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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: Nashoba

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 11/21/2014.

**Mandatory One-Year Compliance Date:** **11/20/2015**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 3A | Special requirements for students on the autism spectrum | 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 55 | Special education facilities and classrooms | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 7C | Early release of high school seniors | Partially Implemented |
| CR 8 | Accessibility of extracurricular activities | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 11A | Designation of coordinator(s); grievance procedures | Partially Implemented |
| CR 13 | Availability of information and academic counseling on general curricular and occupational/vocational opportunities | 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 18 | Responsibilities of the school principal | Partially Implemented |
| CR 18A | School district employment practices | Partially Implemented |
| CR 23 | Comparability of facilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |
| CR 26A | Confidentiality and student records | Partially Implemented |

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

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| **Criterion & Topic:** SE 3A Special requirements for students on the autism spectrum | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents, student records and staff interviews revealed that whenever an evaluation indicates that a child has a disability on the autism spectrum, the IEP Team does not always consider and specifically address the following areas of need: 1) the verbal and nonverbal communication needs of the child; 2) the need to develop social interaction skills and proficiencies; 3) the needs resulting from the child's unusual responses to sensory experiences; 4) the needs resulting from resistance to environmental change or change in daily routines; 5) the needs resulting from engagement in repetitive activities and stereotyped movements; 6) the need for any positive behavioral interventions, strategies, and supports to address any behavioral difficulties resulting from autism spectrum disorder; and 7) other needs resulting from the child's disability that impact progress in the general curriculum, including social and emotional development. |
| **Description of Corrective Action:** 1) Inform all special education professionals of the findings for SE3A.2) Disseminate Technical Assistance Advisory SPED 2007-1 to all special education professionals.3) Train Team Chairpersons on effective implementation of requirement. |
| **Title/Role(s) of Responsible Persons:**Tracy Conte/ Director of Special Education, Team Chairpersons | **Expected Date of Completion:**05/01/2015 |
| **Evidence of Completion of the Corrective Action:**1) Copies of emails to staff with findings and advisory included.2) Copies of training materials for Team Chairs outlining district practice.3) Copies of signed agenda/attendance sheets. |
| **Description of Internal Monitoring Procedures:** Record review to include 2 preschool, 2 elementary, 2 middle school, and 2 high school records of students whose identified disability is Autism to insure the N1 documents discussion of all 7 areas of need. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 3A Special requirements for students on the autism spectrum | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Prior to developing the district's corrective actions, review the Department's guidance on IEP development for students identified with Autism Spectrum Disorder (ASD) http://www.doe.mass.edu/sped/advisories/07\_1ta.html. By March 31, 2015, submit the district's revised procedures based on this guidance to ensure that IEP Teams appropriately develop IEPs for students identified with ASD, along with evidence of special education staff training. This documentation will include the revised procedures, signed attendance sheets with name and role of staff member, agendas with name and role of presenter, and examples of training materials. By June 19, 2015, conduct an internal review of a sample of records for ASD students across all levels with IEP development conducted following the implementation of all corrective actions. Provide a detailed summary of this internal review, including the number of records reviewed and the number where IEP Teams considered and specifically addressed the special requirements for ASD students’ needs. If non-compliance is identified, report the specific actions taken to correct each individual student record, identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it. \*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):** 03/31/201506/19/2015 |

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| **Criterion & Topic:** SE 18A IEP development and content | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and staff interviews revealed that the district is not always completing the IEP using the most current IEP format provided by the Department of Elementary and Secondary Education in that Present Levels of Educational Performance -Other Educational Needs(PLEP B) in such areas as Assistive Technology, Communication, and Behavior are left blank when students are identified as having such needs. In addition, when a student is identified with a disability on the autism spectrum, the IEP Team does not always consider and specifically address the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing. |
| **Description of Corrective Action:** 1) Inform all special education professionals of the findings for SE18A.2) Disseminate Technical Assistance Advisory SPED 2011-2 to all special education professionals.3) Train Team Chairpersons on effective implementation of requirement. |
| **Title/Role(s) of Responsible Persons:**Tracy Conte/Director of Special Education, Team Chairpersons | **Expected Date of Completion:**05/01/2015 |
| **Evidence of Completion of the Corrective Action:**1) Copies of emails to staff with findings and advisory included.2) Copies of training materials for Team Chairs outlining district practice.3) Copies of signed agenda/attendance sheets. |
| **Description of Internal Monitoring Procedures:** Record review to include 2 preschool, 2 elementary, 2 middle school, and 2 high school records of students whose identified disability is Autism to insure that the N1 documents the bullying discussion and that PLEB B has been completed in accordance with the students' needs. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18A IEP development and content | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By March 31, 2015, submit evidence of staff training on new procedures to ensure that at the IEP meeting, the Team is using the most current IEP format provided by the Department of Elementary and Secondary Education and completing (PLEP B) for students, as appropriate. The training must also include procedures to address students identified with a disability on the autism spectrum, and how the IEP Team considers and specifically addresses the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing and how the team documents it on the IEP. Include memos, a training agenda, attendance sheets with signed names and roles and copies of the materials presented. By June 19, 2015, subsequent to the training, please conduct a review of student records. Select a sample of student records from all levels, with the most recent IEP activity, including ASD records. Indicate the number of records reviewed and the number found compliant. For any noncompliance, report the specific actions taken to correct each individual student record, identifying and reporting the root cause(s) of the ongoing non-compliance and a plans to remedy it. \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to ESE 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):** 03/31/201506/19/2015 |

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| **Criterion & Topic:** SE 18B Determination of placement; provision of IEP to parent | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records and staff interviews indicated that although parents receive summary notes and the service delivery grid at the conclusion of the Team meeting, the district does not provide the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice. When the district issues the IEP to the parent, only one copy is provided along with two signature pages. |
| **Description of Corrective Action:** 1) Inform Team Chairs and Administrative Assistant of findings on SE18B2) Train Team Chairs and Administrative Assistant on effective implementation of requirement. |
| **Title/Role(s) of Responsible Persons:**Tracy Conte/Dir. of Special Ed., Special Ed. Administrative Assistant, Team Chairpersons | **Expected Date of Completion:**05/01/2015 |
| **Evidence of Completion of the Corrective Action:**Copies of emails to Team Chairs and Administrative Assistant with findings and clarification of requirement. |
| **Description of Internal Monitoring Procedures:** Record review to include 2 preschool, 2 elementary, 2 middle school, and 2 high school records of students to insure that the N1 documents the inclusion of 2 copies of the IEP. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By March 31, 2015, submit a narrative description of the updated revised procedures related to providing parents with two (2) complete copies of the proposed IEP and proposed placement along with the required notice. Also submit the description of the internal oversight and tracking system and identify the person(s) responsible for the oversight, including the date of the system's implementation. By June 19, 2015, submit the results of an internal review of a sample of student records at all buildings (2 per level) conducted after the implementation of all corrective actions to ensure consistency and continued compliance for provision of two (2) complete copies of the IEP to parents. Indicate the number of records reviewed, the number found compliant, an explanation of the root cause(s) of any continued noncompliance and a description of additional corrective actions taken by the district to remedy any identified noncompliance with this criterion. \*Please note that when monitoring the district must maintain the following documentation and make it available to ESE 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 signature(s). |
| **Progress Report Due Date(s):** 03/31/201506/19/2015 |

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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:** A review of student records and staff interviews indicated that the district does not always complete all elements of the Notice of Proposed School District Action (N1) form, e.g. responses as to options rejected and why rejected and other factors that were relevant to the school district's decision. |
| **Description of Corrective Action:** 1) Inform Team Chairs and Administrative Assistant of findings on SE24.2) Train Team Chairs on effective and thorough implementation of requirement. |
| **Title/Role(s) of Responsible Persons:**Tracy Conte/Director of Special Education, Team Chairpersons | **Expected Date of Completion:**05/01/2015 |
| **Evidence of Completion of the Corrective Action:**1) Copies of emails to staff with findings.2) Copies of training materials for Team Chairs outlining district practice.3) Copies of signed agenda/attendance sheets. |
| **Description of Internal Monitoring Procedures:** Record review to include 2 preschool, 2 elementary, 2 middle school, and 2 high school records of students to insure that the N1 documents all required elements. |
| 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:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By March 31, 2015, submit evidence of staff training on the requirements for completion of the Notice of Proposed School District Action (N1) form, e.g. responses as to options rejected and why rejected and other factors that were relevant to the school district's decision. Include the agenda, training date, sign-in sheets indicating the title/role of staff, and the name/title of the presenter. By June 19, 2015, submit a report of the results of an administrative internal review of records (2 per level) in which (N1) notices were developed subsequent to implementation of all corrective actions. Include the number of records reviewed, the number of records in compliance; for any records not in compliance, determine the root cause of the non-compliance and the district's plan to remedy the non-compliance. \*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):** 03/31/201506/19/2015 |

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| **Criterion & Topic:** SE 55 Special education facilities and classrooms | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Onsite observation and staff interviews revealed that at Nashoba Regional High School, speech and language services are provided in an office located within the library. This room has large glass walls so that the student receiving specialized services can be observed while other students are in the library, thus creating visual distraction and stigmatization. Onsite observation and staff interviews revealed that at the Emerson Wing of the Florence Sawyer School, the space allocated for speech and language services is located in the speech pathologist's office within the preschool classroom. Service is provided to 3rd and 4th graders who must pass through the preschool room thus creating stigmatization to such students. |
| **Description of Corrective Action:** 1) Inform impacted staff and administrators of findings for SE55.2) Develop an alternative which addresses the space concerns cited in the CPR. |
| **Title/Role(s) of Responsible Persons:**Tracy Conte/Director of Special Education, Florence Sawyer School Principal, NRHS Principal | **Expected Date of Completion:**05/01/2015 |
| **Evidence of Completion of the Corrective Action:**Letters of Assurance from the building principals documenting changes. |
| **Description of Internal Monitoring Procedures:** Visit impacted spaces to confirm that appropriate changes have been made. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By March 31, 2015, submit to ESE a narrative of the plan to remedy the special education instructional classroom noncompliance at the Nashoba Regional High School and Florence Sawyer School. By August 31, 2015, submit the Superintendent's and principals' letters of assurance along with floor plans to demonstrate completion of corrective action. ESE will schedule with the district and conduct an onsite visit to verify compliance. |
| **Progress Report Due Date(s):** 03/31/201508/31/2015 |

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| **Criterion & Topic:** CR 3 Access to a full range of education programs | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews revealed that "gender identity" as a protected category was not included regarding student access to a full range of educational programs. |
| **Description of Corrective Action:** All related policies, handbooks and notices will be amended to include "gender identity". All policies will be brought to the School Committee's policy subcommittee for review and then to the full committee for adoption. Our website, notices, documents and handbooks will be updated to reflect the addition |
| **Title/Role(s) of Responsible Persons:**Monica Visco, Director of HRAll Building PrincipalsGuidance at the HSSchool Committee | **Expected Date of Completion:**07/01/2015 |
| **Evidence of Completion of the Corrective Action:**Policy subcommittee will report to the full School Committee. The meeting is public. After the second reading, the adoption will be placed on the website. All policies will be updated. All school handbooks will be updated. All notices will be updated |
| **Description of Internal Monitoring Procedures:** The HR director will collect all student handbooks, will reissue all notices, will ensure that documents are updated. These are reviewed annually as a matter of practice |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By June 19, 2015, provide to ESE the agenda, meeting minutes and a copy of the updated School Committee Policy for the addition of "gender identity" as a protected category regarding student access to a full range of educational programs. By August 31, 2015, submit evidence of dissemination to the school community on the updated School Committee Policy regarding the added protected category of "gender identity" regarding student access to a full range of educational programs. Include samples of documents and copies of the materials presented. |
| **Progress Report Due Date(s):** 06/19/201508/31/2015 |

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| **Criterion & Topic:** CR 7C Early release of high school seniors | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews revealed that high school seniors are dismissed more than 12 days before the regularly scheduled closing date of that school year. |
| **Description of Corrective Action:** The current school calendar is being updated so that seniors are not dismissed more than 12 school days before the regular scheduled closing of the school |
| **Title/Role(s) of Responsible Persons:**Monica Visco, Director of HRDr. Parry Graham, Principal NRHSMichael Wood, Superintendent | **Expected Date of Completion:**05/01/2015 |
| **Evidence of Completion of the Corrective Action:**Dr. Graham is required to review the calendar for seniors with the Superintendent and the HR Director. The Calendar Committee, in their work on the 2015 2016 calendar were also made aware of this requirement. The number of days for seniors is being tracked. |
| **Description of Internal Monitoring Procedures:** The Superintendent and the Principal meet weekly. This is one of the regularly reviewed items. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 7C Early release of high school seniors | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By August 31, 2015, provide a copy of the 2015-2016 school year calendar demonstrating that high school seniors are not dismissed more than 12 days before the regularly scheduled closing date of that school year. |
| **Progress Report Due Date(s):** 08/31/2015 |

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| **Criterion & Topic:** CR 8 Accessibility of extracurricular activities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews regarding accessibility of extracurricular activities revealed that "gender identity" as a protected category was not included. |
| **Description of Corrective Action:** All related policies, handbooks and notices will be amended to include "gender identity". The policy and handbook language regarding Extra-Curricular activities will be brought to the School Committee's policy subcommittee for review and then to the full committee for adoption. Our website, notices, documents and handbooks will be updated to reflect the addition |
| **Title/Role(s) of Responsible Persons:**Monica Visco, Director of HRAll Building PrincipalsGuidance at the HS | **Expected Date of Completion:**07/01/2015 |
| **Evidence of Completion of the Corrective Action:**Policy subcommittee will report to the full School Committee. The meeting is public. After the second reading, the adoption will be placed on the website. All policies will be updated. All school handbooks as well as the Athletic handbook will be updated. All notices will be updated |
| **Description of Internal Monitoring Procedures:** The HR director will collect all student handbooks, will reissue all notices, will ensure that documents are updated. These are reviewed annually as a matter of practice |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 8 Accessibility of extracurricular activities | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By June 19, 2015, provide the agenda, meeting minutes and a copy of the updated School Committee Policy changes for the addition of the protected category of "gender identity" regarding accessibility of extracurricular activities. By August 31, 2015, submit to ESE evidence of dissemination to the school community regarding accessibility of extracurricular activities with the added category of "gender identity" including sample of documents and copies of the materials. |
| **Progress Report Due Date(s):** 06/19/201508/31/2015 |

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| **Criterion & Topic:** CR 10A Student handbooks and codes of conduct | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district meets all requirements related to its nondiscrimination policy, procedures for accepting, investigating and resolving complaints, and disciplinary measures that the district will impose, but does not cite M.G.L. c. 76, s. 5, as required, in its student handbooks and codes of conduct. |
| **Description of Corrective Action:** M.G.L., c.76, s.5 will be cited in our annual staff civil rights review, will be added to handbooks and all related policies |
| **Title/Role(s) of Responsible Persons:**Monica Visco, HR DirectorAll Principals | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**The specific law will be cited as evidence in all related policies and handbooks |
| **Description of Internal Monitoring Procedures:** This will be monitored annually by the HR Director. She creates the annual staff review. In addition, all handbooks will be reviewed. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By June 19, 2015, submit to ESE copies of the relevant sections of the updated 2015-2016 student handbook and code of conduct which cite M.G.L. c. 76, s. 5, as required. |
| **Progress Report Due Date(s):** 06/19/201508/31/2015 |

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| **Criterion & Topic:** CR 11A Designation of coordinator(s); grievance procedures | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that "gender identity" is not listed as a protected category in the district's discrimination grievance procedures for students and employees. |
| **Description of Corrective Action:** All related policies that include the grievance procedure, handbooks and notices will be amended to include "gender identity". These policies will be brought to the School Committee's policy subcommittee for review and then to the full committee for adoption. Our website, notices, documents and handbooks will be updated to reflect the addition |
| **Title/Role(s) of Responsible Persons:**Monica Visco, HR DirectorPrincipals | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**Policy subcommittee will report to the full School Committee. The meeting is public. After the second reading, the adoption will be placed on the website. All policies will be updated. All school handbooks will be updated. All notices will be updated |
| **Description of Internal Monitoring Procedures:** The HR director will collect all student handbooks, will reissue all notices, will ensure that documents are updated. These are reviewed annually as a matter of practice |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 11A Designation of coordinator(s); grievance procedures | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By June 19, 2015, provide to ESE the agenda, meeting minutes and a copy of the updated School Committee Policy regarding the addition of "gender identity" as a protected category in the district's discrimination grievance procedures for students and employees. By August 31, 2015, submit evidence of dissemination to the school community and training for staff regarding the district's discrimination grievance procedures for students and employees with the added category of "gender identity" including a training agenda, attendance sheet, sample of documents and copies of the materials. |
| **Progress Report Due Date(s):** 06/19/201508/31/2015 |

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| **Criterion & Topic:** CR 13 Availability of information and academic counseling on general curricular and occupational/vocational opportunities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that "gender identity" as a protected category was not included regarding the availability of information and academic counseling on general curricular and occupational/vocational opportunities. |
| **Description of Corrective Action:** All HS and MS handbooks and guidance documents related to this topic will be updated to include "gender identity" as a protected category. |
| **Title/Role(s) of Responsible Persons:**Monica Visco, HR DirectorJodi Specht, Guidance Dept ChairParry Graham, Principal | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**The HR Director will review handbooks and documents related to this topic before they are released to students and staff for the upcoming academic year. |
| **Description of Internal Monitoring Procedures:** It will be required to pass these handbooks and documents by the HR Director prior to publication. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 13 Availability of information and academic counseling on general curricular and occupational/vocational opportunities | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By June 19, 2015, please provide to ESE the agenda, meeting minutes and copy of the updated School Committee Policy for the addition of the protected category of "gender identity" regarding the availability of information and academic counseling on general curricular and occupational/vocational opportunities. By August 31, 2015, submit evidence of dissemination to the school community and training for staff regarding the availability of information and academic counseling on general curricular and occupational/vocational opportunities with the added category of "gender identity". |
| **Progress Report Due Date(s):** 06/19/201508/31/2015 |

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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:** A review of documents and staff interviews indicated that when the district provides annual written notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion, the notice does not encourage students to return to school and does not outline educational options. |
| **Description of Corrective Action:** The annual written notice to students 16 and over leaving school will include language encouraging them to return to school and will outline educational options. |
| **Title/Role(s) of Responsible Persons:**Monica Visco; Director of HRJodi Specht, Guidance Dept ChairParry Graham, Principal | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**The HR Director will work closely with the Guidance Department Chair and the HS Principal to be sure that this notice is amended and distributed to all guidance staff for use moving forward. |
| **Description of Internal Monitoring Procedures:** The HR Director will work with the HS Principal to ensure the review of this document annually |
| 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:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By March 31, 2015, submit to ESE the revised notice sent to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion demonstrating that the notice now encourages students to return to school and does outline educational options. Include meeting agenda and sign in sheets where the process for sending these letters was reviewed by the Principal and school counselors. By August 31, 2015, subsequent to implementation of all corrective actions, submit any sample copies of the notices sent to students 16 or over who have left school without a high school diploma, certificate of attainment, or certificate of completion since corrective action. |
| **Progress Report Due Date(s):** 03/31/201508/31/2015 |

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| **Criterion & Topic:** CR 18 Responsibilities of the school principal | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews revealed a strong Response to Intervention (RTI) process in the district that has reduced referrals to special education. However, a review of student records revealed that instructional support including remedial instruction for students, consultative services for teachers, reading instruction at the elementary level, appropriate services for linguistic minority students, or other services are not documented and placed in the student record. |
| **Description of Corrective Action:** The RTI process will be amended to include the process of documenting and placing remedial supports into the student record. |
| **Title/Role(s) of Responsible Persons:**Monica Visco, Director of HRSuperintendent WoodPrincipals and Asst Principals | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**This will be reviewed at staff meetings, at administrative leadership team meetings and at the summer "retreat" for administrators. All team chairs will be included in the dissemination of this information. |
| **Description of Internal Monitoring Procedures:** Student file review by the Principals will ensure the inclusion of the documentation of these services in the students file |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):**By March 31, 2015, submit evidence to ESE of staff training on the requirement of documenting and placing in the student record applicable RTI instructional support(s) including remedial instruction for students, consultative services for teachers, reading instruction at the elementary level, appropriate services for linguistic minority students, or other services. Include a training agenda, attendance sheet with name(s)/role(s) and copies of the materials presented and person(s) responsible for oversight. Subsequent to trainings and completion of all corrective actions, conduct an internal review of a sample of student records across all levels to ensure that forms and paperwork related to RTI are filed in the cumulative files. Indicate the number of records reviewed at each 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 remedy any identified noncompliance. Please submit this to ESE by August 31, 2015. |
| **Progress Report Due Date(s):** 03/31/201506/19/201508/31/201510/23/2015 |

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

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| **Criterion & Topic:** CR 18A School district employment practices | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews revealed that "gender identity" is not included as a protected class in the school district employment practices. |
| **Description of Corrective Action:** The HR Director will include "gender identity" as a protected class in all recruitment related documents and notices. |
| **Title/Role(s) of Responsible Persons:**Monica Visco, HR Director | **Expected Date of Completion:**05/01/2015 |
| **Evidence of Completion of the Corrective Action:**Will be able to produce postings, applications, EEO notices that include "gender identity" |
| **Description of Internal Monitoring Procedures:** This can only be amended by the HR director. Constant monitoring and consistent implementation is ensured as a result. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 18A School district employment practices | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By June 19, 2015, submit to ESE the agenda, meeting minutes and a copy of the updated School Committee Policy now including "gender identity" as a protected class in school district employment practices. By August 31, 2015, provide dissemination evidence along with samples of district postings, job applications, EEO notices that now include the protected class of "gender identity" in school district employment practices. |
| **Progress Report Due Date(s):** 06/19/2015 |

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

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| **Criterion & Topic:** CR 23 Comparability of facilities | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Onsite observation and staff interviews revealed that at Nashoba Regional High School, ELE services are provided in an office located within the library. This room has large glass walls so that the students receiving specialized services can be observed while other students are in the library, thus creating visual distraction and stigmatization. |
| **Description of Corrective Action:** Shades will be added to the windows of the room in the library where ELL services are given. Exterior signage will be removed in order to make the setting more private and nondescript. |
| **Title/Role(s) of Responsible Persons:**Monica Visco; HR DirectorParry Graham, HS PrincipalMonica Flores, ELL Coord | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**Pictures will be submitted of the room |
| **Description of Internal Monitoring Procedures:** Monica Flores, ELL Coordinator, will work with the HR Director to maintain this standard across the district |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 23 Comparability of facilities | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By August 31, 2015, submit the Superintendent's and Principal's letters of assurance with photos to demonstrate completion of corrective action to eliminate visual distraction and stigmatization for ELE services at Nashoba Regional High School. ESE will schedule with the district and conduct an onsite visit to verify compliance. |
| **Progress Report Due Date(s):** 08/31/2015 |

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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:** A review of documents and staff interviews demonstrated that there is no formal process to ensure that individual teachers in the district review all 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:** A process for the annual review of educational materials to meet this criteria will be drafted and implemented within the office of Teaching and Learning. Teachers will be instructed to use the process during any curriculum review. The process will be formalized and implemented. |
| **Title/Role(s) of Responsible Persons:**Monica Visco, Director of HRSuperintendent WoodTeaching and Learning Curriculum Coordinators | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**The process will be posted on the Teaching and Learning website under "teacher resources" and will be utilized during any curriculum review. |
| **Description of Internal Monitoring Procedures:** The Superintendent will ensure, through direct supervision of the District's Teaching and Learning Department that this is ongoing and active. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By June 19, 2015, submit evidence of training of new procedures implemented for individual teachers ensuring review of educational materials for simplistic and demeaning generalizations on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation that includes training agenda, attendance sheet and copies of the materials presented, and name of presenter, person(s) responsible. |
| **Progress Report Due Date(s):** 06/19/201508/31/201510/23/2015 |

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

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| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Not Implemented |
| **Department CPR Findings:** A review of documents and staff interviews demonstrated that there is no formal process for the district to evaluate all aspects of its K-12 program annually to ensure that all students, regardless of race, color, sex, gender identity, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities. |
| **Description of Corrective Action:** A checklist will be created and disseminated to all buildings to use in review of MCAS data, DCAP (how these impact what goes on in the district) and all programs to ensure that our self-evaluation focuses on nondiscrimination of all protected classes |
| **Title/Role(s) of Responsible Persons:**PrincipalsSuperintendentHR Director | **Expected Date of Completion:**06/01/2015 |
| **Evidence of Completion of the Corrective Action:**The checklist will be produced, as will staff meeting agendas and documents used by the district to ensure programming is equitable and evaluated for discriminatory practices. |
| **Description of Internal Monitoring Procedures:** This will be part of the Administrative Leadership Team's goals and will become practice across the district |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By August 31, 2015, submit a narrative of the newly developed district institutional self-evaluation process along with the name(s)/role(s) of the person(s) responsible for ensuring that all aspects of the district's K-12 programs are evaluated on an annual basis for equal access for all students to all programs including athletics and other extracurricular activities. Include in the submission materials and surveys (including the checklist), meeting dates, results reached on the basis of the institutional self-evaluation, and any goals/benchmarks to resolve any identified issues. |
| **Progress Report Due Date(s):** 08/31/2015 |

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

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| **Criterion & Topic:** CR 26A Confidentiality and student records | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that the district does not always provide a log of access in student records thus creating a lack of protection of confidentiality. |
| **Description of Corrective Action:** An access log indicating date, name, student, reason for access will be placed in student records. Access will be required to be documented. |
| **Title/Role(s) of Responsible Persons:**PrincipalsSecretariesHR Director | **Expected Date of Completion:**07/01/2015 |
| **Evidence of Completion of the Corrective Action:**This will be discussed at staff meetings and Administrative Leadership Team meetings. Agendas, as well as checklist will be provided |
| **Description of Internal Monitoring Procedures:** Principals will be required to maintain this practice in their buildings. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 26A Confidentiality and student records | **Corrective Action Plan Status:** Approved **Status Date:** 02/12/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By March 31, 2015 submit evidence of training/dissemination for appropriate staff on the district's newly developed process for ensuring confidentiality and use of logs of access to student records that includes an agenda, training materials, and signed attendance sheets with names/roles and presenter. By August 31, 2015 submit results after the implementation of all corrective actions of an administrative review of a sample of student records across all grade levels to ensure that logs of access are employed for the sign in/out of all hard copy student files. Please include number of student records reviewed; the number of records in compliance; for any identified continuing noncompliance determine the root cause of the non-compliance and the charter's plan to remedy the non-compliance. \*Please note that 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, grade level and age for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their role(s), and their signature(s). |
| **Progress Report Due Date(s):** 03/31/201506/19/201508/31/201510/23/2015 |

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

District: Nashoba Regional School District

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Monica P. Flores, Ed.D.

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: February 10, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 5 Program Placement and Structure**  | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Although “ SEI Description Form” submitted by the district indicates that the district provides ELLs with direct ESL instruction as described in Department guidelines ESL teacher schedule does not confirm that ESL instruction ELLs receive are sufficient at all levels of English proficiency. 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).*The district has a Newcomer ESL curriculum for ESL instruction provided to ELLs at low levels of English proficiency. However, there is no evidence showing that the district has an ESL curriculum used to provide ESL instruction to ELLs at upper proficiency levels. See the Department’s WIDA ELD Standards update from at* [*http://www.doe.mass.edu/ell/wida.html*](http://www.doe.mass.edu/ell/wida.html) *).*  |
| **Narrative Description of Corrective Action:**    The Nashoba Regional School District is in the process of implementing a full K-12 ESL Curriculum that aligns with both the Common Core Standards and the WIDA standards. The district has already purchased K-12 Brainpop ESL (that aligns with the Common Core curriculum) to compliment this endeavor. In addition, this summer 2015, two ESL certified teachers (Monica Flores and Erin Da Silvaneto) will meet throughout the summer to develop and write a new curriculum that aligns with WIDA and the Common Core curriculum, the final product will include mapping and units (K-12), they will be uploaded to the NRSD’s Rubicon website (we have already uploaded the Newcomer’s curriculum).  |
| **Title/Role of Person(s) Responsible for Implementation:**      Monica P. Flores, ELL Coordinator  | **Expected Date of Completion for Each Corrective Action Activity:**      Jan. 11, 2016 |
| **Evidence of Completion of the Corrective Action:**     The ESL Curriculum will be uploaded to the NRSD’s Rubicon website, and monitoring of its implementation will be on-going. In addition, the bulk of this work will take place during the summer of 2015. Projected completion of this ESL curriculum will take place by January, 2016.  |
| **Description of Internal Monitoring Procedures:**  Supt. Michael Wood, Teaching and Learning Director, Carol Archambault and ELL Coordinator, Monica Flores  |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION****(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 5 Program Placement and Structure** | **Status of Corrective Action:** x Approved ▢ Partially Approved ▢ Disapproved  |
| **Basis for Partial Approval or Disapproval:**  The Department appreciates that the district planned to start working on developing and writing a new curriculum in the summer; however, the district should note that Brainpop ESL or any other purchased material can only be used as resources. They cannot replace the curriculum districts are expected to develop based on WIDA standards. This curriculum will reflect the content to be taught and address the instructional needs of the ELL population at all levels.    |
| **Department Order of Corrective Action:** N/A    |
| **Required Elements of Progress Report(s):**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. |
| **Progress Report Due Date(s):** **November 16, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 6 Program Exit and Readiness** | **Rating: Partially Implemented** |
| **Department CPR Finding:** *According to the district’s exit criteria submitted by the district students may be exempt from meeting exit criteria even if they are not English proficient based on ACCESS for ELLs results and other relevant data when it is determined that they have a learning disability.* *Therefore, there is no indication showing that students with disabilities can participate meaningfully in all aspects of the district’s general education program without the use of adapted or simplified English materials. Current practice of reclassification of ELLs as Former Limited English Proficient (FLEP) in Nashoba Regional School District is not consistent with the 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) *.* |
| **Narrative Description of Corrective Action:** It will be clearly stipulated and shared with ELL staff, that the criteria for exiting any ELL from our English Language Education Program will only occur, after an informed decision has taken place upon the review of student records and conferencing among educators. This process will include: * School-based meetings with ESL, Sheltered Content teachers, Sped - teaching staff members, guidance or any other relevant staff members, these meetings will take place prior to the decision of FLEP reclassification.
* Review of relevant data includes: ACCESS yearly results(students have reached levels 4, 5, or 6), MCAS or PARCC ELA, DIBELS, DDMs results, academic grades/report cards, progress reports and teacher observations and recommendations.

Once students are reclassified they will be monitored for 2 years, with ongoing meetings, conferencing about students’ progress, and completion of a quarterly *“FLEP Monitoring Form”.* |
| **Title/Role of Person(s) Responsible for Implementation:** Monica Flores, ELL Coordinator | **Expected Date of Completion for Each Corrective Action Activity:**       |
| **Evidence of Completion of the Corrective Action:**   FLEP Monitoring forms are placed in the student’s ELL cum folder, Forms are placed in the ELL Staff website.  |
| **Description of Internal Monitoring Procedures:**     ESL Program Evaluation tool, review of documents and meeting attendance.  |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION****(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 6 Program Exit and Readiness**    | **Status of Corrective Action:** x 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 send a roster of the reclassified students by including information regarding their proficiency levels, MCAS test results and their performance in academics. |
| **Progress Report Due Date(s):    November 16, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE10 Parental Notification**  | **Rating: Partially Implemented** |
| **Department CPR Finding:** *A review of student records and staff interviews revealed that when parents indicated on the Home Language Survey that they wished to receive information in their primary language, the district communicated with them in English for such notices as report cards, progress reports, and parent notification letters.* |
| **Narrative Description of Corrective Action:**      Translated versions of the Home Language Survey will also be shared with the parent or care-giver at the time of registration. Translated versions along with instructions will be distributed to secretaries district-wide. The translation of report cards is currently on an *As Needs Basis*, school principals are responsible for translations of these sensitive and important documents. We have parent notification letters and progress reports in Spanish and Portuguese, already in place (the two majorly spoken language, other than English in the school district). Documents will be revisited and updated.  |
| **Title/Role of Person(s) Responsible for Implementation:** Monica Flores, ELL coordinatorSchool Principals  | **Expected Date of Completion for Each Corrective Action Activity:**  March 30th, 2015     |
| **Evidence of Completion of the Corrective Action:**     Documents will be displayed in the ELL Nashoba Staff Website.  |
| **Description of Internal Monitoring Procedures:**      Conference with the Supt. of schools Michael Wood, will lead to communication with the principals in order to secure the translation of these documents (Report Cards) to Spanish and Portuguese.  |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION****(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE10 Parental Notification**     | **Status of Corrective Action:** ▢ Approved x Partially Approved ▢ Disapproved  |
| **Basis for Partial Approval or Disapproval:**  The district currently translates parent notification letters and progress reports in Spanish and Portuguese and report cards are translated on an “*As Needs Basis*”. The district must ensure that when parent(s) indicate that they wish to receive information in their primary language as indicated on the Home Language Survey, the district will provide written communication with them in their primary language for such notices as report cards, progress reports, and parent notification letters.  |
| **Department Order of Corrective Action:**  The district will develop procedures to ensure that when parent(s) indicate that they wish to receive information in their primary language on their Home Language Survey, the district will communicate with them in writing in their primary language for such notices as report cards, progress reports, and parent notification letters.  |
| **Required Elements of Progress Report(s):**Submit to ESE a narrative description of procedures and evidence of training for whenparents indicate on the Home Language Survey that they wish to receive information in their primary language for such notices as report cards, progress reports, and parent notification letters, such translations are being provided (and documented within the ELE student record as to evidence of translations). Include the date of training, agenda, training materials and sign-in sheets with name(s)/role(s) and presenter name/role by **September 8, 2015.**Submit the results of an internal administrative record review after the implementation of all corrective actions of a sample of ELL student records across all schools and grade levels for students whose parents indicated that they wished to receive information in their primary language( as indicated on the Home Language Survey). Ensure that these files contain report cards, progress reports, and parent notification letters **translated into the parent’s primary language**. Include:1) The number of records reviewed; 2) The number of records in compliance; 3) For all records not in compliance, determine the root cause(s) of the non-compliance; and 4) The district’s plan to remedy the non-compliance review by **November 16, 2015.****\*Please note that 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 level 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):    September 8, 2015;   November 16, 2015.** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 16 Equitable Facilities** | **Rating: Partially Implemented** |
| **Department CPR Finding:** *Observation of facilities and staff interviews indicated that the space designated for English language learners at Nashoba Regional High School is located in an office within the library that ELL students can only access by walking through the library when other classes are also using the space.* |
| **Narrative Description of Corrective Action:**      TThe school principal: Parry Graham and the ELL coordinator, Monica Flores will tour the school to select and secure adequate space for the next school year 2015/2016. The space will be accessible at anytime throughout the school year and will have adequate space for up to 10 students.   |
| **Title/Role of Person(s) Responsible for Implementation:**      N.R.H.S. Principal Dr. Parry Graham  | **Expected Date of Completion for Each Corrective Action Activity:**  8/25/2015     |
| **Evidence of Completion of the Corrective Action:**  Observations and walk-throughs, classroom number and description will be submitted to the Supt. Michael Wood. In addition, the space description and room number will be placed on our ELL School District website.  |
| **Description of Internal Monitoring Procedures:** The ELL coordinator, Monica Flores will visit and report status of the space to the Supt. of Schools Michael Wood.       |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION****(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 16 Equitable Facilities**     | **Status of Corrective Action:** x 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 **September 8, 2015,** submit a letter of assurance from the superintendent and principal, along with a floor plan as to the location of instructional services provided to ELL students at Nashoba Regional High School. **By November 16, 2015** a scheduled onsite visit by the a representative of the Department will verify the classroom relocation in that ELL students are provided instruction in facilities comparable to those provided to the overall student population. |
| **Progress Report Due Date(s):    September 8, 2015;   November 16, 2015.** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 17 Program Evaluation** | **Rating: Not Implemented** |
| **Department CPR Finding:** *A review of documents and staff interviews indicated that the district has not conducted a program evaluation for the English language learner program to evaluate its effectiveness.* |
| **Narrative Description of Corrective Action:**      The writing of our District ELE Program Evaluation for SY 2014-2015, will take place immediately and will be completed and submitted to your office. Information and data will be collected, documented and evaluated.  |
| **Title/Role of Person(s) Responsible for Implementation:**      Monica Flores, ELL Coordinator  | **Expected Date of Completion for Each Corrective Action Activity:**      June 20th, 2015 |
| **Evidence of Completion of the Corrective Action:**      Completion and submission of document. |
| **Description of Internal Monitoring Procedures:**      On going meetings with the ELL staff and observations, lesson plans, walkthroughs, development of an ESL Curriculum, and administration of the ELE NRSD website.  |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION****(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 17 Program Evaluation**     | **Status of Corrective Action:** x 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):** Submit the district’s format that will be used to evaluate the ELE program and effectiveness of its services. An optional form may be accessed at: <http://www.doe.mass.edu/ell/resources.html>. Please provide this to the Department by**September 8, 2015.**Submit the district’s completed ELL Program evaluation including results, goals and benchmarks/timelines of the evaluation conducted by **November 16, 2015.** |
| **Progress Report Due Date(s): September 8, 2015;   November 16, 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:** *A review of student records and staff interviews indicated that the district does not always include a Home Language Survey; results of identification and proficiency tests and evaluations including ACCESS, MCAS or other tests chosen by the Board of Education and the district; information about students’ previous school experiences; copies of parent notification letters, evidence of follow-up monitoring, if applicable; documentation of a parent’s consent to “opt-out” of English Language Learner education, if applicable; and waiver documentation, if applicable within the student record* |
| **Narrative Description of Corrective Action:**      A reminder and updated documents, along with translated copies will be shared with school principals and school secretaries (since they are often the first to interact with incoming parents). Documents will be updated, the parents notification letter includes a clauses regarding “opt-out” and “waiver request” (G.L.c. 71A 5) options.  |
| **Title/Role of Person(s) Responsible for Implementation:**      Monica Flores, ELL Coordinator | **Expected Date of Completion for Each Corrective Action Activity:**     Mar. 31st, 2015 |
| **Evidence of Completion of the Corrective Action:**       Document will be post on the ELL Staff website, document will be shared with school principals and secretaries via email.  |
| **Description of Internal Monitoring Procedures:**      On going communication with staff, principals and school secretaries. Review and update of Cum/ELL folders on an ongoing basis.  |
| **CORRECTIVE ACTION PLAN APPROVAL SECTION****(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 18 Records of LEP Students**       | **Status of Corrective Action:** x Approved ▢ Partially Approved ▢ Disapproved  |
| **Basis for Partial Approval or Disapproval:** Not Applicable    |
| **Department Order of Corrective Action:**      Conduct staff training on the required elements of ELL student files. These items include:1. home language survey;
2. results of identification and proficiency tests and evaluations, including MEPA and MELA-O until SY 2011/2012
3. ACCESS for ELLs test from SY 2012/2013;
4. MCAS, PARCC or other tests chosen by the Board of Education and the district;
5. information about students’ previous school experiences;
6. copies of parent notification letters,
7. progress reports, in the native language, if necessary;
8. report cards, in the native language, if necessary;
9. evidence of follow-up monitoring, if applicable;
10. documentation of a parent’s consent to “opt-out” of ELL education, if applicable;

 waiver documentation, if applicable. 1. waiver documentation, if applicable;
2. individualized learning plan (optional)
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| **Required Elements of Progress Report(s):** Please submit the agenda, training materials and sign-in sheets with name(s)/role(s) for training regarding what documents need to be included in ELL student records to the Department by **September 8, 2015.**Submit the results of an administrative record review of a sample ELL student records across all levels after the implementation of all corrective actions to ensure that these files contain the required documents. Include student school/ grade level/ ELL level; and1) The number of records reviewed;2) The number of records in compliance; 3) For any records not in compliance, determine the root cause(s) of the non-compliance; and 4) The district’s plan to remedy any identified non-compliance review by **November 16, 2015.****\*Please note that 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 level for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature.** |
| **Progress Report Due Date(s):       September 8, 2015;   November 16, 2015.** |