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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: Cambridge

CPR Onsite Year: 2014-2015

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 03/16/2015.

**Mandatory One-Year Compliance Date:** **03/16/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 8 | IEP Team composition and attendance | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 24 | Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | Partially Implemented |
| SE 41 | Age span requirements | Partially Implemented |
| SE 51 | Appropriate special education teacher licensure | Partially Implemented |
| SE 52 | Appropriate certifications/licenses or other credentials -- related service providers | Partially Implemented |
| SE 54 | Professional development | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |
| CR 14 | Counseling and counseling materials free from bias and stereotypes | 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 23 | Comparability of facilities | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |
| CR 25 | Institutional self-evaluation | Partially Implemented |

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

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| **Criterion & Topic:** SE 8 IEP Team composition and attendance | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that at the high school, required IEP Team members are not consistently excused with parental consent; in addition, there was no evidence of the required Team members providing written input to the parent and the IEP Team for the development of the IEP prior to the meeting. Specifically, general education teachers for students involved in a general education program are absent from IEP Teams without written parent excusal. |
| **Description of Corrective Action:** The Office of Student Services (OSS) will conduct training for Team Chairpersons and all special education staff members concerning the legal standard on IEP Team composition and attendance requirements. Further, the OSS will refine its procedural protocol for the excusal of any Team member from a Team meeting. During the training, specific instruction will be provided detailing the procedure for the excusal of any Team member from a Team meeting. In addition, all district school administrators will participate in training on IEP Team composition and attendance with a particular focus on the legal requirement concerning the participation of general education teachers in IEP Team meetings. Training on the legal standard for the participation of general education teachers in the IEP Team meetings will also be delivered to all high school general education teachers. While the CPR Finding referenced the high school in particular, the OSS believes that training for all Team Chairpersons, special education staff, and school district administrators would be beneficial. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services | **Expected Date of Completion:**12/31/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence of completion of training will include a copy of the training materials, agendas, and dated attendance sheets with signatures. Evidence of the change in practice will be a random sample of twenty (20) high school IEP Team meeting Attendance Sheets demonstrating the attendance of all required Team members and copies of IEP Team meeting Attendance Sheets demonstrating the attendance of all required Team members and copies of IEP Team meeting Attendance Sheets demonstrating the appropriate use of Lieu of Attendance Waivers for those Team members not in attendance. |
| **Description of Internal Monitoring Procedures:** Under the direction of the Director of Student Services, high school Team Chairpersons will review Team meeting Attendance Sheets on a weekly basis to ensure compliance with respect to participation and excusal of Team members. In weekly school-based special education team meetings, high school Team Chairpersons will routinely review and reinforce appropriate practice. High school Team Chairpersons will be required to submit a Status Report with Attendance Sheet copies monthly to the Director for review. The Director will review the Status Reports to determine any areas of confusion and patterns of noncompliance and will implement immediate actions to remedy confusions and/or noncompliance. It is important to note that the high school Team Chairpersons have weekly consults with the Director of Student Services to specifically address issues of practice and compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 8 IEP Team composition and attendance | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Please provide the written description of the updated procedures related to the Team Meeting excusal process that include the required Team members providing written input for the development of the IEP. Provide evidence of staff training on these procedures, which will include but not be limited to a training agenda, signed attendance sheets and copies of the materials presented. Please submit this to the Department by October 29, 2015. Submit the results of an administrative review of a sample of high school student records for appropriate documentation of excused Team members and provision of written input for IEP development. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by January 21, 2016. \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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

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| **Criterion & Topic:** SE 18B Determination of placement; provision of IEP to parent | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of student records indicated that following IEP meetings at the Amigos Elementary School, IEP Teams provide parents with a summary that includes the service delivery grid and goal areas, but do not send the proposed IEP and placement within ten days of the meeting. |
| **Description of Corrective Action:** The Office of Student Services (OSS) will conduct training for Team Chairpersons and all special education staff members concerning the legal standard on the provision of the IEP to the parent "immediately following" the IEP Team meeting. The training will include instruction on the appropriate Massachusetts regulatory requirement {603CMR 28.05(7)} in conjunction with the DESE Memorandum of December 1, 2006 which addresses the proper use of the Team Meeting Summary Form. Additionally, the training will include a review of the OSS protocol on the use of the Team Meeting Summary Form and the delivery of the IEP to the parent within ten (10) working days of the Team meeting. While the CPR Finding referenced the Amigos School in particular, the OSS believes that training for all Team Chairpersons and special education staff would be beneficial. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services | **Expected Date of Completion:**12/31/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence of completion of training will include a copy of the training materials, agendas, and dated attendance sheets with signatures. Evidence of the change in practice will be a random sample of eight (8) Amigos School Team Meeting Summary Forms matched with the Notices of Proposed School District Action (N1 Letters) documenting the date that the proposed IEP was sent to the parent. |
| **Description of Internal Monitoring Procedures:** Under the direction of the Director of Student Services, the Amigos School Team Chairpersons will review all Team Meeting Summary Forms and N1 Letters to ensure compliance with the ten (10) working day requirement. In weekly school-based special education team meetings, the Amigos School Team Chairperson will routinely review and reinforce appropriate practice. The Amigos School Team Chairperson will provide a monthly Status Report with accompanying Team Meeting Summary Forms and Notices of Proposed School District Action (N1 Letters) to the Director of Student Services. The Director will review the Status Reports to reveal any areas of confusion or patterns of noncompliance and will implement immediate actions to remedy confusions and/or noncompliance. It is important to note that the Amigos Team Chairpersons has weekly consults with the Director of Student Services to specifically address issues of practice and noncompliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Provide the updated procedures related to providing parents with two IEP/placement copies within ten days. Additionally, provide evidence of staff training on these procedures, which will include but not be limited to a training agenda, signed attendance sheets and copies of the materials presented. Please submit this to the Department on or before by October 29, 2015. Submit the results of an administrative review of a sample of student records for immediate provision of two copies of the IEP. Please note that the district may choose to sample across schools, but must include & identify Amigos records. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by January 21, 2016. \*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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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:** A review of student records indicated that Non-Participation Justification statements in IEPs at the high school and elementary schools are not consistently individualized and do not always consider the harmful effects of the removal of the student from the general education classroom. |
| **Description of Corrective Action:** The Office of Student Services (OSS) will conduct training for Team Chairpersons and all special education staff members concerning the legal standard on the Least Restrictive Environment (LRE) and its relationship to the Non-Participation Justification section of the IEP (IEP 6). The training will include specific instruction on the development of Non-Participation Justification statements which are individualized and which take into consideration the harmful effects of the removal from general education. The OSS will refine its LRE protocol to assist IEP Teams in making program decisions that routinely consider both the benefits of the least restrictive environment and the harmful effects of removal from general education. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services | **Expected Date of Completion:**12/31/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence of completion of training will include a copy of the training materials including the revised LRE protocol, agendas, and dated attendance sheets with signatures. Evidence of the change in practice will be a random sample of forty-five (45) Non-Participation Justifications sections from IEPs (IEP 6) across district schools that document adherence to the standard. |
| **Description of Internal Monitoring Procedures:** Under the direction of the Director of Student Services, Team Chairpersons will review all IEPs to make certain that the Non-Participation Justification sections are individualized and take into consideration the harmful effects of the removal from general education. In weekly school-based special education team meetings, all Team Chairpersons will routinely review and reinforce appropriate practice. The Team Chairpersons will provide a monthly Status Report with accompanying Non-Participation Justification sections of the IEP (IEP 6) to the Director of Student Services. The Director will review the Status Reports to reveal any areas of confusion or patterns of noncompliance and will implement actions to remedy confusions and/or noncompliance. It is important to note that the Team Chairpersons have weekly consults with the Director of Student Services to specifically address issues of practice and compliance. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |

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| **Required Elements of Progress Report(s):** Submit evidence of training to special education staff responsible for completing IEPs on the requirements for writing complete IEP Non-participation Justification statements that indicate the harmful effects of removal of the student from the general education classroom and why the student's removal from the general education classroom is critical to the student's program. This progress report is due October 29, 2015.Submit the results of an administrative review of a sample of student records from all levels for appropriately completed Non-participation Justification statements. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by January 21, 2016.\*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 the student names and grade levels for the records reviewed; 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):** 10/29/201501/21/2016 |

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| 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:** A review of student records indicated that Notices of Proposed School District Action (N1), to propose an evaluation or an IEP and summarize a Team's decisions and considerations, do not consistently describe the school's proposed action or include rejected options and the reason for the rejection. |
| **Description of Corrective Action:** The Office of Student Services (OSS) will conduct training for Team Chairpersons and all special education staff members concerning the legal standard on the completion of Notices of Proposed School District Action (N1 Letters) which consistently describe the proposed actions and include rejected options and the reason for the rejection. The training will include specific instruction on six (6) questions contained in the Notices of Proposed School District Action (N1 Letters) and examples of appropriate responses to questions. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services | **Expected Date of Completion:**12/31/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence of completion of training will include a copy of the training materials including samples of Notices of Proposed School District Action (N1 Letters), agendas, and dated attendance sheets with signatures. Evidence of the change in practice will be a random sample of forty-five (45) of Notices of Proposed School District Action (N1 Letters) across district schools to document adherence to the standard. |
| **Description of Internal Monitoring Procedures:** Under the direction of the Director of Student Services, Team Chairpersons will review Notices of Proposed School District Action (N1 Letters) to ensure that they are completed correctly and that they fully address the six (6) questions. In weekly school-based special education team meetings, Team Chairpersons will routinely review and reinforce appropriate practice. Team Chairpersons will provide a monthly Status Report with copies of completed Notice of Proposed School District Action (N1 Letters) to the Director of Student Services. The Director will review the Status Reports to reveal any areas of confusion or patterns or noncompliance and will implement immediate actions to remedy confusions and/or noncompliance. It is important to note that the Team Chairpersons have weekly consults with the Director of Student Services to specifically address issues of practice and compliance. |
| 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:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit evidence of the training with special education and related services staff on completion of the Notice of Proposed School District Action (N1) to propose an evaluation or an IEP that summarizes the Team's decisions and considerations to consistently include rejected options and the reason for the rejection by October 29, 2015.Submit the results of an administrative review of a sample of student records from all levels for completed Notice of Proposed School District Action (N1) to propose an evaluation or an IEP. Indicate the number of records reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by January 21, 2016. \*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 the student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, their role(s), and signature(s). |
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| COORDINATED PROGRAM REVIEW**CORRECTIVE ACTION PLAN** |

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| **Criterion & Topic:** SE 41 Age span requirements | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated the high school has one instructional grouping, SEE 40-31 Academics Period 2, where the ages of the youngest and oldest student differ by more than 48 months. The district has not submitted a written request for approval of a wider age range to the Department of Elementary and Secondary Education. |
| **Description of Corrective Action:** The Office of Student Services (OSS) will conduct training for Team Chairpersons and all special education staff members concerning the legal standard on age span requirements for instructional groupings. The training will emphasize that the ages of the youngest and oldest student in any instructional grouping must not differ by more than forty-eight (48) months. In addition, the training will include the procedure for requesting an age span Waiver in accordance with 603 CMR 28.06 (6) (f) from the Department of Elementary and Secondary Education (DESE) when the district believes that it is justified to do so. Team Chairpersons and all special education staff will be informed that an instructional grouping that exceeds the forty-eight (48) month age span requirement can be implemented only after the Waiver has been approved by DESE. Although the CPR Finding only referenced an instructional grouping at the high school, the OSS believes that the training will be beneficial to all special education staff. |
| **Title/Role(s) of Responsible Persons:**Director of Student Services | **Expected Date of Completion:**12/31/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence of completion of training will include a copy of the training materials including the Waiver Form, agendas, and dated attendance sheets with signatures. Evidence of the change in practice will be review of age ranges in all instructional groupings at the high school as denoted on teachers' schedules. If deemed necessary and appropriate, the district will apply for an age span Waiver and received approval for such Waiver before instituting an instructional grouping with students that exceed the forty-eight (48) month requirement. Any such Waiver application and DESE approval notice will be kept on file. |
| **Description of Internal Monitoring Procedures:** Under the supervision of the Director of Student Services, the OSS Coordinator for the high school will oversee the creation of all instructional groupings to ensure that the groupings do not exceed forty-eight (48) month age span requirement. If the OSS Coordinator believes that formulating an instructional grouping where the student age span exceeds forty-eight (48) month requirement is justified, then the district will apply for the age span Waiver. The district will not, however, move forward with the instructional grouping without receiving DESE approval. The OSS Coordinator will keep both the application for the Waiver as well as the DESE approval notification on file. The OSS Coordinator will monitor high school teacher schedules quarterly to make certain that there is no inadvertent violation of the age span requirement. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 41 Age span requirements | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit evidence of training that includes the district procedures, dated agenda, & signed attendance provided to principals and special education staff on the regulations regarding age span requirements.Submit the results of an administrative review of special education classes at the high school for age span. Indicate the number of classes/groups reviewed, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by January 21, 2016.\*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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

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| **Criterion & Topic:** SE 51 Appropriate special education teacher licensure | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that 14 special education teachers are not currently licensed. |
| **Description of Corrective Action:** The Office of Student Services (OSS) will work collaboratively with the Office of Human Resources to ensure that all special education teachers are licensed. The Office of Human Resources has developed procedural guidelines for the hiring of all Cambridge Public Schools (CPS) Teaching Staff. The guidelines specifically reference that all public school educators in Massachusetts are required to hold licensure appropriate for their position from the Massachusetts Department of Elementary and Secondary Education (DESE). The OSS is committed to hiring licensed special education teachers. Of the fourteen (14) referenced special education teachers, only two (2) remain unlicensed but have been granted waivers from DESE. Of the remaining twelve (12), three (3) are licensed, seven (7) have been terminated, one (1) is retired, and one (1) is an Extended Term Substitute. If the OSS or any other CPS department is compelled to hire an unlicensed teacher due to the fact that no licensed candidate applied for a position, the Office of Human Resources requires a detailed explanation documenting why the hiring decision was made. Any candidate who is recommended for hire and does not possess a Massachusetts license at the time an offer is extended is employed contingent upon his/her immediately taking steps to obtain the appropriate licensure. Additionally, the Office of Human Resources has instituted a procedure to immediately apply for a waiver from DESE and to closely monitor the employee's progress towards licensure. The Office of Human Resources seeks out licensed job candidates through advertisements in newspapers, online employment sites, college/university job fairs, and via the school department website. |
| **Title/Role(s) of Responsible Persons:**Director of Student ServicesExecutive Director of Human Resources | **Expected Date of Completion:**12/31/2015 |
| **Evidence of Completion of the Corrective Action:**A review of all OSS special education teachers will reveal that all have appropriate licensure or have received waivers from DESE. |
| **Description of Internal Monitoring Procedures:** All members of the OSS Executive Leadership Team charged with hiring staff will diligently review all job applicants and only select those applicants which possess the appropriate licensure to participate in the interview process. In the event that no licensed candidates have applied for a position and every effort to secure licensed special education teachers have been unsuccessful, any prospective special education teacher's employment would be contingent upon his/her immediately taking steps to obtain Massachusetts licensure appropriate for the position. In conjunction with the Office of Human Resources, the application for waiver would be immediately implemented. The OSS and Office of Human Resources will meet quarterly to monitor the licensure status of any special education teachers who are working towards licensure and have been granted a DESE employment waiver. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 51 Appropriate special education teacher licensure | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit the procedural guidelines for hiring special education teachers and evidence of training for the OSS Executive Leadership Team on the procedures by October 29, 2015.Submit the results of an administrative review of special education teacher licensure or Department approved waivers by Office of Human Resources by January 21, 2016. |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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

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| **Criterion & Topic:** SE 52 Appropriate certifications/licenses or other credentials -- related service providers | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that one physical therapist, three school adjustment counselors, and one speech and language pathologist are not currently licensed. |
| **Description of Corrective Action:** The Office of Student Services (OSS) will work collaboratively with the Office of Human Resources to ensure that all related service providers are appropriately licensed. The Office of Human Resources has developed procedural guidelines for the hiring of all Cambridge Public Schools Teaching Staff. The guidelines specifically reference that all public school educators in Massachusetts are required to hold licensure appropriate for their position from the Massachusetts Department of Elementary and Secondary Education (DESE) and/or discipline specific state licensure. The OSS is committed to hiring licensed related service providers. Of the seven (7) referenced related service providers, only one (1) remains unlicensed; this individual's employment will be terminated as of June, 2015. Of the remaining six (6), three (3) are licensed, one (1) has been terminated, and two (2) are retired. If the OSS is compelled to hire a DESE unlicensed related service provider due to the fact that no licensed candidate applied for a position, the Office of Human Resources requires a detailed explanation documenting why the hiring decision was made. Any candidate who is recommended for hire and who does not possess a Massachusetts license at the time an offer is extended is employed contingent upon his/her immediately taking steps to obtain the appropriate licensure. Additionally, the Office of Human Resources has instituted a procedure to immediately apply for a waiver from the DESE and to closely monitor the employee's progress towards licensure. The OSS would not hire an Occupational Therapist or Physical Therapist who does not have the appropriate state (Massachusetts Allied Health) licensure. The Office of Human Resources seeks out licensed job candidates through advertisements in newspapers, online employment sites, college/university job fairs, and via the school department website. |
| **Title/Role(s) of Responsible Persons:**Director of Student ServicesExecutive Director of Human Resources | **Expected Date of Completion:**12/31/2015 |
| **Evidence of Completion of the Corrective Action:**A review of all OSS related service providers will reveal that all have appropriate licensure or have received waivers (if appropriate to their discipline) from DESE. |
| **Description of Internal Monitoring Procedures:** All members of the OSS Executive Leadership Team charged with hiring staff will diligently review all job applicants and only select those applicants who possess the appropriate licensure to participate in the interview process. In the event that no licensed related service providers have applied for a position and every effort to secure appropriately licensed related service providers have been unsuccessful, any prospective related service provider's employment would be contingent upon his/her immediately taking steps to obtain Massachusetts licensure appropriate for the position. In conjunction with the Office of Human Resources, the application for waiver would be immediately implemented. The OSS would not hire an Occupational Therapist or Physical Therapist who does not have state licensure. The OSS and Office of Human Resources will meet quarterly to monitor the licensure status of any related service providers who are working towards licensure and have been granted a DESE employment waiver. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 52 Appropriate certifications/licenses or other credentials -- related service providers | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit the procedural guidelines for hiring related services staff and evidence of training for the OSS Executive Leadership Team on the procedures by October 29, 2015.Submit the results of an administrative review of related services staff licensure by Office of Human Resources by January 21, 2016. |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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

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| **Criterion & Topic:** SE 54 Professional development | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that general education staff members do not receive the following special education topics for professional development: 1) State and federal regulations and laws and related local special education procedures, and 2) methods of collaboration among teachers, paraprofessionals to accommodate diverse learning styles in general education classrooms. |
| **Description of Corrective Action:** The Office of Student Services (OSS) will work in partnership with the Assistant Superintendent for Curriculum, Instruction, and Assessment to ensure that the Professional Development schedule for the 15-16 school year includes training for all general education staff members on specific special education topics. Mandated training sessions will focus on: 1) federal and state laws and regulations and OSS special education processes and procedures and 2) best practices around effective collaboration between special educators, general educators, and paraprofessionals necessary to meet the needs of diverse learners in general education classrooms. The OSS will join forces with the Assistant Superintendent for Curriculum, Instruction, and Assessment to develop and implement the Professional Development workshops. |
| **Title/Role(s) of Responsible Persons:**Director of Student ServicesAssistant Superintendent for Curriculum, Instruction, and Assessment | **Expected Date of Completion:**12/31/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence of completion of training will include a copy of the training materials, agendas, and dated attendance sheets with signatures. |
| **Description of Internal Monitoring Procedures:** The OSS and the Assistant Superintendent for Curriculum, Instruction, and Assessment will meet as needed to secure the Professional Development dates and to plan the workshops. A description of trainings will be produced which details the focus and purpose of each session. The OSS has members who serve on the district's Professional Development Committee and who can ensure that these trainings remain on the forefront of all committee meetings. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 54 Professional development | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**   |
| **Department Order of Corrective Action:**  |
| **Required Elements of Progress Report(s):** Submit evidence of general education staff training on state and Federal special education laws and regulations and methods of collaboration, which will include but not be limited to a training agenda, signed attendance sheets and copies of the materials presented. Please submit this to the Department by October 29, 2015. |
| **Progress Report Due Date(s):** 10/29/2015  |

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

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| **Criterion & Topic:** SE 55 Special education facilities and classrooms | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Observations at the Fletcher Maynard Academy demonstrated that suspended middle school students and elementary students with specific learning disabilities share the same room. The room is divided by a bookcase and a file cabinet, thereby creating auditory distractions and confidentiality concerns for the students with disabilities who must pass through the in-school suspension section of the room to access their workspace.A review of the Putnam Upper School indicated that rooms including hearing impaired students lack a visual fire alarm. Observations at the Haggerty Elementary School demonstrated that students with disabilities must walk through the front office to access speech and language services, which does not allow for confidentiality. |
| **Description of Corrective Action:** The OSS has and will continue to work collaboratively with the Chief Operating Officer to make sure that facilities and classrooms for students with disabilities are appropriately located and equipped to ensure inclusion into life of the school, accessibility, physical equity, and safety and are non-stigmatizing with respect to disability. Concerning the three school facilities issues cited, the following actions have been or will be taken:The Fletcher Maynard Academy's facilities issue has been resolved; the specific learning disabilities workspace has been relocated to ensure a private and distraction free learning environment.During the summer of 2015, the Chief Operating Officer will take necessary steps to relocate the Speech and Language Therapy Office at the Haggerty School to a new space designed to maintain confidentiality for students with disabilities.During the summer of 2015, the Chief Operating Officer will address the facilities concerns regarding the installation of visual fire alarms for hearing impaired students at the Putnam Avenue Upper School. Additionally, the OSS will conduct a review of all hearing impaired students in the district to make certain that the appropriate fire alarm systems are in place in other school buildings as warranted. The safety of all students who attend the Cambridge Public Schools (CPS) is of paramount importance. |
| **Title/Role(s) of Responsible Persons:**Director of Student ServicesChief Operating Officer | **Expected Date of Completion:**08/31/2015 |
| **Evidence of Completion of the Corrective Action:**Documentation from the Chief Operating Officer that all facilities issues have been addressed. School walk visits will be conducted by appropriate OSS Executive Leadership Team members to verify that all issues of facilities noncompliance have been appropriately resolved. |
| **Description of Internal Monitoring Procedures:** The OSS and the Chief Operating Officer will be in communication around the status of all facilities issues over the course of this school year and during the summer of 2015. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Please provide the floor plans for Fletcher Maynard Academy indicating where the elementary special education SLD class was relocated by October 29, 2015. Also provide a floor plan for Haggarty Elementary School indicating where the speech and language services are provided by October 29, 2015.On or before January 21, 2016 the Department will make site visits to Putnam Upper School to check the visual fire alarm and to Fletcher Maynard Academy and Haggarty Elementary School to check the relocation of special education services and speech and language services. |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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

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| **Criterion & Topic:** CR 7 Information to be translated into languages other than English | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that although the district has numerous resources such as bilingual community liaisons, a bilingual resource office, and agencies contracted to provide interpretation and translation, the district has not established a system to document oral interpretation to assist parents/guardians with limited English skills who speak low-incidence languages. Interviews also indicated that principals and other staff members are not familiar with the district's procedures to obtain interpretation services for families who speak low-incidence languages. |
| **Description of Corrective Action:** The District will provide low-incidence language support to assist principals and staff who serve parents/guardians with limited English skills who speak low-incidence languages. This information will be housed at the Family Resource Center so that there is one place that principals and staff can receive assistance. A system for documenting the needs of low-incidence language speakers will be developed, shared and monitored. |
| **Title/Role(s) of Responsible Persons:**The Affirmative Action Officer | **Expected Date of Completion:**12/30/2015 |
| **Evidence of Completion of the Corrective Action:**Policies and procedures will be developed and implemented between the months of May and July so that parents who speak low-incidence languages are fully served within Cambridge Public Schools by September 2015. The Family Resource Center will provide oral interpretations when needed. |
| **Description of Internal Monitoring Procedures:** The Affirmative Action Officer will provide trainings for principals and the Family Resource Center to ensure that principals and staff understand the needs of families who speak low-incidence languages. Through Professional Development, principals will learn how to document the need for oral interpretations and will know where to access language help when needed. The Affirmative Action Officer will visit individual school sites to ensure that principals and staff are documenting the language needs of families and providing language services when necessary. The internal monitoring process will be completed by November, 2015. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Develop a system to identify any parent/guardian or student that requests or requires interpretation or translation in a low incident language. Provide evidence of staff training on the procedures for translation/interpretation for low incident languages and documentation of oral translations, which will include but not be limited to a training agenda, signed attendance sheets and copies of the materials presented. Please submit this to the Department on or before by October 29, 2015.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. Submit this information by October 29, 2015.Submit the results of an administrative review of translations and oral translation logs for parents whose home language survey indicates a need for translation/interpretation of a low incident language. This review can include special education, ELE, or documents from student cumulative files. Indicate the number of files reviewed at each level, the number found to be compliant, an explanation of the root cause for any continued noncompliance and a description of additional corrective actions taken by the district to address any identified noncompliance. Please submit this to the Department on or before by January 21, 2016.\*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s). |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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

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| **Criterion & Topic:** CR 9 Hiring and employment practices of prospective employers of students | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents indicated that the statement signed by employers recruiting at the high school to ensure compliance with applicable federal and state laws prohibiting discrimination in hiring or employment practices does not include gender identity as a protected category. |
| **Description of Corrective Action:** Statements signed by employers recruiting at the high school will ensure compliance with applicable federal and state laws prohibiting discrimination in hiring or employment practices by including gender identity as a protected category |
| **Title/Role(s) of Responsible Persons:**The Affirmative Action Officer of Cambridge Public Schools | **Expected Date of Completion:**08/30/2015 |
| **Evidence of Completion of the Corrective Action:**Evidence of the Corrective Action: Signed statements by employers recruiting at the high school will include gender identity as a protected class. |
| **Description of Internal Monitoring Procedures:** The Affirmative Action Officer will ensure compliance in all statements signed by high school recruiters with applicable federal and state laws prohibiting discrimination in hiring or employment practices by including gender identity as a protected category in all district communications. Further, the Affirmative Action Officer will monitor all district statements, including those used for high school recruitment processes, to ensure that gender identify is included as a protected category. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit a copy of the nondiscrimination statement that employers recruiting at the high school sign by October 29, 2015.Submit a 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. Submit this information by October 29, 2015. |
| **Progress Report Due Date(s):** 10/29/2015 |

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

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| **Criterion & Topic:** CR 10B Bullying Intervention and Prevention | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews indicated that not all newly hired staff members at the Peabody Elementary School have received training on the district's Bullying Prevention and Intervention Plan. |
| **Description of Corrective Action:** All staff, including those who are newly hired, should receive training on the district's Bullying Prevention and Intervention Plan. |
| **Title/Role(s) of Responsible Persons:**The Welcoming School Coordinator/School Climate and Bullying Prevention | **Expected Date of Completion:**12/30/2015 |
| **Evidence of Completion of the Corrective Action:**Through school training sessions scheduled to take place at the beginning of the school year, all staff will be provided Professional Development concerning the district's Bullying Prevention and Intervention Plan. Professional development through the Induction Process for new staff will also provide a specialized session for the understanding of school policy, including bullying prevention. All staff must sign acknowledgement forms that they have received bullying prevention information and that they understand and will adhere to the corresponding policy. |
| **Description of Internal Monitoring Procedures:** A collection and monitoring of the signed staff forms will provide the documentation for the provision of professional development designed to reduce and eliminate bullying within public schools. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Provide evidence of staff training on the Bullying Prevention and Intervention Plan at Peabody Elementary School, which will include but not be limited to a training agenda, signed attendance sheets and copies of the materials presented. Please submit this to the Department by October 29, 2015. 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. Submit this information by October 29, 2015. |
| **Progress Report Due Date(s):** 10/29/2015 |

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

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| **Criterion & Topic:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that written materials and other media used to publicize the district's schools do not consistently include gender identity as a protected category in the nondiscrimination notice. In addition, document review indicated that the district does not include the office address and phone number of the Title IX coordinator in its published materials to students and families. |
| **Description of Corrective Action:** All written materials and other media used to publicize the district's schools should consistently include gender identity as a protected category in the nondiscrimination notice. In addition, the district will include the office address and phone number of the Title IX coordinator in its published materials to students and families. |
| **Title/Role(s) of Responsible Persons:**Legal Counsel | **Expected Date of Completion:**09/30/2015 |
| **Evidence of Completion of the Corrective Action:**All written materials and other media used to publicize the district's schools will consistently include gender identity as a protected category in the nondiscrimination notice. The district will have include the office address and phone number of the Title IX coordinator in its published materials to students and families in its annual publication "Schools at a Glance." |
| **Description of Internal Monitoring Procedures:** The Affirmative Action Officer will review the district's written materials and other media used to publicize the district's schools to ensure that those documents consistently include gender identity as a protected category in the nondiscrimination notice and will ensure the inclusion of the office address and phone number of the Title IX coordinator in its published materials to students and families. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Provide evidence of dissemination and training for staff on the updated nondiscrimination statement with the added category of gender identity, including a training agenda, signed attendance sheets and copies of the materials by October 29, 2015.Also provide evidence that the office address and phone number of the Title IX coordinator in the published materials to students and families by October 29, 2015. |
| **Progress Report Due Date(s):** 10/29/2015  |

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

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| **Criterion & Topic:** CR 14 Counseling and counseling materials free from bias and stereotypes | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district's activities to ensure that counseling and counseling materials are free from bias and stereotypes do not include gender identity as a protected category. |
| **Description of Corrective Action:** Counseling and counseling materials should be free from bias and stereotypes and should include gender identity as a protected category. |
| **Title/Role(s) of Responsible Persons:**Affirmative Action Officer | **Expected Date of Completion:**12/30/2015 |
| **Evidence of Completion of the Corrective Action:**Counseling and counseling materials are free from bias and stereotypes and gender identity is included as a protected category. |
| **Description of Internal Monitoring Procedures:** The Affirmative Action Officer will review all counseling and counseling materials to ensure that they are free from bias and stereotypes and that gender identity is included as a protected category. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 14 Counseling and counseling materials free from bias and stereotypes | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Submit the procedures for the review of counseling and counseling materials that includes gender identity as a protected category by October 29, 2015.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. Submit this information by October 29, 2015. Submit a narrative of the results of a review of counseling materials by January 21, 2016. |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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

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| **Criterion & Topic:** CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated that the district has not developed a process to send an annual written notice to former students who have not yet earned their competency determination and who have not transferred to another school. |
| **Description of Corrective Action:** The district should develop a process to send an annual written notice to former students who have not yet earned their competency determination and who have not transferred to another school. |
| **Title/Role(s) of Responsible Persons:**High School Principal, Guidance Staff and Legal Counsel | **Expected Date of Completion:**09/30/2015 |
| **Evidence of Completion of the Corrective Action:**The district has in place a process to send an annual written notice to former students who have not yet earned their competency determination and who have not transferred to another school |
| **Description of Internal Monitoring Procedures:** The Affirmative Action Officer will ensure that policy and a written notice is developed for High School staff to send annually to former students who have not yet earned their competency determination who have not transferred to another school. The letter will be part of the Students Rights and Responsibilities Handbook. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 16 Notice to students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion | **Corrective Action Plan Status:** Partially Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** Amendments to M.G.L. c. 76, ss. 5, 18 (as amended by 2012, 222, Sec. 8 effective July 1, 2014; St. 1965, c. 741) are not reflected in the district's procedures. |
| **Department Order of Corrective Action:**Revise the district's procedures for students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion to ensure compliance with revised regulations. |
| **Required Elements of Progress Report(s):** Submit the district's revised procedures to ensure full compliance with all regulatory requirements for students 16 or over leaving school without a high school diploma, certificate of attainment, or certificate of completion, including notices. This progress report is due October 29, 2015.Submit evidence of training to appropriate high school staff, including principals, guidance counselors, and district administrators, including signed attendance sheets, agenda with date and name of presenter, and examples of materials. This progress report is due October 29, 2015.Submit a list of students who have not reached competency determination or transferred to another school within the last two years by January 21, 2016. |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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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:** A review of facilities at the Martin Luther King Jr. School demonstrated that English as a Second Language instruction is taught in a room that is not large enough for the six students enrolled and one adult; for example, students must move their chairs so that the door can be opened. Due to this limited space, the room does not have comparable materials as other classrooms in the building, such as white boards, computers, and books. |
| **Description of Corrective Action:** At the Martin Luther King Jr. School, English as a Second Language instruction should be taught in a room that is large enough for the six students enrolled and one adult. The room must be large enough to contain comparable materials as other classrooms in the building, such as white boards, computers, and books. |
| **Title/Role(s) of Responsible Persons:**Director of Facilities | **Expected Date of Completion:**08/15/2015 |
| **Evidence of Completion of the Corrective Action:**A room will be provided that is large enough to fit both adults and students so that access is equitable to other classrooms within the King Elementary School. Comparable materials such as white boards, computers, and books will be provided to teachers who teach and children who are receiving English as a Second Language instruction. |
| **Description of Internal Monitoring Procedures:** The Affirmative Action Officer will visit the King School in early August to ensure that an appropriate room will be available in time for the beginning of the school year and that materials such as white boards, computers, and books are available to teachers who teach and children who are receiving English as a Second Language instruction. A proper room will be in place by the start of school in September. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 23 Comparability of facilities | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Provide a floor plan of the Martin Luther King Jr School indicating where the English as a Second Language instruction was relocated by October 29, 2015.A site visit will be conducted by the Department to review the new location for ESL instruction at the Martin Luther King Jr. School on or before January 21, 2016. |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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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 indicated that individual teacher review of educational materials for simplistic and demeaning generalizations is not consistently implemented across schools. Additionally, staff interviews demonstrated that teachers at the Haggerty Elementary School are not familiar with the curriculum review process. |
| **Description of Corrective Action:** Teachers must be given the skills necessary to review educational materials for simplistic and demeaning generalizations and professional development for this review must be consistently implemented across schools. Additionally, all teachers, and particularly teachers at the Haggerty Elementary School, must receive professional development to become familiar with the curriculum review process. |
| **Title/Role(s) of Responsible Persons:**Assistant Superintendent for Curriculum and Instruction | **Expected Date of Completion:**02/15/2015 |
| **Evidence of Completion of the Corrective Action:**Teachers in all Cambridge Public Schools will have received professional development so that they are able to review educational materials for simplistic and demeaning generalizations. All teachers, and particularly those at the Haggerty Elementary School, will have received professional development so that they are familiar with the curriculum review process |
| **Description of Internal Monitoring Procedures:** The Affirmative Action Officer will ascertain that professional development has occurred through teacher sign-off sheets. This Professional Development will have provided teachers with the skills needed to review educational materials for simplistic and demeaning generalizations. Further, the Affirmative Action Officer will ascertain that all teachers, and particularly those at the Haggerty Elementary School, have received professional development so that they are familiar with the curriculum review process. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 24 Curriculum review | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**   |
| **Department Order of Corrective Action:**  |
| **Required Elements of Progress Report(s):** The district will submit the procedures for individual teacher review of educational materials for simplistic and demeaning generalizations that include gender identity by October 29, 2015. Provide evidence of training including agenda, handouts and signed attendance sheet that demonstrate that teachers and administrators have been trained in the review of educational materials for simplistic and demeaning generalizations by January 21, 2016. |
| **Progress Report Due Date(s):** 10/29/201501/21/2016  |

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

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| **Criterion & Topic:** CR 25 Institutional self-evaluation | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** A review of documents and staff interviews indicated the district does not annually evaluate all aspects of its K-12 program 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:** The Cambridge Public Schools should annually evaluate all aspects of its K-12 program 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:**Superintendent of Schools, Assistant Superintendent for Curriculum and Learning | **Expected Date of Completion:**12/30/2015 |
| **Evidence of Completion of the Corrective Action:**The Cambridge Public Schools will have provided an annual report for the Cambridge School Committee by December, 2015. Cambridge Public Schools will have used the previous school year's student outcome data and will have evaluated all aspects of the K-12 program 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 Internal Monitoring Procedures:** The annual report Student Outcomes Report will be completed by December 30, 2015. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 25 Institutional self-evaluation | **Corrective Action Plan Status:** Approved **Status Date:** 04/23/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** Develop and submit a plan for the annual review of all aspects of CPS' K-12 programming 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 extracurricular activities by October 29, 2015.Provide the results of the annual review for equal access from the previous year's student participation outcomes by January 21, 2016. |
| **Progress Report Due Date(s):** 10/29/201501/21/2016 |

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

District: Cambridge Public Schools

Corrective Action Plan Forms

Program Area: Career/Vocational Technical Education

Prepared by: Dr. Michael V. Ananis

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: March 11, 2016**

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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:** *Document review and interviews revealed that the district provides information concerning career/vocational technical education programs to students and to their parents/guardians. However, the notice of nondiscrimination statement in the admission policy, admission application, recruitment materials and program brochures must be revised to include gender identity as a protected category. (Legal Citation: M.G.L. c.76 section 5,2)* |
| **Narrative Description of Corrective Action:** The school district will convene a workgroup to examine the district’s CVTE admission policy, admission application, recruitment materials and program brochures for compliance with statutory and regulatory descriptions of protected categories in the statement of non-discrimination and to make recommendations where appropriate. All non-discrimination statements will be revised to include **gender identity** as a protected category. The new non-discrimination statements and all of the materials in which they appear will be distributed to all CVTE staff who will be trained on its effective implementation prior to the start of the new school year.  |
| **Title/Role of Person(s) Responsible for Implementation:** RSTA Executive DirectorDr. Michael V. Ananis | **Expected Date of Completion for Each Corrective Action Activity:** September 1, 2015 |
| **Evidence of Completion of the Corrective Action:** Minutes of the workgroup meetings as well as the recommended non-discrimination statement will be submitted as evidence. Sign-up sheets, training materials, and notes from Training sessions for CVTE staff on the effective implementation will serve as evidence.  |
| **Description of Internal Monitoring Procedures:** All future print and online non-discrimination statements for CVTE will be reviewed by the Executive Director Dr. Michael Ananis to insure compliance with current regulatory and statutory language. The Executive Director will insure that changes to regulatory language will trigger additional workgroups who will be charged with review and revision responsibilities. New CVTE staff will receive adequate training in the implementation of the non-discrimination statement. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 4 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action:** None required. |
| **Required Elements of Progress Report(s):** The district will provide documentation that specified meetings have occurred and will provide samples of updated documents reflecting the required language.  |
| **Progress Report Due Date(s): October 29, 2015** |

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| **COORDINATED PROGRAM REVIEW****CORRECTIVE ACTION PLAN****(To be completed by school district/charter school)** |
| **Criterion & Topic:** CVTE 5 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Document review and interviews revealed that the district provides information concerning career/vocational technical education programs to students and to their parents/guardians. However, the notice of nondiscrimination statement in the admission policy, admission application, recruitment materials and program brochures must be revised to include gender identity as a protected category. (Legal Citation: M.G.L. c.76 section 5,2)* |
| **Narrative Description of Corrective Action:** The school district will convene a workgroup to examine the district’s CVTE admission policy, admission application, recruitment materials and program brochures for compliance with statutory and regulatory descriptions of protected categories in the statement of non-discrimination and to make recommendations where appropriate. All non-discrimination statements will be revised to include **gender identity** as a protected category. The new non-discrimination statements and all of the materials in which they appear will be distributed to all CVTE staff who will be trained on its effective implementation prior to the start of the new school year.  |
| **Title/Role of Person(s) Responsible for Implementation:** RSTA Executive DirectorDr. Michael V. Ananis | **Expected Date of Completion for Each Corrective Action Activity:** September 1, 2015 |
| **Evidence of Completion of the Corrective Action:** Minutes of the workgroup meetings as well as the recommended non-discrimination statement will be submitted as evidence. Sign-up sheets, training materials, and notes from Training sessions for CVTE staff on the effective implementation will serve as evidence.  |
| **Description of Internal Monitoring Procedures:** All future print and online non-discrimination statements for CVTE will be reviewed by the Executive Director Dr. Michael Ananis to insure compliance with current regulatory and statutory language. The Executive Director will insure that changes to regulatory language will trigger additional workgroups who will be charged with review and revision responsibilities. New CVTE staff will receive adequate training in the implementation of the non-discrimination statement. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
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| **Criterion:** CVTE 5 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action:** None required. |
| **Required Elements of Progress Report(s):** The district will provide documentation that specified meetings have occurred and will provide samples of updated documents reflecting the required language. |
| **Progress Report Due Date(s): October 29, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** CVTE 6 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Document review and interviews revealed that the district has two separate Chapter 74 Exploratory Programs. One is a general exploratory program that is mentioned in its admissions policy; the other is an exploratory program geared towards Bio-Technology, Engineering, and Information Technology (BE-IT). Students can only participate in one of the exploratory programs. The second exploratory program option (BE-IT) is not identified in the district’s admission policy. The district is not in compliance with its published admission policy. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (4) e)* |
| **Narrative Description of Corrective Action:** A workgroup comprised of CVTE faculty and Guidance staff will convene to consider the existing admission policy and consider if the district’s CVTE admission policy should be revised to incorporate the BE-IT Exploratory program into it. If the workgroup decides to add BE-IT, a recommendation with the Executive Director’s and Superintendent’s recommendation will be sent to the School Committee for their review and action. |
| **Title/Role of Person(s) Responsible for Implementation:** Executive Director of RSTA, Dr. Mike Ananis, Cambridge School Committee | **Expected Date of Completion for Each Corrective Action Activity:** December 30, 2015 |
| **Evidence of Completion of the Corrective Action:** Minutes of the workgroup including participants, considerations for exploratory programming, and recommended changes regarding exploratory options in the admissions policy will be submitted as evidence. School Committee agenda and minutes regarding its deliberations on the exploratory program in the admission policy will be submitted as evidence.  |
| **Description of Internal Monitoring Procedures:** The Executive Director will monitor the admission policy to be sure that subtle or more significant modifications in courses and other programs and services are not inadvertently absent from the admission policy; appropriate steps will be taken to bring policy and practice into alignment. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 6 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action:** None required. |
| **Required Elements of Progress Report(s):** The district will provide reports on the progress of the workgroup that is being developed to determine how to integrate the BE-It Exploratory Program into the district’s main exploratory program. |
| **Progress Report Due Date(s): January 21, 2016** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** CVTE 7 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Document review and interviews indicate that the Bio-Technology, Engineering, and Information Technology (BE-IT) Exploratory does not include exposure to at least one program that would prepare male students for a career nontraditional for their gender. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (4) e)* |
| **Narrative Description of Corrective Action:** The Executive Directorwill convene a workgroup of RSTA faculty to determine programs in RSTA that are considered non-traditional for male students. This workgroup will consider ways of incorporating a program that is non-traditional for male students into the BE-IT Exploratory course. Based upon the recommendations of the workgroup, the course description will be revised and published, as appropriate, to include exposure to at least one program that would prepare male students for a career nontraditional for their gender. |
| **Title/Role of Person(s) Responsible for Implementation:** Executive Director of RSTA Dr. Mike Ananis | **Expected Date of Completion for Each Corrective Action Activity:** September 1, 2015 |
| **Evidence of Completion of the Corrective Action:** Minutes of the workgroup will be maintained and submitted as evidence. The selection of at least on non-traditional program for males will be selected and a curriculum in that program for exploratory will be developed and the course description rewritten and submitted as evidence.  |
| **Description of Internal Monitoring Procedures:** The Executive Director will monitor all exploratory courses annually before they are published in the course catalog and will examine all course curriculum to be sure that all students have the opportunity to explore a career that is non-traditional for their gender. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 7 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action:** Not required. |
| **Required Elements of Progress Report(s):** The district will provide reports on the progress of the workgroup that is being developed to determine how to integrate nontraditional by gender program options into the BE-It Exploratory Program. |
| **Progress Report Due Date(s): October 29, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** CVTE 10 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Document review indicated that although the district has program advisory committees, not all committees have the representation required by Vocational Technical Education regulations. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (1) 1)* |
| **Narrative Description of Corrective Action:** The RSTA Executive Director and the RSTA faculty who serve as facilitators of their respective Program Advisory Committees will identify the required groups that are not represented on any PAC and recruit members from the community to serve on the advisory committee(s) so as to render all PACs as being in compliance with the regulations to include representatives from those segments of the community that are required to be represented. |
| **Title/Role of Person(s) Responsible for Implementation:** Executive Director of RSTA Dr. Mike Ananis and the RSTA faculty who serve as facilitators to the various Program Advisory Committees (PACs) | **Expected Date of Completion for Each Corrective Action Activity:** September 1, 2015 |
| **Evidence of Completion of the Corrective Action:** Letters of invitation to members of under or not represented groups that are required as members of PACs. Mass DESE forms listing all members of all PACs indicating membership representing all required groups.  |
| **Description of Internal Monitoring Procedures:** At the end of each school year, the Executive Director will review with staff facilitators and chairpersons of all PACs to determine which members will be returning to the PAC the following year, to determine which if any groups are non-or under-represented, and to recruit from the community individuals to serve on the PACs who represent all required groups of people. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 10 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action:** Not required. |
| **Required Elements of Progress Report(s):** The district will provide the Department with updates on its progress to include all required representation on its Program Advisory Committees and will provide updated Program Advisor Committees with all required members. |
| **Progress Report Due Date(s): October 29, 2015** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic:** CVTE 18 | **Rating:** Partially Implemented |
| **Department CPR Finding:** *Document review and interviews revealed that a Chapter 74 program (Radio & Television Broadcasting) is currently being taught by a long term substitute who is not appropriately licensed to teach the course. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (5))* |
| **Narrative Description of Corrective Action:** The teacher for the Chapter 74 program Media Technology (Radio & TV Broadcasting) Dacia Antunes holds a DESE Professional License number 437305, which expires 7/10/2017. She went on a maternity leave October 14, 2014. We hired as a substitute Ross Matthei who was already teaching in a related CPSD program called Media Arts Studio which is located in the same building. His background education and experience matched well with the duties of the Media Tech teacher plus he had worked in the Cambridge Public Schools as a Media Specialist since September 2013 and he was very familiar with the Media Tech studio, the curriculum and Framework standards of the program, the equipment used there, and most of all, the students in this program. Matthei was initially hired to teach the brief period of the maternity leave, but Antunes requested and was granted an extension of her leave to May 18, 2015. She will return to teaching May 19, 2015.  |
| **Title/Role of Person(s) Responsible for Implementation:** RSTA Executive Director Dr. Michael V. Ananis | **Expected Date of Completion for Each Corrective Action Activity:** June 1, 2015 |
| **Evidence of Completion of the Corrective Action:** Statement that the teacher on leave has returned and the course is being taught by a properly licensed teacher.  |
| **Description of Internal Monitoring Procedures:** The Executive Director will make sure that every teacher, including extended term substitutes, are properly licensed to teach the assigned course, or that they obtain a DESE waiver. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 18 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action:** Not required. |
| **Required Elements of Progress Report(s):** Not required. |
| **Progress Report Due Date(s):** No progress reports are required. |

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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:** *A site visit by the Office of Career/Vocational/Technical Education safety specialist revealed that not all instructional facilities used for career/vocational technical education meet current occupational standards.  The Office for Career/Vocational Technical Education will send a Safety Survey Report, which will include details specific to each program, to Superintendent Young under separate cover.(Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (3)(d))* |
| **Narrative Description of Corrective Action:** Responses to the Safety Survey Report are sent to Dave Edmonds in the DESE. |
| **Title/Role of Person(s) Responsible for Implementation:** Dr. Michael V. Ananis | **Expected Date of Completion for Each Corrective Action Activity:** June 1, 2015 |
| **Evidence of Completion of the Corrective Action:**        |
| **Description of Internal Monitoring Procedures:**       |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 20 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action:** Not required. |
| **Required Elements of Progress Report(s):** The district will file monthly updates with the OCVTE Safety Specialist until all safety findings are ameliorated. |
| **Progress Report Due Date(s):** Monthly, to the OCVTE Safety Specialist. |

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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:** *A site visit by the Office of Career/Vocational/Technical Education safety specialist revealed that not all instructional equipment used for career/vocational technical education meets current occupational standards.  The Office for Career/Vocational Technical Education will send a Safety Survey Report, which will include details specific to each program, to Superintendent Young under separate cover. (Legal Citation: Vocational Technical Education Regulations 603 CMR 4.03 (3)(d))* |
| **Narrative Description of Corrective Action:** Responses to the Safety Survey Report are sent to Dave Edmonds in the DESE. |
| **Title/Role of Person(s) Responsible for Implementation:** Dr. Michael V. Ananis | **Expected Date of Completion for Each Corrective Action Activity:** June 1, 2015 |
| **Evidence of Completion of the Corrective Action:**        |
| **Description of Internal Monitoring Procedures:**       |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion:** CVTE 21 | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action:** Not required. |
| **Required Elements of Progress Report(s):** The district will file monthly updates with the CVTE Safety Specialist until all safety findings are ameliorated. |
| **Progress Report Due Date(s):** Monthly, to the OCVTE Safety Specialist. |