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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: Boston Green Academy Horace Mann Charter School (District)

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 09/16/2014.

**Mandatory One-Year Compliance Date:** **09/16/2015**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 2 | Required and optional assessments | Partially Implemented |
| SE 3 | Special requirements for determination of specific learning disability | Partially Implemented |
| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | Partially Implemented |
| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 18A | IEP development and content | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | 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 25 | Parental consent | Partially Implemented |
| SE 29 | Communications are in English and primary language of home | Partially Implemented |
| SE 32 | Parent advisory council for special education | Not Implemented |
| SE 40 | Instructional grouping requirements for students aged five and older | Partially Implemented |
| SE 41 | Age span requirements | Partially Implemented |
| SE 51 | Appropriate special education teacher licensure | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 11A | Designation of coordinator(s); grievance procedures | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 16 | Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and interviews indicated that the school does not consistently ensure that assessments are conducted in all areas related to a student's suspected disability. | | |
| **Description of Corrective Action:**  All required educational assessments will now be conducted by teachers and itinerant assessors for initial evaluations and re-evaluations to properly assess students before Team eligibility meetings. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  10/15/2014 |
| **Evidence of Completion of the Corrective Action:**  All student files scheduled for initial evaluation or re-evaluation will now include required educational assessments and a list will be filed in the Director of Special Education's office. | | |
| **Description of Internal Monitoring Procedures:**  The SESS-Coordinator will inform the Director of Special Education of all upcoming meetings. The Special Education Director will attend all or, ur and re evaluation meetings to ensure all assessments were conducted in all areas related to the student’s disability. A checklist of IEP file contents according to DESE regulations will be created and inserted into each student IEP file. The SESS Coordinator will review each file checklist before Team IEP meetings. Director of Special Education will also conduct a blanket review of all incoming first-year IEP files in September and all returning student IEPs in May to make any necessary corrective actions. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, for student records identified by the Department, provide evidence of meeting and evaluations considered specifically for disability based upon Student Record Worksheet.  By January 12, 2015, submit file checklist created based upon DESE regulations. Submit evidence of training of staff on procedures, as well as written documentation of procedures for all evaluations and training materials. Submit process for reviewing records of students who enroll into Boston Green through the school year.  By March 13, 2015, please submit log that will be filed in the Director of Special Education's office that indicates all students who have had an initial, re-evaluation, or unscheduled re-evaluation conducted to include commencement of procedure. Conduct and internal audit of three students with different disabilities who have gone through a consent for evaluation meeting's signed consent form to ensure students are assessed in all areas of suspected disability.  \*Please note when conducting administrative 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):**  01/12/2015  03/13/2015 | | |

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| **Criterion & Topic:**  SE 3 Special requirements for determination of specific learning disability | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review indicated that IEP Teams do not always create a written eligibility determination as to whether or not a student has a specific learning disability. | | |
| **Description of Corrective Action:**  Upon receipt of the CPR report the Special Education Director and the SESS-Coordinator met to review the required assessments and plan corrective action.  The Classroom Observation checklist will be completed by the teacher prior to the TEAM mtg.,  the SESS-Coordinator will use the Boston Public Schools Specific Learning Disability Team determination of eligibility form at all Original, Unscheduled and Revaluation team meetings. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  10/15/2014 |
| **Evidence of Completion of the Corrective Action:**  All folders presented for original, unscheduled or revaluation will now include the required DESE and district paperwork as evidence of the specific learning disability.  A separate file with the names of students submitted for original, unscheduled and re evaluation will be filed in the Special Education Director 's office for internal audit. | | |
| **Description of Internal Monitoring Procedures:**  he SESS-Coordinator will inform the Director of Special Education of all upcoming meetings where SLD is suspected. The Special Education Director will attend the meeting and sign off on SLD team determination forms. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 3 Special requirements for determination of specific learning disability | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district’s proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and monitoring system to ensure that Teams develop a written SLD eligibility determination for all initial referrals and re-evaluations when SLD is suspected. The system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit a description of the district's internal oversight and monitoring system with periodic reviews, along with the name/role of the designated person.  By March 13, 2015, conduct an internal review of approximately 5 records with initial SLD evaluations/SLD re-evaluations conducted post training for evidence that IEP Teams created a written eligibility determination as to whether or not a student has a specific learning disability. Provide an analysis of this review to include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and any steps that the district has taken to remedy the non-compliance.  \*Please note when conducting administrative 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):**  01/12/2015  03/13/2015 | | |

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| **Criterion & Topic:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review and interviews indicated that notice informing parents of the transfer of educational decision-making rights from the parent/guardian to the student is not consistently provided one year prior to students turning 18 years of age. According to student record review, the district does not consistently implement procedures to obtain consent from students with educational decision-making rights to continue special education services. | | |
| **Description of Corrective Action:**  Once a student turns age 17, the SEIMS program will populate the Age of Majority form. The SESS Coordinator will print the forms from SEIMS and will send notice to both student and parent regarding the transfer of educational rights scheduled to occur at age 18, referred to as the Age of Majority letter. During the first regularly scheduled IEP Team meeting following the student’s 18th birthday, the SESS Coordinator will notify the Team of the transfer of educational rights. If the student decides to either delegate or share educational decision-making at that time, the decision will be documented in the presence of the Team. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  10/31/2014 |
| **Evidence of Completion of the Corrective Action:**  All IEP files will now include a copy of Age of Majority letter sent to students and parents regarding the transfer of educational rights to the student upon the age of 18. Boston Public schools Special Education Information Management system (SEIMS) currently manages an internal database that organizes and tracks important IEP dates according to DESE regulations. The database includes when Age of Majority letter will be sent. The age of majority form will be submitted as per the Boston public schools age of majority protocol. | | |
| **Description of Internal Monitoring Procedures:**  A checklist of IEP file contents according to DESE regulations will be created and inserted into each student IEP file, including the Age of Majority letter as applicable.  The Boston Public Schools currently manages an internal database that organizes and tracks important IEP dates according to DESE regulations. This includes the date of when Age of Majority letter is populated and made available for download from the BPS Special Education Information Management Systems (SEIMS). | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed policy to address the assignment of educational decision-making rights during the first regularly scheduled Team meeting following the student's 18th birthday does not take into account the possible passage of months between the student's age of majority & the Team meeting. This determination can be made prior to the student's 18th birthday or within a reasonably short period of time following the 18th birthday. If the student decides to retain decision-making rights, the student simply has to sign the current IEP. | | |
| **Department Order of Corrective Action:**  Using the Department's guidance at http://www.doe.mass.edu/sped/advisories/11\_1.html, develop procedures for obtaining consent consistent with the student's choice for decision-making. Please ensure that this policy takes into account the needs/characteristics of the school's student population. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, for student records identified by the Department, provide evidence of notice and consent for the age of majority.  By January 12, 2015, submit the revised procedures for obtaining consent consistent with the student's choice for decision-making based on the Department's guidance at http://www.doe.mass.edu/sped/advisories/11\_1.html.  By January 12, 2015, submit a copy of the training agenda and signed attendance sheets as evidence of staff training on revised AOM procedures. Also include in the training the requirement to secure student's consent to continue IEP services when the student has sole or shared decision-making.  By January 12, 2015, submit the description of the internal tracking system to ensure that students with sole or shared decision-making have signed the IEP following the attainment of the age of majority. Identify the person(s) responsible for the oversight, including the date of the system's implementation.  By March 13, 2015, following implementation of all corrective actions, submit the results of an administrative review of high school student records for evidence that students and parents have been notified one year in advance of the age of majority and the student's consent to continue the IEP has been secured when s/he has sole/shared decision-making. Indicate the number of records reviewed at the high school, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance.  \*Please note when conducting administrative 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). | | |
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| **Criterion & Topic:**  SE 8 IEP Team composition and attendance | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review demonstrated that required Team members are not consistently excused in writing by parents or provide written input to the parent and the IEP Team for the development of the IEP prior to the meeting. | | |
| **Description of Corrective Action:**  All Team Members that are not in attendance per the meeting invitation form will be formally excused in writing by the parents or will provide written input to the parent and the IEP Team for the development of the IEP prior to the meeting. The process will be facilitated at the time of the meeting by the SESS Coordinator. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A copy of the Parents excusal form shall be filed in into each student's IEP file where applicable. | | |
| **Description of Internal Monitoring Procedures:**  A checklist of IEP file contents according to DESE regulations will be inserted into each student IEP file. The SESS Coordinator will review each file checklist before Team IEP meetings. Director of Special Education will also conduct a blanket review of all incoming first-year IEP files in September and all returning student IEPs in May to make any necessary corrective actions. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Please note that only required Team members must be excused in writing by the parent prior to the Team meeting. Please see the Reference Sheet for Team Membership at http://www.doe.mass.edu/sped/IDEA2004/spr\_meetings/default.html for guidance on Team composition. | | |
| **Department Order of Corrective Action:**  Revise the district's procedures for excusing required Team members to conform with the Department's guidance. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the revised procedures related to the Team Meeting excusal process for required members along with evidence of staff meeting on these procedures, which will include but not be limited to an agenda and copies of the materials presented.  By March 13, 2015, conduct an internal review of approximately 5 records with IEP development conducted post training for evidence that all required Team members attended or were excused in writing in advance of the meeting & provided written input. Provide an analysis of this review to include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and any steps that the district has taken to remedy the non-compliance.  \*Please note when conducting administrative 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). | | |
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| **Criterion & Topic:**  SE 13 Progress Reports and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review indicated that progress reports are not consistently documented in student records. | | |
| **Description of Corrective Action:**  Teacher's will be trained on the BPS Special Education Information Management System (SEIMS) progress report process. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Progress reports will be filed in each students IEP file with a checklist of IEP file contents according to DESE regulations will be inserted into each student IEP file. | | |
| **Description of Internal Monitoring Procedures:**  The BPS SEIMS system proprides internal evidence of progress report completion. SESS Coordinator will submit a report of all progress reports to the Director of Special Education. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 13 Progress Reports and content | **Corrective Action Plan Status:** Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit evidence of training, signed attendance sheets and materials to train teachers on the BPS Special Education Information Management System (SEIMS) progress report process.  By March 13, 2015, conduct an internal review of approximately 10 records with progress reporting post training for evidence that all progress reports are documented in the student record. Provide an analysis of this review to include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and any steps that the district has taken to remedy the non-compliance.  \*Please note when conducting administrative 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):**  01/12/2015  03/13/2015 | | |

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| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review indicated that IEP Teams do not always consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing for students on the autism spectrum and for students whose disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing. | | |
| **Description of Corrective Action:**  BGA will conduct a professional development one time per year in August for both general education & special education teachers regarding this special education regulation. The topic of bullying, harassment and teasing will be reviewed at IEP team meetings. The training will also emphasize the need to properly document this IEP Team discussion in the meeting notes and within the IEP. Training will be documented by attendance sheet. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The team meeting notes form has been amended to include a section for bully review. The Special Education Director and/or SESS Coordinator will review 15 student records that have had IEP Team meetings between November 2014-January 2015. | | |
| **Description of Internal Monitoring Procedures:**  The Special Education Director will meet with the SESS Coordinator to spot monitor the implementation of the bullying review by checking the selection in the IEP copy of the team meeting notes. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district’s proposed internal monitoring process does not indicate the frequency of ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Determine the approximate frequency of "spot monitoring" in the district's proposed internal oversight and tracking system to ensure that IEPs for students whose disability affects social skills development, or when his or her disability makes him or her vulnerable to bullying , harassment, or teasing include skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, for student records identified by the Department, submit evidence that the IEP Teams considered skills and proficiencies to address or avoid bullying, harassment and teasing.  By January 12, 2015, for student Hugo Lopez, in addition to specifically addressing the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing in the student's IEP, address the 7 areas of IEP development identified in Department guidance at http://www.doe.mass.edu/sped/advisories/07\_1ta.html for students with ASD. Provide the amendment form, the Team attendance sheet (N3A) and any documentation demonstrating the district’s actions, including a narrative description of the district’s actions for this student's IEP.  By January 12, 2015, provide clarification of the frequency of spot checking IEPs in district's internal oversight process for Team consideration of bullying, harassing, and teasing.  By January 12, 2015, using the Department's guidance at http://www.doe.mass.edu/bullying/considerations-bully.html as the basis of its staff training, provide evidence of training for SY 2014 - 2015, including the agenda, signed attendance sheets, and a sample of the materials presented.  By March 13, 2015, conduct an internal review of approximately 3-4 records with IEP development post-training for evidence that IEP Teams specifically considered & addressed the skills and proficiencies to address or avoid bullying, harassment and teasing in IEPs for applicable students. Provide an analysis of this review to include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and any steps that the district has taken to remedy the non-compliance.  \*Please note when conducting administrative 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):**  01/12/2015  03/13/2015 | | |

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review indicated that following the development of the IEP, the school provides a Team meeting summary, but does not send two (2) copies of the proposed IEP and placement within 10 days to the parent. | | |
| **Description of Corrective Action:**  Two copies of the proposed IEP will be sent to Parents with the note of enclosure: "2 copies of the IEP please sign and return one copy and keep one copy for your records". | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A copy of the properly noted N1 will be filed in the students IEP file. | | |
| **Description of Internal Monitoring Procedures:**  The Program Director will along with the SESS Coordinator will randomly review 15 IEP files for compliance between November 2014 and January 2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** The district's proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:** Develop an ongoing internal oversight system to ensure that parents receive 2 copies of the proposed IEP within 10 days of the IEP meeting. The system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit a description of the district's ongoing oversight and monitoring system for periodic IEP review, along with the name/role of the designated person.  By March 13, 2015, conduct an internal review of approximately 10 records with IEP development post-training for evidence that 2 copies of the proposed IEP and placement were sent to parents within 10 days. Provide an analysis of this review to include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and any steps that the district has taken to remedy the non-compliance.  \*Please note that when 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 record review; b) Date of the review; c) Name of the person(s) who conducted the review, their role(s), and their signatures. | | |
| **Progress Report Due Date(s):**  01/12/2015  03/13/2015 | | |

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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 records do not consistently contain Notices of Proposed School District Action (N1) to propose the IEP and summarize the IEP Team's decisions and considerations. Additionally, when this notice is present in the record, the following federally required information is not consistently included in the form: the action the school is proposing to take, any rejected options and the reason for the rejection, evaluation procedures, and other relevant factors for the school's decisions. | | |
| **Description of Corrective Action:**  Currently the BPS internal system SEIMS provides the N1 as a part of the IEP creation process. The default for the N1 form does not allow the SESS Coordinator to progress with the development of the IEP until the N1 has been completed. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A copy of the N1 which includes the action the school is proposing to take, any rejected options and the reason for the rejection, evaluation procedures, and other relevant factors for the school's decisions will be included in each IEP file. | | |
| **Description of Internal Monitoring Procedures:**  The Program Director will along with the SESS Coordinator will randomly review 15 IEP files for compliance between November 2014 and January 2015. | | |
| 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:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Develop an ongoing internal monitoring system to ensure that Notices of Proposed District Action (N1s) address all required questions and ard documented in the student record. The system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit a description of the district's ongoing oversight and monitoring system for periodic IEP review, along with the name/role of the designated person.  By March 13, 2015, conduct an internal review of approximately 10 records with IEP development post-training to ensure that all components of the N1 are addressed and N1s are documented in the student record. Please provide an analysis of this review to include the number of records reviewed and the number of records found to be non-compliant. For any records found to be non-compliant, please provide an analysis of the root cause(s) and any steps that the district has taken to remedy the non-compliance.  \*Please note that when 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 record review; b) Date of the review; c) Name of the person(s) who conducted the review, their role(s), and their signatures. | | |
| **Progress Report Due Date(s):**  01/12/2015  03/13/2015 | | |

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| **Criterion & Topic:**  SE 25 Parental consent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review demonstrated that when the participation or consent of the parent is required and the parent fails or refuses to participate, the school does not document its multiple attempts to secure the parent's consent. | | |
| **Description of Corrective Action:**  When a parent fails or refuses to sign the consent or IEP the BPS internal SEIMS documents the multiple attempts made to acquire the system. The system further notes the consent or invitation with the number of attempts made to acquire the signature. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A copy of each attempt will be filed in the IEP file with the number of the attempt filed in consecutive order. | | |
| **Description of Internal Monitoring Procedures:**  The Program Director will along with the SESS Coordinator will randomly review 15 IEP files for compliance between November 2014 and January 2015. A copy of the Headmaster's overdue report will be kept on file by the Director of Special Education. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 25 Parental consent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance with documenting the district's multiple attempts to secure parental consent. | | |
| **Department Order of Corrective Action:**  Develop an ongoing internal monitoring system to ensure that the district's attempt to secure parental consent is consistently documented in the student record. The system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit a description of the district’s ongoing internal oversight and monitoring system with periodic reviews, along with the name/role of the designated person.  By March 13, 2015, conduct an internal review of approximately 5 records with IEP activities post-training to demonstrate the district's documentation of multiple attempts to secure parents' consent or participation in the student record. Please provide an analysis of this review to include the number of records reviewed and the number of records found to be non-compliant. For any records found to be non-compliant, please provide an analysis of the root cause(s) and any steps that the district has taken to remedy the non-compliance.  \*Please note that when 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 record review; b) Date of the review; c) Name of the person(s) who conducted the review, their role(s), and their signatures. | | |
| **Progress Report Due Date(s):**  01/12/2015  03/13/2015 | | |

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

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| **Criterion & Topic:**  SE 29 Communications are in English and primary language of home | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Record review indicated that the school does not consistently translate documents into the primary language of the home for families whose primary language is other than English. | | |
| **Description of Corrective Action:**  The BPS internal system identifies the students home language and allows for the SESS Coordinator to request the documentation in the home language of the student. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The SESS Coordinator will make a note on the meeting notes form of the parents preferred language in regard to the IEP paperwork. | | |
| **Description of Internal Monitoring Procedures:**  The Program Director will along with the SESS Coordinator will randomly review 15 IEP files for compliance between November 2014 and January 2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 29 Communications are in English and primary language of home | **Corrective Action Plan Status:** Disapproved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district indicates that parents' preferred language will be noted on Team meeting notes, rather than having information beforehand. This system does not allow the district to provide translated consent forms, meeting invitations, and assessment summaries to parents before the meeting or ensure an interpreter will be present at the IEP meeting.  The district's proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Revise the district's procedure so that the SESS coordinator will be able to disseminate translated documents to parents whose primary language is other than English before, during, and after IEP Team meetings.  Develop an ongoing oversight and monitoring system to ensure that documents are translated for parents who have indicated they need translations (Home Language Survey). The system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, for student records identified by the Department, submit evidence of activities described on Student Issues Worksheet.  By January 12, 2015, submit the revised process for ensuring that documents are translated for parents who identified a language other than English as a preferred method of communication. Provide evidence of staff training on this revised process, including agenda, signed attendance sheet, and sample of training materials.  By March 13, 2015, conduct an internal review of approximately 5 records with IEP activities conducted post-training for evidence that documents are translated for parents who have indicated this need. Provide an analysis of this review to include the number of records reviewed and the number of records founds to be non-compliant. For any records found to be non-compliant, provide an analysis of the root cause(s) and any steps that the district has taken to remedy the non-compliance.  \*Please note when conducting administrative 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):**  01/12/2015  03/13/2015 | | |

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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:**  Not Implemented |
| **Department CPR Findings:**  Staff and parent interviews indicated that the school does not have an active Parent Advisory Council. | | |
| **Description of Corrective Action:**  All families of students with IEPs and 504 plans at Boston Green Academy will automatically members of the GreenPAC. The GreenPAC will formally meet once a year with additional meetings scheduled as needed. As BGA is a Horace Mann Charter school within the Boston Public Schools District, GreenPAC Members will also be encouraged to attend Boston Public Schools SPEDPAC meetings. BPS SPEDPAC meeting dates and locations will be provided to all BGA GreenPAC , members. GreenPAC bylaws will be developed, reviewed and published annually. Bylaws will include specifics regarding the role of council, the services provided by to support students, and rights and responsibilities of parents. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The Boston Green Academy Parent's Advisory Council (GreenPAC) meetings will be formally recorded in the annual calendar. All GreenPAC families will be informed by mail and robocall of the meetings during the school year. At each event there will be sign-in sheets of all attendees. | | |
| **Description of Internal Monitoring Procedures:**  The Director of Special Education will submit an end-of-year summary of GreenPAC activities to the Headmaster. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Disapproved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district cannot use its school site committee in lieu of a special education parent advisory committee (SEPAC), nor can Boston's SEPAC substitute for a school level SEPAC. | | |
| **Department Order of Corrective Action:**  Review the Department's guidance on developing a special education parent advisory council at http://www.doe.mass.edu/sped/pac/. The district should also consult the Federation for Children with Special Needs' website at http://fcsn.org/masspac/. Propose a plan to create a special education PAC, including recruiting parents of students with IEPs & 504 plans, developing by-laws, and holding at least one workshop annually within the school on the rights of students and their parents and guardians under the state and federal special education laws. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the school's proposal to develop a functioning SEPAC within the school. This document should include a recruitment strategy, a proposal to develop by-laws, and a plan to hold the annual workshop on the rights of students and their parents and guardians under the state and federal special education laws.  By March 13, 2015, the district will demonstrate that a formal meeting has been held by district's SPEDPAC through agenda's attendance, handouts, and/or presentations. Please note that the annual workshop on the rights of students and parents on state and federal special education laws can be provided by an outside organization such as the Federation onsite at the school. | | |
| **Progress Report Due Date(s):**  01/12/2015  03/13/2015 | | |

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

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| **Criterion & Topic:**  SE 40 Instructional grouping requirements for students aged five and older | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews demonstrated that the following special education instructional groups exceed the maximum number of students to licensed special education teacher: Environmental Science, section 3; Chemistry 1, section 4; Pre-Calculus, section 3; Geometry, section 5; Algebra 1, section 4; Advanced Algebra, section 3; College English Language Arts 9 and 10; Humanities 3 and 4; English Language Arts Fundamentals; History/Social Studies Foundations 11 and 12; Math Fundamentals 9 and 10; Unified Science Foundations 9 and 10; and Self Help Skills sections 001 and 002. Document review and interviews demonstrated that the school does not provide written notification to the Department or the parents of all group members of the decision to increase the instructional group size and the reasons for such decision. | | |
| **Description of Corrective Action:**  A review of all special education classes is currently underway and adjustments to special education staff assignments will be made. With the addition of a new teaching assistant some staffing adjustments have already been made.  In cases where classes remain exceed the maximum students additional staff will be added or BGA will provide written notification to the Department and the parents of all group members of the decision to increase the instructional group size and the reasons for such decision. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Shelley E Joyner, Director of Special Education | | **Expected Date of Completion:**  11/19/2014 |
| **Evidence of Completion of the Corrective Action:**  A staffing plan will be provided to the DESE to show evidence that corrective action has been taken to bring the school district into compliance with this special education regulation by the end of semester 2 of the 2014-2015 school year. In the case that some classes remain out of compliance BGA will provide copies of the written notice to DESE and to the parents. | | |
| **Description of Internal Monitoring Procedures:**  An excel spreadsheet of all special education instructional groupings for the 2nd semester of the 2014-15 school year will be developed with assigned staffing noted for each grouping. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 40 Instructional grouping requirements for students aged five and older | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Please note that increased instructional group sizes are in effect only for the year in which they are initiated, and waivers are intended as a means to temporarily address an instructional group that is larger than regulations allow. Please see http://www.doe.mass.edu/forms/waivers/ - form b for waiver information. | | |
| **Department Order of Corrective Action:**  Once the district has developed its staffing plan, if there is continued non-compliance, the district will conduct a root cause analysis that explains why instructional groups continue exceed regulatory requirements. Upon identification of the cause(s), please describe the corrective actions to address the issue(s) of consented-to optional assessments not being completed. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the staffing plan and the excel spreadsheet of the special education instructional groupings. If instructional groups continue to exceed regulatory limits, submit the results of the district's root cause analysis, including the corrective actions and the associated timelines for correction. | | |
| **Progress Report Due Date(s):**  01/12/2015 | | |

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

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| **Criterion & Topic:**  SE 41 Age span requirements | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the ages of the youngest and oldest students in the following special education instructional groups differed by more than 48 months: English Language Arts Fundamentals, History/Social Studies Foundations 11, Math Fundamentals 9, and Unified Science Foundations 9 and 10. Document review and interviews verified that the school did not submit a written request for approval of a wider age range to the Department in cases where the school believes a request is justified. | | |
| **Description of Corrective Action:**  BGA has already made corrections to the age span grouping for the Life Skills program. | | |
| **Title/Role(s) of Responsible Persons:**  Shelley E Joyner, Director of Special Education  Patricia Butler, SESS-Coordinator | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The Director of Special Education has reviewed the roster of the Life Skills Program. A copy of the roster by groupings is on file in the program Directors office. | | |
| **Description of Internal Monitoring Procedures:**  In the vent that though the lottery process the age span increase beyond 48 months BGA will provide written notification to the Department and the parents of all group members of the decision to increase the age span requirements the reasons for such decision. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 41 Age span requirements | **Corrective Action Plan Status:** Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the updated roster by special education age span groupings for SY 2014 - 2015.  By March 13, 2015, submit the results of an administrative review of special education classes or groups for age span. Identify the class by subject & grade level and indicate the DOB for the oldest & youngest students enrolled in each group. Indicate the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance.  \*Please note when conducting administrative 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):**  01/12/2015  03/13/2015 | | |

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

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| **Criterion & Topic:**  SE 51 Appropriate special education teacher licensure | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review demonstrated that two special education teachers are not appropriately licensed. | | |
| **Description of Corrective Action:**  A review of all special education teacher credentials was done and adjustments to special education staff assignments was be made. Programmatic changes have already been made to address the staffing of the Learning Center. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Shelley Joyner, Director of Special Education | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  Evidence of programmatic changes to the Learning Center will be provided to the DESE to show evidence that corrective action has already been taken to bring the school district into compliance with this special education regulation immediately. | | |
| **Description of Internal Monitoring Procedures:**  An excel spreadsheet of all special education instructional course offerings of the 2014-15 school year will be developed with assigned staffing noted for each grouping. This excel spreadsheet submitted to DESE as evidence of implementation of this special education regulation. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 51 Appropriate special education teacher licensure | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district’s proposed internal monitoring process does not address the need for ongoing monitoring to ensure continued compliance. | | |
| **Department Order of Corrective Action:**  Develop an internal oversight and monitoring system to ensure that all special education teachers & related service providers are appropriately licensed. The system should include oversight and periodic reviews by the Director of Special Education or their designee to ensure ongoing compliance. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the special education assignments for the 2014-2015 school year, including each special education teacher's name & license number for ELAR verification.  By January 12, 2015, submit a description of the district's internal oversight and monitoring system with periodic reviews, along with the name/role of the designated person. | | |
| **Progress Report Due Date(s):**  01/12/2015 | | |

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

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| **Criterion & Topic:**  CR 3 Access to a full range of education programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Although the school describes how it ensures equal access to a full range of education programs for all students, regardless of race, color, sex, gender identity, religion, national origin, sexual orientation, or disability, this description does not address the protected category of homelessness. | | |
| **Description of Corrective Action:**  Since BGA is a Horace Mann Charter School within the Boston Public Schools District will add a statement to address homelessness which aligns with BPS protocols in reference to the McKinney-Vento Act which ensures that students who are experiencing homelessness can opt to remain in their original school. Which further states how changing schools can negatively affect how a student performs academically and how they form relationships with other students, every effort is made to provide children with educational stability.  A letter will be sent home to current families to update the homelessness information. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Pauline Lugira, Assistant Headmaster | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A copy of the letter to families and the updated 2015-2016 Student and Family Handbook and website statement will be provided to DESE. | | |
| **Description of Internal Monitoring Procedures:**  A copy of the updated 2015-2016 Student and Family Handbook and website statement will be provided to DESE. All future Student and Family Handbooks and website updates will include a statement regarding the McKinney-Vento Act. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, provide the revised description for ensuring equal access to all protected classes, including homeless students. Include the letter to families, along with any documentation that demonstrates the dissemination of the revised policy. | | |
| **Progress Report Due Date(s):**  01/12/2015 | | |

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

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| **Criterion & Topic:**  CR 7 Information to be translated into languages other than English | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the school has not translated its student handbook into the major languages spoken by parents/guardians whose primary language is other than English. | | |
| **Description of Corrective Action:**  A student home language survey will be conducted by the ELL Coordinator to determine the most prominent languages spoken by BGA students and their parents/guardians. The student and family handbook will revised for the 2015-2016 school year and be finalized at the end of June, 2015. The school will contract for translations of the Student and Family Handbook into the most prominent languages as identified in the home language survey and will post them on the BGA website. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Mia Leftkowitz, ELL Coordinator | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A copy of the 2015-2016 Student and Family Handbook in the identified most prominent language will be available for DESE review. | | |
| **Description of Internal Monitoring Procedures:**  Annual assessment of student language surveys to determine most prominent languages spoken at home; Annual budget review to ensure that funds exist to provide for translation fees for Student and Family Handbook and other important documents. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Disapproved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposal does not address translation of its handbook for the current school year 2014-2015. | | |
| **Department Order of Corrective Action:**  The district will translate its current handbook into the major languages spoken by parents/guardians in the school community and ensure its availability for the 2014-2015 SY. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the district's 2014-2015 translated handbook(s). Alternatively, the district may attach a link to its website in lieu of uploading the document(s). | | |
| **Progress Report Due Date(s):**  01/12/2015 | | |

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

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| **Criterion & Topic:**  CR 9 Hiring and employment practices of prospective employers of students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the school does not require employers recruiting at the school to sign a statement that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices on the basis of race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. | | |
| **Description of Corrective Action:**  The school will prepare a statement and require all employers recruiting at the school to sign the statement that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices on the basis of race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Vicky Rivera, College and Career Counselor | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  The college and career counselor will maintain a file of all prospective employers along with their signed statement. | | |
| **Description of Internal Monitoring Procedures:**  The College and Career Counselor will submit the recruiting employers checklist of compliance to the Headmaster by June 2015. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the district's employer statement, requiring all employers who are recruiting at the school to comply with applicable federal and state laws prohibiting discrimination in hiring and employment practices on the basis of race, color, national origin, sex, gender identity, handicap, religion and sexual orientation. | | |
| **Progress Report Due Date(s):**  01/12/2015 | | |

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

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that while the school's student handbook includes a nondiscrimination policy affirming every student's right to attend the public schools of the town where he or she actually resides, regardless of race, color, sex, religion, national origin or sexual orientation, this policy does not address the protected category of gender identity. | | |
| **Description of Corrective Action:**  BGA will add a statement to the student handbook to address gender identification. The student and family handbook will revised for the 2015-2016 school year and be finalized at the end of June, 2015. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Pauline Lugira, Assistant Headmaster | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A copy of the 2015-2016 Student and Family Handbook with updates to the gender identification statement will be available for DESE review. | | |
| **Description of Internal Monitoring Procedures:**  A copy of the updated Student and Family Handbook and website statement will be provided to DESE. All future student handbooks and website updates will include a statement regarding gender. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Disapproved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposal does not address the 2014-2015 SY. The Department accepts the proposed revision of the 2015-2016 handbook. | | |
| **Department Order of Corrective Action:**  Disseminate the revised nondiscrimination policy affirming every student's right to attend the public schools of the town where he or she actually resides, regardless of race, color, sex, gender identity, religion, national origin or sexual orientation to parents and students. The district may send a memo or notice to families that can be used as an addendum to the handbook. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2014, submit evidence of disseminating to parents the district's revised nondiscrimination policy affirming every student's right to attend the public schools of the town where he or she actually resides, regardless of race, color, sex, gender identity, religion, national origin or sexual orientation. | | |
| **Progress Report Due Date(s):**  01/12/2015 | | |

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

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| **Criterion & Topic:**  CR 11A Designation of coordinator(s); grievance procedures | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that although the school has adopted and published grievance procedures for students and for employees, the school has not designated one or more staff members to serve as coordinator(s) for compliance with its responsibilities under Title IX and Section 504. | | |
| **Description of Corrective Action:**  BGA will identify staff members to serve as coordinator(s) for compliance with its responsibilities under Title IX and Section 504. BGA will add to the name(s), office address(es), and phone number(s) of the Title IX and 504 coordinators in its published materials to students and families.  Currently 504 compliance for students is the responsibility of the SESS Coordinator. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Pauline Lugira, Assistant Headmaster  Jeff becker, Assistant Headmaster | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A copy of the 2015-2016 Student and Family Handbook which includes the name(s), office address(es), and phone number(s) of the Title IX and 504 coordinators along with the grievance procedure will be available for DESE review. | | |
| **Description of Internal Monitoring Procedures:**  A copy of the 2015-2016 Student and Family Handbook will include the name(s), office address(es), and phone number(s) of the Title IX and 504 coordinators and the grievance procedure. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 11A Designation of coordinator(s); grievance procedures | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** Although district currently identifies that 504 compliance is under the responsibility of the SESS Coordinator, it does not address which individual(s) will be responsible for Title IX compliance for the 2014-2015 SY. The Department accepts the district's proposed corrective action for the 2015-2016 SY. | | |
| **Department Order of Corrective Action:** Disseminate information to parents and students regarding the specific name(s), office address(es) and phone number(s) of the school based Title IX and 504 coordinators for SY 2014 - 2015. The district may send a memo or notice to families that can be used as an addendum to the handbook. | | |
| **Required Elements of Progress Report(s):** By January 12, 2015, submit evidence that the district has disseminated information to families and students on contact information for Title IX and 504 coordinators for the 2014-2015 school year to include the specific name(s), office address(es), and phone number(s) of the coordinators. | | |
| **Progress Report Due Date(s):**  01/12/2015 | | |

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

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| **Criterion & Topic:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the school does not include the name(s), office address(es), and phone number(s) of the Title IX and 504 coordinators in its published materials to students and families. | | |
| **Description of Corrective Action:**  BGA will add the name(s), office address(es), and phone number(s) of the Title IX and 504 coordinators in its published materials to students and families. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Pauline Lugira, Assistant Headmaster | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  An updated copy of the 2015-2016 Student and Family Handbook which includes include the name(s), office address(es), and phone number(s) of the Title IX and 504 coordinators in will be available for DESE review. | | |
| **Description of Internal Monitoring Procedures:**  All future Student and Families Handbooks will include the name(s), office address(es), and phone number(s) of the Title IX and 504 coordinators in its published materials to students and families. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed corrective action does not address the 2014-2015 SY. | | |
| **Department Order of Corrective Action:**  See CR 11A for the Department's ordered corrective action. | | |
| **Required Elements of Progress Report(s):**  See CR 11A for reporting requirements, due January 12, 2015. | | |
| **Progress Report Due Date(s):**  01/12/2015 | | |

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

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| **Criterion & Topic:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review determined the following issues with the school's notice to students 16 or over leaving school without a high school diploma: 1) the notice is not sent to the student age 16 or over; 2) the notice does not indicate that the student/parent may request an extension of time for meeting with the school of not longer than 14 days; 3) the notice contains an outdated reference to Chapter 766 (now Chapter 71B). Document review and interviews confirmed that the school has not developed a process to provide annual written notice to former students who have left school, not enrolled elsewhere and not earned their diploma, to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs. | | |
| **Description of Corrective Action:**  The school will develop a process to provide annual written notice to former students who have left school, not enrolled elsewhere and not earned their diploma, to inform them of the availability of publicly funded post-high school academic support programs and to encourage them to participate in those programs.  The school will develop a notice to students 16 or over leaving school without a high school diploma to include: 1) the notice will be sent to the student age 16 or over; 2) the notice will indicate that the student/parent may request an extension of time for meeting with the school of not longer than 14 days, reference Chapter 766 will be updated to reflect the current Chapter 71B. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Jeff Becker Assistant Headmaster  Pauline Lugira, Assistant Headmaster | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A copy of the letter to parents will be available for DESE review. The statement will be added to the revised 2015-2016 Student and Family Handbook. | | |
| **Description of Internal Monitoring Procedures:**  Annual review of attendance policy and required notices. A statement will added to all future Student and Family Handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district's proposed corrective action does not include initial notification to the student.  Please note that this notice should not be included in the handbook, as this action will not relieve the district of its responsibility to send the notice to any student at risk of leaving school after 15 unexcused absences.  The district may publish its process in its handbook, but this is not required. | | |
| **Department Order of Corrective Action:**  Revise the district's described procedure to ensure that both student and parent will be sent the notice after a student has had 15 consecutive unexcused absences. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the district's revised notices and the revised procedures.  By March 13, 2015, submit a list of students/parents that have been mailed the initial notice and a second list of students who have left school without a diploma that were sent the 2nd notice of outreach. | | |
| **Progress Report Due Date(s):**  01/12/2015  03/13/2015 | | |

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

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| **Criterion & Topic:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicated that the school does not annually review with staff the use of restraint to ensure appropriate responses to student behavior that may require immediate intervention within the first month of each school year and, for employees hired after the school year begins, within a month of their employment. | | |
| **Description of Corrective Action:**  The faculty was presented with a review of the Boston Public Schools district restraint policy. All staff hired after the 10/03/2014 will receive the policy per the Superintendent's Circular to review | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Jeff Becker, Assistant Headmaster | | **Expected Date of Completion:**  10/03/2014 |
| **Evidence of Completion of the Corrective Action:**  Staff signed an acknowledgement on file in the Assistant Headmaster's office. All staff hired after the 10/03/2014 will review and sign off on the policy. The policy will be presented annually at the school wide professional development. | | |
| **Description of Internal Monitoring Procedures:**  A checklist of all staff shall be kept in the Assistant Headmaster's office along with all signed acknowledgements. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Please note that the Superintendent's Circular does not include detail on the following required areas:  a) Interventions that may preclude the need for restraint, including de-escalation of problematic behaviors;  b) Specific types of restraints that may be used by non-certified staff (guiding, etc);  c) the administration of physical restraint in accordance with known medical or psychological limitations and/or behavioral intervention plans applicable to an individual student; and  d) identification of program staff who have received in-depth training pursuant to 603 CMR 46.03(3) in the use of physical restraint.  Please note that BPS holds training sessions in addition to publication of the Circular, which covers the addition information identified above. The district may be able to send its staff to one or more of the BPS sessions in lieu of developing its own. | | |
| **Department Order of Corrective Action:**  Develop a means by which the district will supplement its staff training to include items (a)-(d), which are not covered by the BPS Superintendent's Circular. | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the district's proposed method to supplement the BPS Superintendent's Circular to include the additional items identified.  By March 13, 2015, submit the list of staff signatures documenting both trainings. Identify any staff hired after September 2014. | | |
| **Progress Report Due Date(s):**  01/12/2015  03/13/2015 | | |

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

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| **Criterion & Topic:**  CR 24 Curriculum review | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review demonstrated that, although the school actively engages in curriculum review, the process does not specifically address how individual teachers review educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | |
| **Description of Corrective Action:**  The Grade level team facilitators will be instructed to include in the curriculum review a process to specifically review educational materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | |
| **Title/Role(s) of Responsible Persons:**  Matt Holzer, Headmaster  Pauline Lugira, Assistant Headmaster  Jeff Becker, Assistant Headmaster | | **Expected Date of Completion:**  09/01/2015 |
| **Evidence of Completion of the Corrective Action:**  A curriculum review checklist will be develop for the curriculum review process. | | |
| **Description of Internal Monitoring Procedures:**  The checklist will be completed annually and filed with other evidence of curriculum review. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 11/03/2014  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By January 12, 2015, submit the curriculum review checklist and evidence of staff training, including agenda, signed attendance sheets, and other examples of training materials.  By January 12, 2015, if available, provide a completed curriculum review checklist. | | |
| **Progress Report Due Date(s):**  01/12/2015 | | |

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

Charter School: Boston Green Academy

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Boston Green Academy/ Mr. J. Becker & Ms. M Lefkowitz

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 26, 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 records and document review indicated that the school does not consistently provide annual written notice of student English language proficiency to parents.* | | | |
| **Narrative Description of Corrective Action:** To correct this action we have contacted all our ELL parents and sent home Spring 2014 Access results as well as a letter explaining these results. Letters were sent home in students’ native language and all ELL parents were encouraged to contact the school with any additional questions. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** LATF& ESL Teacher | | **Expected Date of Completion for Each Corrective Action Activity:** 11/17/14 | |
| **Evidence of Completion of the Corrective Action:** We have copies of all the letters that were sent home to families. | | | |
| **Description of Internal Monitoring Procedures:** Ongoing review of ELL folders and mailings conducted by administrative staff to ensure compliance with this standard. Necessary updates communicated to staff. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 10 Parent Notification | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval: Not Applicable** | | | |
| **Department Order of Corrective Action: Not Applicable** | | | |
| **Required Elements of Progress Report(s):**  **By March 13, 2015,** submit the revised annual notice used with the Spring 2014 Access results and the letter explaining these results.  **By March 13, 2015**, submit a description of the procedures established to ensure that notice is sent annually to parents subsequent to their students’ identification and continuation as ELLs.  Conduct an internal review of records for 10 ELE students following the implementation of all corrective actions. Report the number of records containing the annual notice. If any non- compliance is identified, provide a root cause analysis and the district’s plan to remedy it by **May 11, 2015.**  **\*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s).** | | | |
| **Progress Report Due Date(s): March 13, 2015; May 11, 2015** | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** ELE 18 Records of ELL Students | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Record review demonstrated that the following documents are consistently not documented in student records: home language surveys; information about students’ previous school experiences; copies of parent notification letters; and progress reports and report cards in the native language, if applicable.* | | | |
| **Narrative Description of Corrective Action:** We have contacted the previous schools for all our incoming students and asked them to mail us any student records they have on file. In addition, parent letters have been sent home to all families and a copy of that letter has been placed in all student files. We are currently working with the Boston Public Schools to ensure that our next round of report cards will all be translated into the students’ native language. Additional information such as home language, home language surveys and information about previous schooling is available on the BPS Data Website. This data will be printed and added to student files. BGA will work with the District to encourage the availability of report card translation into additional native languages. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** ESL Teacher/ LATF | | **Expected Date of Completion for Each Corrective Action Activity:** November 18 2015 | |
| **Evidence of Completion of the Corrective Action:** Email showing contact with incoming students previous schools. Copies of letters sent to families in all student files. Contact made to BPS to provide us with assistance in translating report cards. | | | |
| **Description of Internal Monitoring Procedures:** Communications will be made with District personnel to encourage the translation of BPS report cards into native languages of our students/families. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** ELE 18 Records of ELL Students | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** Although the district proposes to contact previous schools for all incoming students requesting student records, sending parent letters while maintaining a copy in student files, as well as translation of report cards and printing copies of home language, home language surveys, and previous schooling; the district does not address progress reports specific to ELL program nor a procedure or tracking system for maintaining compliance with this criteria. | | | |
| **Department Order of Corrective Action:** Please ensure that the district maintains progress reports on attaining fluency in English, translated in families’ native language as applicable. Please note the district can use the Department’s Program Folder Checklist, available at <http://www.doe.mass.edu/ell/resources.html> to ensure all required elements are documented in ELL student records. | | | |
| **Required Elements of Progress Report(s):**  **By March 13, 2015,** submit the revised program folder checklist and a description of the procedures that have been established to ensure that student files contain all required elements.  Conduct an internal review of records for 10 ELE students enrolled following the implementation of all corrective actions. Report the number of records containing home language surveys; information about students’ previous school experiences; copies of parent notification letters; and progress reports and report cards in the native language, if applicable. If any non- compliance is identified, provide a root cause analysis and the district’s plan to remedy it by **May 11, 2015.**  **\*Please note that when 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 record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s).** | | | |
| **Progress Report Due Date(s): March 13, 2015; May 11, 2015** | | | |