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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: Williamsburg

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 10/15/2014.

**Mandatory One-Year Compliance Date:** **10/15/2015**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 3 | Special requirements for determination of specific learning disability | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 14 | Review and revision of IEPs | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| SE 56 | Special education programs and services are evaluated | 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, signed by all members of the Team, or if there is disagreement as to the determination, one or more Team members document their disagreement. | | |
| **Description of Corrective Action:**  SLD paperwork was not consistently done or filed in the record.  Professional development will be done to ensure that staffs know what the expectations for SLD determination is and what paperwork is needed to be generated, discussed, signed and filed. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Stacey Jenkins, Principal | | **Expected Date of Completion:**  10/15/2015 |
| **Evidence of Completion of the Corrective Action:**  SLD paperwork will be in the special education files when a student is suspected of having a specific learning disability.  Agendas and sign-ins from professional development will be evidence of staff training to meet the requirements. | | |
| **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:** 12/19/2014  **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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| COORDINATED PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  SE 13 Progress Reports and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicated that while the district does provide progress reports to parents at least as often as parents are informed of the progress of non-disabled students, progress reports are not always complete, and do not always contain information on progress in all goal areas of the IEP. | | |
| **Description of Corrective Action:**  Progress reports were completed and sent to parents as often as general education report cards, but they were not always complete and did not always contain information on progress in all goal areas of the IEP.  Professional development will be conducted with the staff to ensure that staffs understand the requirements of progress reports including: Each goal must be addressed in its own progress report and each progress report must contain a statement as to the students’ progress toward the goal and whether they are likely to reach the goal during the IEP period. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Stacey Jenkins, Principal | | **Expected Date of Completion:**  10/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Professional development agenda and sign-in. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 13 Progress Reports and content | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/19/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined that the root cause for progress reports not always containing information on a student's progress in all goal areas of the IEP was that staffs require professional development. The district will provide professional development to ensure, when writing progress reports, staff address each IEP goal, include a statement of the student's progress toward reaching the goal, and also state whether the student is likely to reach the goal during the IEP period.  The district's description of its plan to monitor student records to ensure compliance with this criterion is not sufficiently detailed. | | |
| **Department Order of Corrective Action:**  The district must provide a plan that details how it will conduct on-going internal monitoring of student records to ensure progress reports address each IEP goal, include a statement of the student's progress toward reaching the goal, and whether the student is likely to reach the goal during the IEP period. 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 district procedures to write progress reports that address each goal individually, contain information on the student's progress toward meeting each goal, and state whether the student is likely to reach the goal during the IEP period. 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 staff receives training on writing progress reports, conduct a review of selected student records for inclusion of completed progress reports. 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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| COORDINATED PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  SE 14 Review and revision of IEPs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews confirmed that the district does not consistently, at least annually, on or before the anniversary date of the IEP, convene a Team meeting to consider the student's progress and to review, revise, or develop a new IEP or refer the student for a re-evaluation, as appropriate. | | |
| **Description of Corrective Action:**  Annual review dates are not being met in some cases.  Annual review invitation and attendance will be generated by the school well before the annual due date. They will be sent to parents with a note that states if the time in not convenient, they can call and reschedule the meeting. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Stacey Jenkins, Principal | | **Expected Date of Completion:**  10/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Invitations will reflect the district's attempt to schedule the annual meeting prior to the annual review date.  Agenda and sign-in from professional development for staff and special education secretary regarding this procedure. | | |
| **Description of Internal Monitoring Procedures:**  Internal record review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 14 Review and revision of IEPs | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/19/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district determined the root cause for not consistently holding Team meetings at least annually was that meetings were not scheduled well in advance of the expiration date of the student's IEP. The district is now developing procedures for staff to schedule Team meetings well in advance of the IEP expiration date and will document communications with parents, including attempts to secure parent participation at Team meetings and parent requests to reschedule a Team meeting. The district will provide staff with professional development training on the district's new procedures.  The district's description of its internal monitoring process to ensure meetings to review each student's IEP are held at least annually 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 every IEP meeting is scheduled to be reviewed by the Team at least annually and document communications with parents, including attempts to secure parent participation at Team meetings and parent requests to reschedule meetings. 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 to the Department that staff have received training on revised district procedures to schedule Team meetings well in advance of the annual date and document communications with parents, including attempts to secure parent participation at Team meetings and parent requests to postpone Team meetings, in student records. This evidence must include the agenda, handouts, and sign-in sheet with the signature and title of staff persons 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 by March 5, 2015.  Provide a report on the results of an internal monitoring of records for students who had annual IEP Team meetings after the date staff received training on the district's new procedures to ensure the district is conducting Team meetings at least annually, on or before the anniversary date of the IEP, and that communications with parents are documented in the student record. 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.  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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| COORDINATED PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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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 full copies of the proposed IEP and proposed placement. They are providing one full copy of the IEP along with the two copies of the proposed IEP signature page and the placement signature page. | | |
| **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.  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  Stacey Jenkins, Principal | | **Expected Date of Completion:**  10/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Evidence in the file: notes as to what date the two copies of the IEP's were sent out, timelines were met and check list shows all paperwork in file. Agenda and sign in for professional development. | | |
| **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:** 12/19/2014  **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 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 student records 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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| COORDINATED PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews demonstrated that the district does not consistently state why if the student is removed from the general education classroom at any time, the removal is considered critical to the student's program and provide the basis for its conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  The non-justification section of the IEP did not describe why a student could not receive their services in the general education setting.  Professional development will be provided so that staff will be able to fully explain the need to remove a child from the general education setting for their special education services. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Stacey Jenkins, Principal | | **Expected Date of Completion:**  10/15/2015 |
| **Evidence of Completion of the Corrective Action:**  IEP's with more descriptive non-justification statements that describe why a student cannot get their services in the general education setting.  Agenda and sign-in from professional development. | | |
| **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:** 12/19/2014  **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 special education student records after staff receive 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.  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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| COORDINATED PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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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 the district 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 Regional District has a functioning regional Parent Advisory Council. A waiver was approved for the regional PAC for the 2012-3013 school year. A new waiver form must be completed and submitted annually for approval of the regional PAC. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Stacey Jenkins, Principal | | **Expected Date of Completion:**  10/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Copy of the submitted waiver and approval for the regional PAC. | | |
| **Description of Internal Monitoring Procedures:**  The Pupil Services Director will submit a waiver for a regional PAC annually. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 12/19/2014  **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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| COORDINATED PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:**  SE 56 Special education programs and services are evaluated | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews indicated that principals of the schools in the associated regional district meet regularly to discuss trends and issues but no results of a special education program evaluation, or recommendations for change based on such an evaluation, was provided for this district. | | |
| **Description of Corrective Action:**  Monthly meetings with the principal to monitor: programmatic needs and changes, budget, staffing, special education programming. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Stacey Jenkins, Principal | | **Expected Date of Completion:**  10/15/2015 |
| **Evidence of Completion of the Corrective Action:**  List of monthly meetings and agenda items discussed. | | |
| **Description of Internal Monitoring Procedures:**  Ongoing monthly meetings between principal and pupil services director for ongoing monitoring of special education services and student progress. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 56 Special education programs and services are evaluated | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/19/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district pupil services director plans to have monthly meetings with the principal to discuss, among other topics, special education programming. However, the district's proposed evidence of completion of corrective action does not indicate that the district will produce a report of the conclusions of its evaluation of special education programs. | | |
| **Department Order of Corrective Action:**  Provide the Department with the results of the evaluation of district special education programs and services. | | |
| **Required Elements of Progress Report(s):**  Provide the Department with a report on the results of the district's evaluation of school year 2014-2015 special education programming and services that includes findings and recommendations for future changes by June 1, 2015. | | |
| **Progress Report Due Date(s):**  06/01/2015 | | |

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

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| **Criterion & Topic:**  CR 25 Institutional self-evaluation | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews indicated that the district does not yet have a systematic method of evaluating all aspects of its K - 6 program annually to ensure that all students have equal access to all programs. | | |
| **Description of Corrective Action:**  Monthly meetings with the principal to monitor programming and that all students have access to all programs: programmatic needs and changes, budget, staffing, special education programming. | | |
| **Title/Role(s) of Responsible Persons:**  Irene Ryan, Pupil Services Director  Stacey Jenkins, Principal | | **Expected Date of Completion:**  10/15/2015 |
| **Evidence of Completion of the Corrective Action:**  List of monthly meeting dates and topics. | | |
| **Description of Internal Monitoring Procedures:**  Ongoing monthly meetings between the principal and pupil services director. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 12/19/2014  **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, 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 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: Williamsburg 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:** Williamsburg School District 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:**  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:** Williamsburg 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.  Williamsburg Public 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. Williamsburg 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.  Williamsburg Public 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. Building Principal is attending the administrator SEI training in the Spring 2015. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Dir. of ELL Program 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:**  Williamsburg 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 Building Principal | | **Expected Date of Completion for Each Corrective Action Activity:** March 1, 2015 | |
| **Evidence of Completion of the Corrective Action:** ELL class schedule | | | |
| **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 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:** Williamsburg 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:** 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 consistently contain the home language survey, English Language Screening Assessment, student schedules, or progress reports or report cards. There was no evidence of translation or interpretation of such reports.* | | | |
| **Narrative Description of Corrective Action:**  Williamsburg 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:**  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 a home language survey, English Language Screening Assessment, parent notification letter, student schedules, progress reports or report cards with translation or interpretation of such reports 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 all required ELL documents 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. | | | |
| **Required Elements of Progress Report(s):**  Submit a plan that details how the district will conduct on-going internal monitoring to ensure a home language survey, English Language Screening Assessment, parent notification letter, student schedules, progress reports or report cards with translation or interpretation of such reports 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 parent notification letter. 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** | | | |