services by June 1, 2015. | | |
| **Progress Report Due Date(s):**  03/05/2015  06/01/2015 | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews indicate that the district's nondiscrimination policy makes no reference to M.G.L. c. 76, s. 5, and the district's code of conduct does not contain appropriate procedures for the discipline of students with Section 504 Accommodation Plans. | | |
| **Description of Corrective Action:**  504 will be added to the discipline section of the handbook. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/04/2015 |
| **Evidence of Completion of the Corrective Action:**  An updated copy of the handbook and a Connect Ed message to alert parents of the change in the handbook on the website. The message will include reference to the section and page number for easy reference. | | |
| **Description of Internal Monitoring Procedures:**  Annual review of the handbook prior to publishing to ensure it includes any required updates and meets civil rights criteria. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district proposes to update the student handbook to include procedures in the code of conduct for the discipline of students with Section 504 accommodation plans and use Connect Ed to inform students, parents, and staff of this change, but it does not indicate the district's nondiscrimination policy statement will be updated to include reference to M.G.L. c. 76 s. 5. | | |
| **Department Order of Corrective Action:**  Submit a copy of the appropriate section of the Student Handbook that includes procedures in the code of conduct for the discipline of students with Section 504 accommodation plans and reference to M.G.L. c. 76 s. 5 in the nondiscrimination policy, that refers to the district's non-tolerance for harassment based on race, color, national origin, sex, gender identity, religion or sexual orientation. | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the revised code of conduct in the student handbook that details procedures for discipline of students with Section 504 accommodation plans and includes a nondiscrimination policy statement that references M.G.L. c. 76 s. 5 by March 5, 2015. Also include the text of the Connect Ed message sent to students, parents, and staff with the date the Connect Ed message was sent and the address of the link to the district's website where these revisions to the student handbook are posted by March 5, 2015. | | |
| **Progress Report Due Date(s):**  03/05/2015 | | |

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews confirm that the district is in the process of developing a systematic procedure for evaluating all programming annually, to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities, but does not yet have the procedure in place. | | |
| **Description of Corrective Action:**  Weekly meetings with the Principal and Pupil Services Director will include the required components of institutional self-evaluation. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Service Director,  Aliza Pluta, Principal | | **Expected Date of Completion:**  10/04/2015 |
| **Evidence of Completion of the Corrective Action:**  Dates and topics discussed at weekly meetings will be evidence of the ongoing institutional self-evaluation. | | |
| **Description of Internal Monitoring Procedures:**  Ongoing weekly meetings. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/22/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district pupil services director plans to have monthly meetings with the principal to discuss equal access to all programs, including athletics and other extracurricular activities, for all students regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status. However, the district does not indicate what information it will gather to evaluate equal access to programs, how information will be gathered, from what sources, and how frequently recommendations for change will be made based on the results of a district evaluation. | | |
| **Department Order of Corrective Action:**  Provide the Department with a description of what information will be gathered to evaluate equal access to all programs, including athletics and other extracurricular activities for equal access regardless of students' race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status. This plan must indicate how information will be gathered, what sources will be used to gather information, and how frequently recommendations for change will be made based on the results of the district evaluation. | | |
| **Required Elements of Progress Report(s):**  Provide a description of the plan to evaluate equal access to all programs on an ongoing basis, including athletics and other extracurricular activities for equal access regardless of students' race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status. This plan must detail what information will be gathered to evaluate the special education program, how information will be gathered, what sources will be used to gather information, and how frequently recommendations for change will be made based on the results of the district evaluation by March 5, 2015.  Provide the Department with a report on the results of the district's evaluation of all programs for the 2014-2015 school year, including athletics and other extracurricular activities, for equal access regardless of students' race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, that includes findings and recommendations for future changes by June 1, 2015. | | |
| **Progress Report Due Date(s):**  03/05/2015  06/01/2015 | | |

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| **MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION**  **COORDINATED PROGRAM REVIEW** |

District: Southampton Public Schools

Corrective Action Plan Review

Program Area: English Learner Education

Prepared by: Gail Lucey, Director of Curriculum

CAP Form will expand to as many lines as necessary. Before completing and emailing to pqacap@doe.mass.edu, please see separate *Instructions for Completing Corrective Action Plans.*

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 Coordinated Program Review Final Report to the school or district.

**Mandatory One-Year Compliance Date: November 13, 2015**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 4 Waiver Procedures** | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Student record review, documents and interviews indicate that the district’s parent notification letter does not inform the parent or guardian about their right to apply for a waiver or decline enrollment in the district’s ELE program. Also, see ELE 10.* | | | |
| **Narrative Description of Corrective Action:** Southampton Public School will revise the parent notification letter to include information for parents or guardians about their right to apply for a waiver or decline enrollment in the district’s ELL program and guidelines on how to do this. The parent notification letter will be distributed on a yearly basis including FY15 school year. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ESL Teacher; Dir. of ELL Program; and , Building Principal | | **Expected Date of Completion for Each Corrective Action Activity:**  April 1, 2015 | |
| **Evidence of Completion of the Corrective Action:** Revised letter distributed and parent response is filed in student record | | | |
| **Description of Internal Monitoring Procedures:** Director of ELL Program will meet with the ELL Coordinator and Building Principal on a monthly basis to review all ELL parent or guardian communications to ensure compliance: Yearly program evaluation | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 4 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval: N/A** | | | |
| **Department Order of Corrective Action: N/A** | | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the revised parent notification letter that includes information and guidance for parents or guardians about their right to apply for a waiver or decline enrollment in the district’s ELL program by **March 23, 2015.**  **A template for the Parent Notification Letter, waiver procedures and waiver forms can be found at:** [**www.doe.mass.edu/ell/resources.html**](http://www.doe.mass.edu/ell/resources.html)**.**  Submit a description of how the district will ensure on-going compliance that includes person(s) responsible for reviewing the parent notification letter for content and sending to parents annually by **March 23, 2015.**  Submit a report on the results of the administrative review of ELL student records to ensure that all parents of ELL students received the annual Parent Notification Letter that informed the parent or guardian of their right to apply for a waiver or decline enrollment in the district’s ELE program that includes the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by **May 22, 2015.**  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s): March 23, 2015 and May 22, 2015.** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| Criterion & Topic: ELE 5Program Placement and Structure | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Documentation submitted by the district reveals that current hours of ESL instruction ELLs receive are insufficient at all levels of English proficiency and are, therefore, inconsistent with Department guidelines. Please see the “Transitional Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners August 2013” as found on* [*http://www.doe.mass.edu/ell/guidance\_laws.html*](http://www.doe.mass.edu/ell/guidance_laws.html).  *Document review indicated that the district does not have an ESL curriculum used for direct ESL instruction or a plan to develop one that is aligned to the Massachusetts Curriculum Frameworks and the WIDA ELD Standards. See the Department’s WIDA English Language Development Standards Implementation Guide (Part I) at* [*http://www.doe.mass.edu/ell/wida/Guidance-p1.pdf*](http://www.doe.mass.edu/ell/wida/Guidance-p1.pdf) | | | |
| **Narrative Description of Corrective Action:** Southampton School District administration is reviewing the current hours of ESL instruction that each ELL is receiving to document and align instructional hours with Department guidelines. ACCESS data is being reviewed to ensure that students will receive the following hours for ESL instruction: Entering (Level 1) – minimum of 2.5 hours a day of direct instruction; Developing (Level 3) – 1-2 hours a day; Expanding and Bridging 2.5 hours a week; and, Reaching or FLEP students will be monitored for two years.  Southampton School will formalize the current ESL curriculum and create ESL curriculum documents that are aligned with Massachusetts Curriculum Frameworks and the WIDA ELD Standards.  Professional development and consultation is being provided by the Collaborative for Educational Services in Northampton. The Director of ELL Program is attending a WIDA day-long workshop and the Building Principal is attending a day- long workshop for low-incidence schools and districts sponsored by the Massachusetts Department of Education. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Dir. of ELL Program; ESL Teacher; and Building Principal | | **Expected Date of Completion for Each Corrective Action Activity:**  April 15, 2015 | |
| **Evidence of Completion of the Corrective Action:** List of students enrolled in the ELL with documented instructional hours; ESL curriculum documents that are aligned with Massachusetts Curriculum Frameworks and WIDA ELD Standards | | | |
| **Description of Internal Monitoring Procedures:** Dir. of ELL will complete annual program assessment to ensure ELLs are receiving appropriate instruction for the appropriate amount of time to address their individual needs. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 5 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  1- Please complete district information in the attached spreadsheet labeled ELL List by school for each ELL student in the district by **March 23, 2015**.  2- Provide a copy of the 2014-15 ESL teacher schedules for all grade levels district wide by **March 23, 2015**.All schedules should include the following for each block of time:   * + Names of the ELL students   + Grade level for each student;   + English proficiency level for each student   3- Submit information about the process of reviewing or developing ESL curriculum that integrates WIDA ELD standards including information such as WIDA training opportunities for the district staff, responsible district staff, meeting dates, minutes and signing sheets and timelines for implementation by **May 22, 2015**. | | | |
| **Progress Report Due Date(s): March 23, 2015 and May 22, 2015** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 9** Instructional Grouping | | | **Rating:** Partially Implemented |
| **Department CPR Finding:**  *District documentation does not include any information showing that the district only groups ELL students of different ages together in instructional settings if their levels of English proficiency are similar.* | | | |
| **Narrative Description of Corrective Action:**  Southampton School District will review current ELL student groupings and make changes to ensure that ELL students of different ages receive instruction together only when their levels of English proficiency are similar | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Dir. of ELL Program and ESL Teacher | | **Expected Date of Completion for Each Corrective Action Activity:** March 1, 2015 | |
| **Evidence of Completion of the Corrective Action:** ELL class schedule and ELL Coordinator’s daily schedule | | | |
| **Description of Internal Monitoring Procedures:**  Director of ELL Program will meet with the ESL Teacher and Building Principal on a monthly basis to review all ELL parent or guardian communications to ensure compliance. Yearly program evaluation will be completed. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 9 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** N/A | | | |
| **Department Order of Corrective Action:** N/A | | | |
| **Required Elements of Progress Report(s):**  Please, see ELE 5. | | | |
| **Progress Report Due Date(s): March 23, 2015 and May 22, 2015** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 10  **Parent Notification** | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Student record review, documents and interviews indicate that upon identification of a student as ELL, and thereafter, the district does not utilize a parent notification on an annual basis that includes the reasons for identification of the student as ELL, the child’s level of English proficiency and program placement, and/or the method of instruction used in the program, how the program will meet the educational strengths and needs of the student, how the program will specifically help the child learn English, the specific exit requirements, and the parents’ right to apply for a waiver or to decline to enroll their child in the program.* | | | |
| **Narrative Description of Corrective Action:** Southampton School District will revise the parent notification letter to include information for parents or guardians the reasons for identification of their child as ELL, their level of English proficiency and where they will be placed in the ELL Program, the instructional methods that will be used, how the program will meet the needs of the students, specific exit requirements, and their right to apply for a waiver or decline enrollment in the district’s ELL program. The parent notification letter will be distributed on a yearly basis including FY15 school year. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** ESL Teacher; Dir. of ELL Program; and, Building Principal | | **Expected Date of Completion for Each Corrective Action Activity:** April 1, 2015 | |
| **Evidence of Completion of the Corrective Action:** Revised letter filed in Student record | | | |
| **Description of Internal Monitoring Procedures:**  Annual Evaluation of the ELL Program | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 10 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:**  The district plans to revise its parent notification letter to include information and guidance for parents or guardians about the reasons for identification of the student as ELL, the child’s level of English proficiency and program placement, and/or the method of instruction used in the program, how the program will meet the educational strengths and needs of the student, how the program will specifically help the child learn English, the specific exit requirements, and their right to apply for a waiver or decline enrollment in the district’s ELL program, which it will distribute annually and file in the student record.  The district’s plan to regularly review ELL student records to ensure parental notification letters contain all required content is not sufficiently detailed. | | | |
| **Department Order of Corrective Action:**  The district must develop a plan that details how it will conduct monitoring to ensure a parental notification letter that is sent annually contains all required elements. This plan must include person(s) responsible for conducting the monitoring, how often reviews will be conducted and how review activities will be documented. | | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the revised parent notification letter that includes the reasons for identification of the student as ELL, the child’s level of English proficiency and program placement, and/or the method of instruction used in the program, how the program will meet the educational strengths and needs of the student, how the program will specifically help the child learn English, the specific exit requirements, and the parents’ right to apply for a waiver or to decline to enroll their child in the program **by March 23, 2015.**  **A template for the Parent Notification Letter can be found at** [**www.doe.mass.edu/ell/resources.html**](http://www.doe.mass.edu/ell/resources.html)  Submit a copy of the district’s plan to conduct on-going internal monitoring to ensure compliance that includes person(s) responsible, how often monitoring will be conducted, and how monitoring activities will be documented by **March 23, 2015**.  Submit a report on the results of the administrative review of ELL student records to ensure that the parent notification letter contains all required content. Include the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by **May 22, 2015.**  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s): March 23, 2015 and May 22, 2015** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 18** Records of LEP Students | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Student record review, documents and interviews indicate that the records of ELL students do not contain the Home Language Survey, an English language screening assessment, copies of the Parent Notification Letter, progress reports or report cards, or evidence that such reports were translated.* | | | |
| **Narrative Description of Corrective Action:**  Southampton School District will revise the parent notification letter to include information for parents or guardians the reasons for identification of their child as ELL, their level of English proficiency and where they will be placed in the ELL Program, the instructional methods that will be used, how the program will meet the needs of the students, specific exit requirements, and their right to apply for a waiver or decline enrollment in the district’s ELL program. The parent notification letter will be distributed on a yearly basis including FY15 school year.  All student records will be reviewed to ensure that the Home Language Survey, an English language screening assessment, copies of the Parent Notification Letter, progress reports or report cards, and evidence that these reports were translated in the family’s home language are in the student record. If documents are missing, they will be processed and placed in the student file. | | | |
| **Title/Role of Person(s) Responsible for Implementation:**  ESL Teacher; Dir. of ELL Program; and, Building Principal | | **Expected Date of Completion for Each Corrective Action Activity:**  April 1, 2015 | |
| **Evidence of Completion of the Corrective Action:** Revised letter distributed and parent response is filed in student record; Student records are updated with current documents | | | |
| **Description of Internal Monitoring Procedures:**  Annual Evaluation of the ELL Program | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 18 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:**  The district plans to review all student records to ensure annual parent notification letters are filed in each ELL student record. However, the district’s plan is not sufficiently detailed. | | | |
| **Department Order of Corrective Action:**  The district must develop a plan that details how it will conduct on-going internal monitoring to ensure the Home Language Survey, an English language screening assessment, copies of the Parent Notification Letter, progress reports or report cards, and evidence that such reports were translated and filed in the student’s ELL record. This plan must include person(s) responsible, how often reviews will be conducted and how review activities will be documented. | | | |
| **Required Elements of Progress Report(s):**  Submit a plan that details how the district will conduct on-going internal monitoring all required ELE documentation and translations are filed in the student’s ELL record. This plan must include person(s) responsible, how often reviews will be conducted and how review activities will be documented by **March 23, 2015**.  Submit a report on the results of the administrative review of ELL student records to ensure that the record contains a copy of the Home Language Survey, English language screening assessment, Parent Notification Letter, progress reports or report cards, and evidence that reports were translated. Include the number of student records reviewed, the number in compliance, the root cause of any continued non-compliance and the corrective actions the district will take to remedy any identified non-compliance by **May 22, 2015.**  Please note when conducting internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). | | | |
| **Progress Report Due Date(s): March 23, 2015 and May 22, 2015** | | | |