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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: Norfolk County Agricultural

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 04/18/2014.

**Mandatory One-Year Compliance Date:** **04/17/2015**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 9 | Timeline for determination of eligibility and provision of documentation to parent | Partially Implemented |
| SE 13 | Progress Reports and content | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 48 | Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education | Partially Implemented |
| CR 3 | Access to a full range of education programs | Partially Implemented |
| CR 6 | Availability of in-school programs for pregnant students | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |
| CR 21 | Staff training regarding civil rights responsibilities | Partially Implemented |
| CR 25 | Institutional self-evaluation | Not Implemented |

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

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| **Criterion & Topic:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of records indicated that within 45 school working days of receiving a parent's written consent to an initial evaluation or a re-evaluation, the school does not consistently determine whether the student is eligible for special education and provide to the parent either a proposed IEP and proposed placement or a written explanation of the finding of no eligibility. | | |
| **Description of Corrective Action:**  The district has numerous ways to track timelines including an administrative assistant, the school psychologist and the special education software which monitors and tracks timelines. Timelines are always discussed when planning three year re-evaluation meetings. There have been times when due to unforeseen circumstances, (weather, parent cancels) that the meetings must be re-scheduled, and our practice has been to put a note in the file and ask parents to sign a waiver of the 45 day requirement. | | |
| **Title/Role(s) of Responsible Persons:**  Jane Wiggin, Director of Student Services | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  We will do a record review in September of the evaluations that have been done this past year and report on compliance with meeting timelines dates. | | |
| **Description of Internal Monitoring Procedures:**  The special education software will continue to monitor our timelines, and we will print out reports on a regular basis to monitor compliance. The School Psychologist will meet regularly with the Director of Special Education to review timelines to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 9 Timeline for determination of eligibility and provision of documentation to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date**: 06/02/2014 | |
| **Basis for Status Decision:**  The district indicated its procedures for tracking timelines, but did not propose training to inform staff of the 45-day timeline requirements for those staff members who are involved in the evaluation and IEP development processes. | | |
| **Department Order of Corrective Action:**  Provide staff training regarding the timeline requirements for eligibility determination and provision of documentation to parents. | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training, including an agenda, signed attendance sheet and training materials used for training staff on timelines by September 30, 2014.  Subsequent to the training, conduct an internal review of student records to determine compliance with timelines for eligibility determination and provision of documentation to the parents. Submit the results of the internal record review, including the number of student records reviewed; the number of records in compliance; for any records not in compliance, determine the root cause(s) of the non-compliance; and the district's plan to remedy the non-compliance. Submit this information by January 12, 2015.  \*Please note when conducting internal monitoring, the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the 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):**  09/30/2014  01/12/2015 | | |

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

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| **Criterion & Topic:**  SE 13 Progress Reports and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of records indicated that the school is not consistently providing parents with reports on the student's progress towards reaching the goals established in the IEP at least as often as parents are informed of the progress of non-disabled students. | | |
| **Description of Corrective Action:**  The Student Services office maintains a complete list of all progress reports that need to be completed each quarter, as well as who is responsible for completing them. All staff who write progress reports are required to submit them to the Student Services office each quarter by a specific deadline each quarter. The reports are then checked by the Director of Student Services and her administrative assistant, and then are filed in folders. | | |
| **Title/Role(s) of Responsible Persons:**  Jane Wiggin, Director of Student Services | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  A review of records will be done in September of the previous year to be sure that all progress reports were completed and filed. | | |
| **Description of Internal Monitoring Procedures:**  For each reporting period, the Director of Student Services and her assistant will check to be sure that all progress reports are complete and placed in files. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 13 Progress Reports and content | **Corrective Action Plan Status:** Partially Approved  **Status Date**: 06/02/2014 | |
| **Basis for Status Decision:**  The district did not provide information on how staff would be trained on the procedures to ensure parents are provided with reports on the student's progress towards reaching the goals established in the IEP at least as often as parents are informed of the progress of non-disabled students. | | |
| **Department Order of Corrective Action:**  Provide training to staff responsible for writing progress reports on providing progress reports to parents at least as often as parents are informed of the progress of non-disabled students. | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training, including an agenda, signed attendance sheet and training materials used for training staff on the procedures for providing parents with reports on the student's progress towards reaching the goals established in the IEP at least as often as parents are informed of the progress of non-disabled students. Submit this information by September 30, 2014.  Submit a report of the results of an internal review of records, conducted subsequent to the training, to determine whether parents are provided with reports on the student's progress towards reaching the goals established in the IEP at least as often as parents are informed of the progress of non-disabled students. Include the number of student records reviewed; the number of records in compliance; for any records not in compliance, determine the root cause(s) of the non-compliance; and the district's plan to remedy the non-compliance. Submit this information by January 12, 2015.  \*Please note when conducting internal monitoring, the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  09/30/2014  01/12/2015 | | |

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

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of records indicated that the Non-participation Justification statement in the IEP does not consistently indicate why removal of the student from the general education classroom is considered critical to the student's program and the basis for the Team's conclusion that education of the student in a less restrictive environment, with the use of supplementary aids and services, could not be achieved satisfactorily. | | |
| **Description of Corrective Action:**  The Non-participation Justification statements need to be improved to better indicate why the student needs to be removed form the general education classroom. | | |
| **Title/Role(s) of Responsible Persons:**  Jane Wiggin, Director of Student Services | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  Staff meeting notes where training is provided on writing the Non-participation Justification statements. | | |
| **Description of Internal Monitoring Procedures:**  A record review will be completed in the fall to review the statements of IEP's completed after the training. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date**: 06/02/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training, including an agenda, signed attendance sheet and training materials used for training staff on developing appropriate Non-participation Justification statements by September 30, 2014.  Submit a report of the results of an internal review of records conducted subsequent to the training and include the number of student records reviewed; the number of records in compliance with appropriately completed Non-participation Justification statements; for any records not in compliance, determine the root cause(s) of the non-compliance; and the district's plan to remedy the non-compliance. Submit this information by January 12, 2015.  \*Please note when conducting internal monitoring, the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  09/30/2014  01/12/2015 | | |
| COORDINATED PROGRAM REVIEW  **CORRECTIVE ACTION PLAN** | | |

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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:**  Review of records indicated that the information included in the Notice of Proposed School District Action (N1) often lacked specificity and did not consistently contain sufficient detail of the school's actions. Specifically, the school did not always explain why the actions were being proposed and what evaluations were conducted and used for a basis of the proposed actions. Also, the school did not always address rejected options considered or other relevant factors for the school's decisions. This was evident for proposals for evaluations as well as for proposals of IEPs. | | |
| **Description of Corrective Action:**  Statements on the N1 need more clarification and detail relative to each question as well as expanded responses to rejected options and other relevant factors. | | |
| **Title/Role(s) of Responsible Persons:**  Jane Wiggin, Director of Student Services | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  Agenda and meeting notes about training on writing N1 statements. | | |
| **Description of Internal Monitoring Procedures:**  Record review of N1 comments in September of records that were completed after training. | | |
| 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**: 06/02/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit evidence of training, including an agenda, signed attendance sheet and training materials used for training staff on the completion of the Notice of Proposed School District Action (N1) by September 30, 2014.  Submit a report of the results of an internal review of records conducted subsequent to the training and include the number of student records reviewed; the number of records in compliance with appropriately completed N1 forms; for any records not in compliance, determine the root cause(s) of the non-compliance; and the district's plan to remedy the non-compliance. Submit this information by January 12, 2015.  \*Please note when conducting internal monitoring, the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  09/30/2014  01/12/2015 | | |

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| **Criterion & Topic:**  SE 48 Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Interviews indicated that students receiving "pull out" support services for special education do not have equal opportunities to participate in physical education courses offered as part of the general education programming. Students are scheduled for "pull out" support services during the only periods in which physical education courses are offered. | | |
| **Description of Corrective Action:**  Students have been pulled from PE in order to provide them with specialized support due to the split nature of the day and lack of other available time to offer this help. Beginning next year, students will be given access to PE one day per cycle and will take one support class. This will provide them to equal access to participate in physical education courses. | | |
| **Title/Role(s) of Responsible Persons:**  Jane Wiggin, Director of Student Services | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  Student Schedules for the 2014-2015 school year. | | |
| **Description of Internal Monitoring Procedures:**  All special education students' schedules will be reviewed by the Director of Student Services prior to the first day of school to ensure access to Physical Education classes. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 48 Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education | **Corrective Action Plan Status:** Approved  **Status Date**: 06/02/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  For those students receiving specialized pull-out academic support, provide copies of students' weekly schedules for the 2014-2015 school year indicating when students will have physical education and academic support periods. Submit the schedules by September 30, 2014.  Submit a report of the results of an internal review of student records to ensure that special education students have equal opportunities to participate in physical education. Include the following in the internal review, the number of student records reviewed; the number of records in compliance; for any records not in compliance, determine the root cause(s) of the non-compliance; and the district's plan to remedy the non-compliance. Submit this information by January 12, 2015.  \*Please note when conducting internal monitoring, the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their role(s) and signature(s). | | |
| **Progress Report Due Date(s):**  09/30/2014  01/12/2015 | | |

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| **Criterion & Topic:**  CR 3 Access to a full range of education programs | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  See SE 48. | | |
| **Description of Corrective Action:**  Access to a full range of education programs | | |
| **Title/Role(s) of Responsible Persons:**  Principal Tammy Quinn | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  Submitted under SE 48. | | |
| **Description of Internal Monitoring Procedures:**  Submitted under SE 48. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 3 Access to a full range of education programs | **Corrective Action Plan Status:** Approved  **Status Date**: 06/02/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  See SE 48. | | |
| **Progress Report Due Date(s):**  09/30/2014  01/12/2015 | | |

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

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| **Criterion & Topic:**  CR 6 Availability of in-school programs for pregnant students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of documentation and interviews indicated that the school's policy for pregnant students requires physician certification for students to be able to continue in school, but the school does not require such certification for all students with other physical or emotional conditions requiring the attention of a physician. | | |
| **Description of Corrective Action:**  Availability of in-school programs for pregnant students | | |
| **Title/Role(s) of Responsible Persons:**  Principal Tammy Quinn | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The student handbook will be amended to say that any student who can not participate in school because of an emotional or physical reason must have a physician's certification stating such limitations. | | |
| **Description of Internal Monitoring Procedures:**  Principal will submit report | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 6 Availability of in-school programs for pregnant students | **Corrective Action Plan Status:** Approved  **Status Date**: 06/02/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit a copy of the amended student handbook by September 30, 2014. | | |
| **Progress Report Due Date(s):**  09/30/2014 | | |

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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:**  Review of documentation and interviews indicated that the school has not developed and implemented annual staff training on the use of physical restraint consistent with regulatory requirements. In addition, the school does not have staff authorized to serve as school-wide resources for the proper administration of physical restraint. | | |
| **Description of Corrective Action:**  Physical Restraint training | | |
| **Title/Role(s) of Responsible Persons:**  Principal Tammy Quinn | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  Instead of the PowerPoint presentation, staff will participate in physical restraint training at the start of each school year. This training will be given by the Dean of Students who will be sent for Professional Development on this topic and will be certified as a trainer. | | |
| **Description of Internal Monitoring Procedures:**  Report will be submitted including agenda for the training meeting and evidence of attendees. | | |
| 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:** Approved  **Status Date**: 06/02/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit an agenda, signed attendance sheet and training materials used for training staff on requirements of this criterion by September 30, 2014. Include names and titles of staff authorized to serve as school-wide resources for the proper administration of physical restraint. | | |
| **Progress Report Due Date(s):**  09/30/2014 | | |

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

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| **Criterion & Topic:**  CR 21 Staff training regarding civil rights responsibilities | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Review of documentation indicated that the staff training regarding civil rights responsibilities did not include gender identity as a protected category. | | |
| **Description of Corrective Action:**  Gender Identity was missing on PowerPoint presentation. | | |
| **Title/Role(s) of Responsible Persons:**  Principal Tammy Quinn | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  Gender identity will be added in the PowerPoint slide. | | |
| **Description of Internal Monitoring Procedures:**  Principal will submit corrected PowerPoint. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 21 Staff training regarding civil rights responsibilities | **Corrective Action Plan Status:** Approved  **Status Date**: 06/02/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit an agenda, signed attendance sheet and training materials (including a copy of the revised PowerPoint presentation) used for training staff on requirements of this criterion by September 30, 2014. | | |
| **Progress Report Due Date(s):**  09/30/2014 | | |

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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:**  Review of documentation and interviews indicated that the school does not evaluate all aspects of its 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:**  School needs to evaluate programs 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. . | | |
| **Title/Role(s) of Responsible Persons:**  Principal Tammy Quinn | | **Expected Date of Completion:**  09/30/2014 |
| **Evidence of Completion of the Corrective Action:**  The last 2 days of school are Teacher Workshop days. Time will be given to teachers to evaluate and discuss their programs about the above criteria. A discussion will also be held at PACC meetings, School Council, and Student Council. We are working on a survey for the following school year to distribute to parents for evaluation purposes. | | |
| **Description of Internal Monitoring Procedures:**  Agenda and attendance sheets as well as copy of survey when complete will be submitted by the Principal. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved  **Status Date**: 06/02/2014 | |
| **Basis for Status Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Provide a copy of the institutional self-evaluation by September 30, 2014. | | |
| **Progress Report Due Date(s):**  09/30/2014 | | |

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

Charter School or District: Norfolk County Agricultural High School

Corrective Action Plan Forms

Program Area: Career/Vocational Technical Education

Prepared by: Norfolk County Agricultural High School/Suzanne Green

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: April 17, 2015**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 3 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews, review of documentation and review of records indicated that while the district is in the process of determining the best system for competency tracking, at the time of the review there was no system for tracking competencies for students’ safety & health, technical that includes embedded academic, employability, management & entrepreneurship, and technological knowledge and skills. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03(4))* | | | |
| **Narrative Description of Corrective Action:**  NCAHS signed up to be an early adopter for the Edwin Analytics competency tracking system. We are working with Andrea Kupps in the District and School Accountability office, and have participated in three administrative training sessions to date (March, April and May 2014). The administrative team will then be providing training to staff members during the summer (August 2014) and fall (September 2014) on the system. Full compliance and tracking is scheduled to begin September 2014. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Principal | | **Expected Date of Completion for Each Corrective Action Activity:** September 2014 | |
| **Evidence of Completion of the Corrective Action:**   * Emails from Andrea Kupps attesting to our initial sign up for the program. * Subsequent emails from Andrea Kupps attesting to the school’s participation in webinar trainings for the administrative team. * Documentation attesting to the change to the *NCAHS Employee Guide* adding “competency tracking” to the list of teacher assessments instructors are responsible for. Copies of Board of Trustees minutes accepting the change. * Using the alignment of new CVTE frameworks with all courses – staff will identify which competencies need to be measured for each class. Departmental subgroups will work during common planning time to complete this task.This will be documented by the competencies then being identified and entered into the Edwin system. * Training of staff will occur in the summer and fall of 2014 for teachers to allow them to become acquainted with the system. Documentation of the training will include a copy of the agenda of the meeting, training materials and participant attendance sheets. * As part of the educator evaluation process, teachers will have their class rosters in Edwin examined by their immediate supervisor four times a year to ensure that all instructors are competency tracking for their classes. Documentation will include copy of the immediate supervisor’s departmental staff, the dates that the supervisor examined the competency records and any corrective measures that occurred. | | | |
| **Description of Internal Monitoring Procedures:** Vocational Coordinators will review each instructor’s class lists to ensure they are competency tracking as a criterion for teacher evaluations. This will ensure compliance and keep all instructors up to date. This will be done each time report cards are issued – which will be quarterly. Completion of competency tracking will also be an evaluation component for instructors which will be provided oversight by the Principal. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 3 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  **Progress Report #1:** Provide documentation of the school’s participation in webinar trainings for the administrative team (e-mails from Andrea Kupps attesting to initial sign up and subsequent participation in webinar trainings for the administrative team). Provide documentation of the addition of “competency tracking” in the *NCAHS Employee Guide* to the list of teacher assessments for which instructors are responsible. Provide c opies of Board of Trustees minutes accepting the change.All documentation should be submitted to the Department by September 30, 2014.  **Progress Report #2:** Provide documentation thatstaff have identified and documented competencies (using the Edwin system as described in the CAP). Provide documentation of the summer and fall training to acquaint the staff with the system (a copy of the agenda of the meeting, training materials and participant attendance sheets). Provide documentation that the internal monitoring procedure described in the CAP is in place (the dates that the supervisor examined the competency records and any corrective measures that occurred). All documentation should be submitted to the Department by January 12, 2015 | | | |
| **Progress Report Due Date(s):** September 30, 2014 and January 12, 2015 | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 4 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews and review of documentation revealed that the published information on career/vocational technical education programs does not include the approved*  *admission policy or information on articulation agreements that exist at the high school. (Legal Citation : Vocational Technical Education Regulations 603 CMR 4.03(4)(6))* | | | |
| **Narrative Description of Corrective Action:** TheAdmissions Policy will be provided to all applicants in written form. The Admissions Policy is available on the school’s website. Information on the availability of articulation agreements will be added to the draft *Program of Study 2014-2015*, which is also on the school’s website. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent/Director | | **Expected Date of Completion for Each Corrective Action Activity:** October 2014 | |
| **Evidence of Completion of the Corrective Action:**   * Documentation of the Admissions Policy’s availability on the school website – a copy of the page will be provided. * A copy of policy will be given to all applicants requesting an application – copy of the packet given to all applicants will serve as documentation. * Information on the availability of articulation agreements added to the draft *Program of Study 2014-2015*. Documentation will include a copy of the section involving articulation agreements from the *Program of Study 2014-2015.* * Information on the availability of articulation agreements added to the school website. A copy of the webpage will be provided. * Written documentation on articulation agreements will be summarized and reviewed with guidance staff and all teachers annually at the pre-school orientation. Documentation will include a copy of the agenda of the meeting, training materials and participant attendance sheets. * A checklist will be developed by Guidance Staff to help them when working with students to ensure that all information about articulation agreements is shared. Documentation will include a copy of the checklist developed. | | | |
| **Description of Internal Monitoring Procedures:** Annual review by the Administrative Team at their August meeting of the Program of Study, pre-school agenda, admissions packet documents and website will help to keep this information current. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 4 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  **Progress Report #1:** Provide documentation that the Admissions Policy is available on the school website (link to website) and in hard copy for all applicants requesting an application (copy of the packet given to all applicants). Provide evidence that information on the availability of articulation agreements has been added to the draft Program of Study 2014-2015 (copy of draft section involving articulation agreements from the Program of Study 2014-2015) and added to the school website (copy of the webpage). All documentation should be submitted to the Department by September 30, 2014.  **Progress Report #2:** Provide documentation that the internal monitoring procedures described in the CAP are in place. This would includea copy of the agenda from the annual orientation meeting during which written information on articulation agreements will be summarized and reviewed with guidance staff and all teachers. It can also include training materials and participant attendance sheets. In addition, provide the checklist that will be developed by Guidance Staff to help them when working with students to ensure that all information about articulation agreements is shared. All documentation should be submitted to the Department by January 12, 2015. | | | |
| **Progress Report Due Date(s):** September 30, 2014 and January 12, 2015 | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 9 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A site visit by the Massachusetts Department of Elementary and Secondary Education’s Audit Office was conducted to review certain criteria that involve data collection and the administration and allowable use of Perkins funds.  The Massachusetts Department of Elementary and Secondary Education’s Audit Office will send a detailed report of its review to Superintendent Green under separate cover.* | | | |
| **Narrative Description of Corrective Action:** The school will incorporate the Perkins Act Manual into our fiscal policies and procedures. The school will review the process with individuals working on the grant and will create a log documenting the source for the collection of date for the *Graduate Follow-Up Survey.* | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Principal | | **Expected Date of Completion for Each Corrective Action Activity:** September 2014 | |
| **Evidence of Completion of the Corrective Action:**   1. NCAHS will review the *Perkins Grant Policies and Procedures Manual* with individuals working on the grant, and will review the data collection procedures. Documentation will include a copy of the agenda for the meeting, training materials, and a copy of the attendance sheets. 2. NCAHS will create a log documenting the source for the collection of data for the *Graduate Follow Up Survey.* Documentation will include a copy of the log sheet developed. 3. The Principal’s Office will incorporate a system of written policies and procedures for collecting, summarizing, calculating return rates and maintaining data relative to graduate follow-up information for the *CVTE Graduate Follow-Up Report.* This informationwill be shared with individuals working on the grant. Documentation that this activity has occurred will include a copy of the agenda for the meeting, training materials, and a copy of the attendance sheets. | | | |
| **Description of Internal Monitoring Procedures:** The Principal will annually review the procedures for the Perkins Grant each summer with staff, prior to the start of data collection. The data will be summarized and presented to the Board of Trustees in preparation for submission to the Board of Trustees. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 9 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):** No progress reports will be required by the Office for Career/Vocational Technical Education. | | | |
| **Progress Report Due Date(s):** Not Applicable | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 12 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews and review of documentation showed that there is no person formally assigned to oversee articulation agreements at the high school. Therefore, the articulation agreements are not annually reviewed. In addition, while guidance counselors are aware of the three articulation agreements that currently exist and do provide the relevant information to eleventh or twelfth grade students who are applying to one of the three colleges, there is no system to ensure that all students receive information on the agreements. Not all teachers are aware of the articulation agreements and there is no published information on the articulation agreements. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03(4))* | | | |
| **Narrative Description of Corrective Action:** The Superintendent will oversee the development of articulation agreements. Each Vocational Coordinator will initiate the process by working with instructors to identify the college and university programs that we would most likely articulate with. They will make contact by phone with these schools to begin the negotiation process and gain contact information from the college. They will enter this information in a database, which will be used to send out information packets to the schools. Once the information has been sent, the vocational coordinators will follow up with another phone call to answer any questions and begin negotiating the agreement. Once a draft agreement has been made, it will be reviewed by the Principal, and eventually signed off by the Superintendent-Director. The final agreements will be bound into a three ring binder and electronically placed in a network file for all staff to access and will be reviewed with the teaching staff and the guidance counselors annually. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent-Director | | **Expected Date of Completion for Each Corrective Action Activity:** September2014 | |
| **Evidence of Completion of the Corrective Action:**   1. Each Vocational Coordinator will initiate the process by working with instructors to identify the college and university programs that we would most likely articulate with (June 2014). Documentation will include a copy of the agenda for the meeting, a copy of the attendance sheets and a list of the schools identified. 2. The Vocational Coordinators will make contact by phone with these schools to begin the negotiation process and gain contact information from the college (June 2014). Documentation will include a copy of the phone log. 3. The Vocational Coordinators will enter the contact information into a database, which will be used to send out information packets to the schools. Documentation will include a copy of the database developed. 4. Once the information has been sent, the Vocational Coordinators will follow up with another phone call to answer any questions and begin negotiating the agreement (July/August 2014). A copy of the phone log will serve as documentation. 5. Once a draft agreement has been made, it will be reviewed by the Principal, and eventually signed off by the Superintendent-Director (August 2014). A copy of the agreement will serve as the documentation. 6. The final agreements will be bound into a three ring binder, placed in an e-file on the school network for all staff to access and reviewed with the teaching staff and the guidance counselors annually (September 2014). Documentation will include a copy of the agenda for the meeting, training materials, and a copy of the attendance sheets. | | | |
| **Description of Internal Monitoring Procedures:** Each March, the Superintendent-Director will review the agreements with the administrative team in order to assure that the agreements will be in place for the following September. The annual review will involve dissemination of the information to counselors and the teaching staff. Contacting college or university to ensure that the current agreement will be in effect for the following school year will be the responsibility of the Vocational Coordinators. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 12 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  **Progress Report #1**: Provide documentation of the system for the development of articulation agreements as described in the CAP. This would include a copy of the agenda for the meeting between the Vocational Coordinators and teachers, a copy of the attendance sheets and a list of the schools identified, evidence of communication between the district and the schools being sought for articulation (phone logs or emails), and copies of any agreements in place by the time of the first progress report. Provide documentation that that all students receive information on the agreements and that there is published information on the articulation agreements. *Note that the CAP and Progress Reports for CVTE 4 address publishing information on articulation agreements and disseminating information to students.* All documentation should be submitted to the Department by September 30, 2014.  **Progress Report #2:** Provide documentation that teachers are aware of the articulation agreements. Documentation would include a copy of the agenda for the annual orientation meeting, training materials, and a copy of the attendance sheets. Provide documentation of the internal monitoring procedures and review of the articulation agreements by the Superintendent-Director described in the CAP. Documentation could include meeting agendas inclusive of the annual review. All documentation should be submitted to the Department by January 12, 2015. | | | |
| **Progress Report Due Date(s):** September 30, 2014 and January 12, 2015 | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 13 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews, review of documentation and review of cooperative education student folders showed inconsistencies in documentation of the required elements of the cooperative education program. The student record review revealed that not all folders contained copies or evidence of work permits. In addition, the review of records indicated that two cooperative education students were continuing to work at their cooperative education sites even though documentation of worker’s compensation coverage had expired. (Legal Citations: MA Worker’s Compensation Insurance per M.G.L. c. 152; Chapter 74 Manual for Vocational Technical Cooperative Education)* | | | |
| **Narrative Description of Corrective Action:** A checklist was developed to ensure that all the required information is contained in each Cooperative Education file. Any documents that are date sensitive are required to have the expiration date highlighted to confirm they will remain current throughout the student’s Cooperative Education period. The phrase “Copy of the student’s work permit” was added to the checklist. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Vocational Coordinators | | **Expected Date of Completion for Each Corrective Action Activity:** April 2014 | |
| **Evidence of Completion of the Corrective Action:**   1. A checklist was developed to ensure that all the required information is contained in each Cooperative Education file. Documentation will include a copy of the checklist. 2. Any documents that are date sensitive are required to have the expiration date highlighted and the effective dates written into the checklist. “Copy of the student’s work permit” was added to the checklist. The Principal will review the documents prior to student’s going out to ensure that the documentation is current. | | | |
| **Description of Internal Monitoring Procedures:** Each year, a random twenty percent of the records will be reviewed by the Principal in October to ensure that the procedures are being followed. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 13 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s): Progress Report #1:** Provide documentation of consistency in record keeping to ensure that all required elements of the cooperative education program are in place for each participant. This would include a copy of the checklist described in the CAP. Provide documentation of the process to ensure date sensitive materials do not expire during the cooperative education assignment. This can include sample copies of student co-op folder checklists (names redacted) evidencing that any expiration dates are highlighted and the effective dates are written into the checklist. All documentation should be submitted to the Department by September 30, 2014.  **Progress Report #2:** Provide documentation of the internal monitoring procedures. This can be a summary of the annual review by the principal of a random twenty percent of the cooperative education records to ensure that the procedures are being followed. Documentation should be submitted by January 12, 2015. | | | |
| **Progress Report Due Date(s):** September 30, 2014 and January 12, 2015 | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 14 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *The current**non-cooperative education (unpaid) work-based learning program at the high school is the internship program for each Chapter 74 program, referred to as a Structured Field Experience, available to any grade 11 student who meets the criteria for participation. Interviews and review of documentation showed that the Parent Permission Document that must be signed for student participation released the district from all claims and legal actions in case of student injury or other loss resulting from participation in the program. Waiving student rights as a requirement of participation is not allowable under Chapter 74 regulations. (Legal Citation: 603 CMR 4.00 Vocational Technical Education Regulations and Guidelines. 603 CMR 4.06(4))* | | | |
| **Narrative Description of Corrective Action:** The information provided in this report was submitted to the school’s legal counsel for review. They will be developing a new procedure/document that brings us into compliance and omits the waiving of student rights. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent-Director | | **Expected Date of Completion for Each Corrective Action Activity:** September 2014 | |
| **Evidence of Completion of the Corrective Action:**   1. New document provided by school legal counsel (September 2014). Documentation attesting to the completion of this task will be the new parental permission document. | | | |
| **Description of Internal Monitoring Procedures:** Once the document has been developed and approved, it will be inserted into the internship packet. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 14 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):** Provide documentation of the progress being made by the school’s legal counsel in the development of a new procedure/document that will bring the district into compliance and omits the waiving of student rights as a condition of participation in the unpaid work-based learning program. Or, if already developed, provide copies of the new procedures and documents. Submit this information by September 30, 2014.  **Progress Report #2:** Provide documentation that parents/guardians and students are not required to waive their legal rights as a condition of participation in the unpaid work-based learning program. This will be copies of the new procedures and documents. Submit this information by January 12, 2015. | | | |
| **Progress Report Due Date(s):** September 30, 2014 and January 12, 2015 | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 20 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews, observations and review of documentation indicated that not all instructional facilities used for career/vocational technical education meet current occupational standards, i.e., are generally comparable to facilities in applicable operating business and industries.  The Office for Career/Vocational Technical Education will send a Safety Survey Report to Superintendent Green detailing these concerns. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03(3)(4)(7)(8))* | | | |
| **Narrative Description of Corrective Action:** The school received the Safety Report provided through this process and has worked with the Director of Facilities to make steady progress towards correcting all issues regarding the facility. Follow up Safety Reports have been submitted documenting progress to date and a follow up visit is being scheduled for the early summer of 2014. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent-Director and Director of Facilities | | **Expected Date of Completion for Each Corrective Action Activity:** September 2014 | |
| **Evidence of Completion of the Corrective Action:**   1. Upon inspection by DESE officials, all items out of compliance are corrected. 2. The school has purchased a software program called “School Dude” and Smart EDU that monitors problems and maintenance issues, and provides a reporting mechanism for repairs. A copy of a School Dude and Smart EDU report will serve as documentation. | | | |
| **Description of Internal Monitoring Procedures:** At the end of each year, the Superintendent-Director will have a Safety Coordination meeting with the Vocational Coordinator, Principal and Director of Facilities to conduct a walk-through safety inspection to develop short and long range maintenance plans. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 20 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):** The district will continue to provide Dave Edmonds of the Office for Career/Vocational Technical Education with monthly updates using the Safety Survey Report Response Template, as requested. | | | |
| **Progress Report Due Date(s):** The district will refer to the last correspondence with Dave Edmonds which includes the due date of the next update. | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 21 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Interviews, observations and review of documentation indicated that not all equipment used for career/vocational technical education meet current occupational standards, i.e., are generally comparable to equipment in applicable operating business and industries. The Office for Career/Vocational Technical Education will send a Safety Survey Report to Superintendent Green detailing these concerns. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03(3)(4)(7)(8))* | | | |
| **Narrative Description of Corrective Action:** The school received the Safety Report provided through this process and has worked with the Director of Facilities to make steady progress towards correcting all issues with equipment. Follow up Safety Reports have been submitted documenting progress to date and a follow up visit is being scheduled for the early summer of 2014. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent-Director and Director of Facilities | | **Expected Date of Completion for Each Corrective Action Activity:** September2014 | |
| **Evidence of Completion of the Corrective Action:**   1. Upon inspection by DESE officials, all items out of compliance are corrected. 2. The school has purchased a software program called “School Dude” and Smart EDU that monitors problems and maintenance issues, and provides a reporting mechanism for repairs. A copy of a School Dude and Smart EDU report will serve as documentation | | | |
| **Description of Internal Monitoring Procedures:** At the end of each year, the Superintendent-Director will have a Safety Coordination meeting with the Vocational Coordinator, Principal and Director of Facilities to conduct a walk-through safety inspection to develop short and long range maintenance plans. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 21 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):** The district will continue to provide Dave Edmonds of the Office for Career/Vocational Technical Education with monthly updates using the Safety Survey Report Response Template, as requested. | | | |
| **Progress Report Due Date(s):** The district will refer to the last correspondence with Dave Edmonds which includes the due date of the next update. | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 22 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *While Perkins Core Indicator of Performance outcomes or Chapter 74 outcomes are shared among administrators, interviews and review of documentation indicated that technical teachers are not provided with Perkins Core Indicator of Performance outcomes or Chapter 74 outcomes in order to improve programs and outcomes for students. Consequently, while professional development may be planned as a response to the core indicator performance outcomes, staff do not make the connection between the data and outcomes that drive the professional development or support the changes they are asked to make within their curriculum or instruction. (Legal Citation: Perkins Section 113, Vocational Technical Education Regulations 603 CMR 4.05)* | | | |
| **Narrative Description of Corrective Action:** The Vocational Coordinators will work with the Principal to create a presentation clearly outlining the Perkins Core Indicators of Performance outcomes and other Chapter 74 outcomes to be presented to instructors during a faculty meeting in September or October each year. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Principal | | **Expected Date of Completion for Each Corrective Action Activity:** October2014 | |
| **Evidence of Completion of the Corrective Action:**   1. Staff sign in to the faculty meeting during the first few days of school to create a record of attendance. A copy of the presentation and all training materials will serve as a record of the information covered. 2. At the close of the presentation at the faculty meeting, staff will be asked to make suggestions for professional development based on the data presented. Documentation of this task will be the list created by the staff. | | | |
| **Description of Internal Monitoring Procedures:** The presentation will be made annually, and will be added to the school’s list of required trainings for the first day of school. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 22 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):**  **Progress Report #1:** Provide documentation that technical teachers are provided with Perkins Core Indicator of Performance outcomes or Chapter 74 outcomes in order to improve programs and outcomes for students. This will include a copy of the staff presentation (described in the CAP) and all training materials. All documentation should be submitted to the Department by September 30, 2014.  **Progress Report #2:** Provide documentation of the internal monitoring procedures and annual presentation which will become a required training for the first day of school. Documentation could include a memo, agenda, email, or list of trainings. All documentation should be submitted to the Department by January 12, 2015. | | | |
| **Progress Report Due Date(s):** September 30, 2014 and January 12, 2015 | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 23 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A site visit by the Massachusetts Department of Elementary and Secondary Education’s Audit Office was conducted to review certain criteria that involve data collection and the administration and allowable use of Perkins funds.  The Massachusetts Department of Elementary and Secondary Education’s Audit Office will send a detailed report of its review to Superintendent Green under separate cover.* | | | |
| **Narrative Description of Corrective Action:** The school has incorporated the *Perkins Act Manual* into our fiscal policies and procedures. We have reviewed the Manual with individuals working on the grant and will create a log documenting the source for the collection of data. The administrative team reviewed the policies and procedures relative to supporting vs. supplanting of funds. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent-Director | | **Expected Date of Completion for Each Corrective Action Activity:** September 2014 | |
| **Evidence of Completion of the Corrective Action:**   1. NCAHS will review the grant application in July to ensure that the support vs. supplant requirement is met. Documentation of this activity will include an agenda for the meeting and a sign in sheet for the attendees. 2. NCAHS will review the *Perkins Grant Policies and Procedures Manual* with individuals working on the grant, and will review the data collection procedures. Documentation will include a copy of the agenda for the meeting, handouts provided, and a copy of the attendance sheets. 3. NCAHS will create a log documenting the source for the collection of data for the *Graduate Follow Up Survey (September 2014).* Documentation will include copy of the log sheet developed. 4. The Principal’s Office will incorporate a system of written policies and procedures for collecting, summarizing, calculating return rates, and maintaining data relative to graduate follow-up information for the *CVTE Graduate Follow Up Report.* Documentationwill include a copy of the policies and procedures developed. | | | |
| **Description of Internal Monitoring Procedures:** The Superintendent-Director and Business Manager will review the grant annually to ensure that all requirements are being met. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 23 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):** No progress reports will be required by the Office for Career/Vocational Technical Education. | | | |
| **Progress Report Due Date(s):** Not Applicable | | | |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic:** CVTE 24 | | | **Rating:** Partially Implemented |
| **Department CPR Finding:** *A site visit by the Massachusetts Department of Elementary and Secondary Education’s Audit Office was conducted to review certain criteria that involve data collection and the administration and allowable use of Perkins funds.  The Massachusetts Department of Elementary and Secondary Education’s Audit Office will send a detailed report of its review to Superintendent Green under separate cover.* | | | |
| **Narrative Description of Corrective Action:** The school has incorporated the *Perkins Act Manual* into our fiscal policies and procedures. We have reviewed the Manual and related processes with individuals working on the grant and will create a log documenting the source for the collection of data. The administrative team reviewed the policies and procedures relative to supporting vs. supplanting of funds. | | | |
| **Title/Role of Person(s) Responsible for Implementation:** Superintendent-Director | | **Expected Date of Completion for Each Corrective Action Activity:** September 2014 | |
| **Evidence of Completion of the Corrective Action:**   1. NCAHS will review the grant application in July to ensure that the support vs. supplant requirement is met. Documentation of this activity will include an agenda for the meeting and a sign in sheet for the attendees. 2. NCAHS will review the *Perkins Grant Policies and Procedures Manual* with individuals working on the grant, and will review the allowable uses of Perkins funds. Documentation of this activity will include an agenda for the meeting and a sign in sheet for the attendees. 3. NCAHS will create a log documenting the source for the collection of data for the *Graduate Follow Up Survey (September 2014).* 4. The Principal’s Office will incorporate a system of written policies and procedures for collecting, summarizing, calculating return rates, and maintaining data relative to graduate follow-up information for the *CVTE Graduate Follow Up Report (August 2104).* | | | |
| **Description of Internal Monitoring Procedures:** The Superintendent-Director and Business Manager will review the grant annually to ensure that all requirements are being met | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion:** CVTE 24 | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval:** | | | |
| **Department Order of Corrective Action:** | | | |
| **Required Elements of Progress Report(s):** No progress reports will be required by the Office for Career/Vocational Technical Education. | | | |
| **Progress Report Due Date(s):** Not Applicable | | | |