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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: Conway

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 03/19/2015.

**Mandatory One-Year Compliance Date:** **03/19/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
| --- | --- | --- |
| SE 18A | IEP development and content | Partially Implemented |
| SE 18B | Determination of placement; provision of IEP to parent | Partially Implemented |
| SE 20 | Least restrictive program selected | Partially Implemented |
| SE 22 | IEP implementation and availability | Partially Implemented |
| SE 32 | Parent advisory council for special education | Partially Implemented |
| SE 36 | IEP implementation, accountability and financial responsibility | Partially Implemented |
| SE 55 | Special education facilities and classrooms | Partially Implemented |
| CR 10A | Student handbooks and codes of conduct | Partially Implemented |
| CR 10B | Bullying Intervention and Prevention | Partially Implemented |
| CR 12A | Annual and continuous notification concerning nondiscrimination and coordinators | Partially Implemented |

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

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| **Criterion & Topic:**  SE 18A IEP development and content | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that the IEP Team does not consistently consider and specifically address in the IEP, the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing when the student's disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing. | | |
| **Description of Corrective Action:**  District will review procedure to address in the IEP, the skills and proficiency needed to avoid and respond to bullying, harassment, or teasing when the student's disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing.  District will present procedure and train all staff on procedure. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education- Karen Ferrandino  Principal- Judith Siciliano | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Copy of procedure  Sign in and agenda for training | | |
| **Description of Internal Monitoring Procedures:**  Upon proposing the IEP central office will review IEPS to ensure bullying statement is completed in IEP. 1 xs a year Special Education Director will randomly review files to ensure that 100% compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18A IEP development and content | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district must provide evidence of completion of corrective action for the individual students whose records were identified as noncompliant at the time of the review outlined on the Student Record Issues Worksheet. | | |
| **Department Order of Corrective Action:**  The district must reconvene IEP Teams for the three students whose records the Department found out of compliance at the record review, to consider and specifically address in the IEP the skills and proficiencies needed to avoid and respond to bullying when the student's disability affects social skills development or makes them vulnerable to bullying. Evidence should include the meeting invitation (N3), Team attendance sheet (N3A), a summary of the discussion regarding the student's services and any amendments to the IEP agreed on by the Team. | | |
| **Required Elements of Progress Report(s):**  The district will submit a copy of the set of procedures developed to ensure that the IEP Team consistently considers and specifically addresses in the IEP, the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing when the student's disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing by June 23, 2015.  The district will submit evidence to show that the issues identified for the three students the Department identified on the Student Record Issues Worksheet have been resolved by June 23, 2015.  The district will submit copies of the agenda, dated attendance sheets with staff role and signature as evidence that all staff have been trained on the new procedures by September 25, 2015.  The district must conduct a review of records for students with IEPs after all corrective actions are implemented, for evidence that the IEP Team consistently and specifically addressed in the IEP, the skills and proficiencies needed to avoid and respond to bullying, harassment, or teasing when the student's disability affects social skills development or makes him or her vulnerable to bullying, harassment, or teasing by December 2, 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their roles(s) and signature(s). | | |
| **Progress Report Due Date(s):**  06/23/2015  09/25/2015  12/02/2015 | | |

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

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| **Criterion & Topic:**  SE 18B Determination of placement; provision of IEP to parent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that following the development of the IEP, the district does not consistently provide the parent with two (2) copies of the proposed IEP and proposed placement along with the required notice, within 3-5 days; or as an alternative, a summary of the key agreements of the meeting which must, at a minimum, include a completed service delivery grid describing the types and amounts of special education and/or related services proposed by the district and a statement of the major goal areas associated with these services, with the district's completed proposed IEP provided to the parent within 10 school days.  Student record review, interviews and observations indicate that for students in the WINGS program, the services indicated on the service delivery grid of their IEPs do not correspond to where the services are actually being delivered. The students receive some of their services in the general education classroom; however the service delivery grid indicates all direct services in section C of the grid (Special Education and Related Services in Other Settings). See also SE22. | | |
| **Description of Corrective Action:**  1) Develop clear procedures on providing the parents with a meeting summary form that includes service delivery grid, statement of major goal areas and/or key decisions made at the meeting. 2) Provide statement in N1 reflecting that 2 copies of IEP have been sent to parent/s. 3) Complete a staff/faculty training that reviews procedure of providing parent/s with meeting summary and including statement referencing that 2 copies of IEP have been sent to parent.  Training to review that IEP grid needs to correspond to where the services are actually being delivered. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director - Karen Ferrandino | | **Expected Date of Completion:**  03/19/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of procedures  Copy of training sign in and agenda  review student schedules. | | |
| **Description of Internal Monitoring Procedures:**  When Liaisons send IEP to SPED Director for review each IEP will be checked to ensure that a copy of meeting summary is included with parents signature.  Annually SPED Director will review WINGS students schedules to ensure the correspond with services on grid. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 18B Determination of placement; provision of IEP to parent | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district must provide evidence of completion of corrective action for the individual students whose records were identified as noncompliant at the time of the review outlined on the Student Record Issues Worksheet. | | |
| **Department Order of Corrective Action:**  The district must reconvene IEP Teams for the three students whose records the Department found out of compliance at the record review, to consider the services the student is receiving, the type of settings in which services are to be provided, as well as the location at which services are to be provided, and that this is reflected in the service delivery grid for students. Evidence should include the meeting invitation (N3), Team attendance sheet (N3A), a summary of the discussion regarding the student's services and any amendments to the IEP agreed on by the Team. | | |
| **Required Elements of Progress Report(s):**  The district will submit a copy of the set of procedures developed to ensure that a parent is provided two copies of the proposed IEP and proposed placement immediately following the development of the IEP. The procedures must include when providing a parent a summary at the conclusion of the IEP Team meeting, the summary includes a service delivery grid, a statement of major goals and any key decisions made at the meeting. These procedures will be submitted to the Department by June 23, 2015.  The district will submit evidence to show that the issues identified for the three students the Department identified on the Student Record Issues Worksheet have been resolved by June 23, 2015.  The district will submit copies of the agenda, dated attendance sheets with staff role and signature as evidence that responsible staffs have been trained on the new procedures and that the district reviewed with relevant staff that the IEP grid must correspond to where services are being delivered. Evidence of training will be submitted to the Department by September 25, 2015.  The district must conduct a review of records for students whose IEP Team meetings are conducted after all corrective actions are implemented, for evidence that 2 copies of the proposed IEP and proposed placement are provided to the parent and the summary includes a service delivery grid, a statement of major goals and any key decisions made at the meeting. The record review must include a review of records for all students in the WINGS program for evidence that the service delivery grid of their IEPs correspond to where the services are actually being delivered. The results of the record review will be submitted to the Department by December 2, 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their roles(s) and signature(s). | | |
| **Progress Report Due Date(s):**  06/23/2015  09/25/2015  12/02/2015 | | |

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

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| **Criterion & Topic:**  SE 20 Least restrictive program selected | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that the Nonparticipation Justification statement on a student's IEP is not individualized to each student and does not consistently state how the nature or severity of the student's disability limits his or her participation in the regular education setting, or how the student's education in a less restrictive environment could not be achieved with the use of supplementary aids and services. | | |
| **Description of Corrective Action:**  Procedures for completing the nonparticipation justification of the IEP will be reviewed with all faculty members. The drop down menu in special education data base will be removed as an option to completing the nonparticipation justification. This action will require that each non participation justification will be individualized and include how the nature or severity of the student's disability limits his or her participation in the regular education setting, or how the student's disability limits his or her participation in the regular education setting, or how the student's education could not be achieved with the use of supplemental aides and services. | | |
| **Title/Role(s) of Responsible Persons:**  Karen Ferrandino- Director of Special Education  Judy Siciliano - Principal | | **Expected Date of Completion:**  11/15/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of procedure for completing nonparticipation justification section of IEP.  Sign in sheet and agenda from training on procedures | | |
| **Description of Internal Monitoring Procedures:**  Each IEP will be reviewed by Special Education Office to ensure that the nonparticipation justification includes how the nature and severity of the student's disability limits his or her participation in the regular education setting, or how the student's education in a less restrictive environment could not be achieved with the use of supplementary aids and services. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 20 Least restrictive program selected | **Corrective Action Plan Status:** Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district will submit a copy of the set of procedures developed to ensure that the nonparticipation justification statement on a student's IEP is individualized to the student and states how the nature or severity of the student's disability limits his or her participation in the regular education setting, or how the student's education could not be achieved with the use of supplementary aids and services by June 23, 2015.  The district will submit copies of the agenda, dated attendance sheets with staff role and signature as evidence that responsible staff have been trained on the new procedures by September 25, 2015.  The district must conduct a review of records for students whose IEP meetings are conducted after all corrective actions are implemented, for evidence that the nonparticipation justification statement is individualized and states how the nature or the severity of the student's disability limits his or her participation in the regular education setting, or how the student's education can not be achieved with the use of supplementary aids and services by December 2, 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 records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their roles(s) and signature(s). | | |
| **Progress Report Due Date(s):**  06/23/2015  09/25/2015  12/02/2015 | | |

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

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| **Criterion & Topic:**  SE 22 IEP implementation and availability | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Student record review and interviews indicate that services accepted on IEPs for autism specialist consultation are not being provided since the position was eliminated, and parents have not been immediately informed in writing of the actions the school district is taking to address the lack of personnel and its offer of alternative methods to meet the goals on the accepted IEP. See also SE 18B. | | |
| **Description of Corrective Action:**  District will review records to determine which students have Autism Specialist on IEP, District will inform parents and offer alternative methods to meet the goals, and amend the IEP accordingly. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director - Karen Ferrandino  Principal- Judith Siciliano | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  List of students on IEPs by service provider. | | |
| **Description of Internal Monitoring Procedures:**  Special Education Director will review proposed IEP grids prior to sending to parents. If the District does not have a position be job title on IEP, SPED Director will discuss implementation with District. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 22 IEP implementation and availability | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  The district must provide evidence of completion of corrective action for the individual students whose records were found as noncompliant at the time of the review outlined on the Student Record Issues Worksheet. See SE 18B | | |
| **Department Order of Corrective Action:**  The district must reconvene IEP Teams for the two student whose records the Department found that the Department found of out of compliance at the record review to discuss services accepted on IEPs for autism specialist consultation that were not being provided and parents were not immediately informed in writing of actions the district is taking or its offer of alternative methods to meet the goals on the IEP. Evidence should include the meeting invitation (N3), Team attendance sheet (N3A), a summary of the discussion regarding the student's services and any amendments to the IEP agreed on by the Team. | | |
| **Required Elements of Progress Report(s):**  The district will submit evidence to show that the issues identified for the two students the Department identified on the Student Record Issues Worksheet have been resolved by June 23, 2015.  The district must conduct a review of records for students whose IEP Team meetings are conducted after all corrective actions are implemented, for evidence that services accepted on IEPs are being provided or parents are informed in writing of the actions the school district is taking to address the lack of personnel and its offer of alternative methods to meet the goals on the accepted IEP by December 2, 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 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):**  06/23/2015  12/02/2015 | | |

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

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| **Criterion & Topic:**  SE 32 Parent advisory council for special education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Documents and interviews indicate that Conway Public Schools has not established its own Parent Advisory Council (PAC), but participates as a member of the larger Frontier Regional/School Union 38 PAC. The district has not applied to the Department for a waiver to implement their PAC in this manner. | | |
| **Description of Corrective Action:**  Frontier Regional School District and Union #38 school Districts share central office administrators and staff and functions as 1 school district in many ways. Parents of the 5 schools within the District prefer to have 1 PAC. The District provides a PAC coordinator to assist parents in scheduling events, sharing concerns, and coordinating parents request for information and training. The District was found out of compliance because there is 1 PAC for the 5 schools/districts in the union. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director - Karen Ferrandino | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  District will complete PQA's Alternative Compliance Waiver pursuant to 603 CMR 28.05 to recognize regional PAC. | | |
| **Description of Internal Monitoring Procedures:**  Approved Waiver | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 32 Parent advisory council for special education | **Corrective Action Plan Status:** Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district must submit a copy of the letter from the Department approving a waiver for the 2015-2016 school year specific to the regulation requiring the district to establish a parent advisory council on special education by September 25, 2015.  Please see the Administrative Advisory SPED 2015-1: Special Education Parent Advisory councils, Acceptable Alternatives, and Use of Social Media: www.doe.mass.edu/sped/advisories/2015-1.html | | |
| **Progress Report Due Date(s):**  09/25/2015 | | |

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

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| **Criterion & Topic:**  SE 36 IEP implementation, accountability and financial responsibility | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  See SE 22. | | |
| **Description of Corrective Action:**  District will review records to determine which students have Autism Specialist on IEP, District will inform parents and offer alternative methods to meet the goals, and amend the IEP accordingly. | | |
| **Title/Role(s) of Responsible Persons:**  Special Education Director- Karen Ferrandino  Principal - Judith Siciliano | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  List of students on IEPs by service provider. | | |
| **Description of Internal Monitoring Procedures:**  Special Education Director will review proposed IEP grids prior to sending to parents. If the District does not have a position be job title on IEP, SPED Director will discuss implementation with District. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 36 IEP implementation, accountability and financial responsibility | **Corrective Action Plan Status:** Partially Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  See SE 22. | | |
| **Department Order of Corrective Action:**  See SE 22. | | |
| **Required Elements of Progress Report(s):**  See SE 22. | | |
| **Progress Report Due Date(s):**  06/23/2015  12/02/2015 | | |

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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 and interviews indicate that the related service spaces (Speech and Language, Occupational Therapy and Physical Therapy) and the substantially-separate classroom (WINGS Program) are identified with signs and thus, stigmatize the eligible students. | | |
| **Description of Corrective Action:**  Signs on related service spaces and the substantially separate program (WINGS Program) will be removed. | | |
| **Title/Role(s) of Responsible Persons:**  Director of Special Education - Karen Ferrandino  Principal - Judy Siciliano | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Documentation of removed signs. | | |
| **Description of Internal Monitoring Procedures:**  Walk through will be completed 2 times a year to ensure labeling is consistent throughout school. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 55 Special education facilities and classrooms | **Corrective Action Plan Status:** Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district will schedule a date with the Department to conduct an onsite visit during the week of September 14, 2015, to verify the related service spaces and the WINGS Program are not identified by signs. | | |
| **Progress Report Due Date(s):**  09/25/2015 | | |

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

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Document review and interviews indicate that the district's nondiscrimination policy does not contain the required protected category of gender identity. | | |
| **Description of Corrective Action:**  Districts Non-Discrimination Policy has not been amended to include the protected category of gender identity. District will update the Non-Discrimination Policy to include gender identity. The updated policy will be reviewed by the School Committee at September meeting and voted on at October 2015 meeting. Opening day of school non-discrimination training will occur and include update on gender identity as protected category. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent of Schools - Marti Barrett  Principal - Judith Siciliano | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Copy of updated policy | | |
| **Description of Internal Monitoring Procedures:**  Updated policy will be included in policy handbook and Principals will review policy annually with all staff and faculty. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district will submit to the Department a copy of the proposed nondiscrimination policy that includes the protected category of gender identity by June 23, 2015.  The district will submit to the Department copies of the agenda and dated attendance sheets with staff role and signature as evidence that all staff have been trained on the nondiscrimination policy with the addition of gender identity as a protected category by September 25, 2015.  The district will submit to the Department a copy of the updated nondiscrimination policy, with the protected category of gender identity added, approved by the School Committee by December 2, 2015. | | |
| **Progress Report Due Date(s):**  06/23/2015  09/25/2015  12/02/2015 | | |

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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:**  Document review indicates the Bullying Prevention and Intervention Plan (Plan) was updated to include amendments to the anti-bullying law, however documents and interviews also indicate that recent professional development has not been implemented and annual written notice of the Plan has not provided to all staff. | | |
| **Description of Corrective Action:**  Full faculty training on the anti-Bullying Law will be completed and plan will be provided to staff annually | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent of schools- Marti Barret  Principal - Judith Siciliano | | **Expected Date of Completion:**  11/15/2015 |
| **Evidence of Completion of the Corrective Action:**  .  Agenda and sign in for training. Faculty will sign off on receipt of written notice of the plan. | | |
| **Description of Internal Monitoring Procedures:**  Documentation of faculty sign off on receipt of written notice. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district will submit to the Department copies of the agenda, dated attendance sheets with staff role and signature as evidence that all personnel have been trained on the amendments to the anti-bullying law by September 25, 2015.  The district will submit documentation of faculty sign off showing that all staff have been provided written notice of the Plan by September 25, 2015. | | |
| **Progress Report Due Date(s):**  09/25/2015 | | |

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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 documentation and interviews indicate that written materials and other media used to publicize the district do not include the required protected category of gender identity. | | |
| **Description of Corrective Action:**  All written materials and media that include equal opportunity statements and non-discrimination statements will be amended to include the required protected category of gender identity | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent - Marti Barrett  Principal - Judith Siciliano | | **Expected Date of Completion:**  03/15/2015 |
| **Evidence of Completion of the Corrective Action:**  Copies of materials and media that include equal opportunity statements and non-discrimination statements with required protected category of gender identity | | |
| **Description of Internal Monitoring Procedures:**  All materials that are sent out to public and media will be reviewed to ensure protected category of gender identity is included in the non-discrimination statements. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date:** 05/13/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  The district will submit a sample copy of a document with the updated notice included, and a list of materials and publications that contain the notice that the district utilizes to publicize the district's school to ensure that written materials and other media include the protected category of gender identity by June 23, 2015. | | |
| **Progress Report Due Date(s):**  06/23/2015 | | |

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

District: Conway Public Schools

Corrective Action Plan Review

Program Area: English Learner Education

Prepared by: District Director of ELE

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: May 5, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** | | | |
| **Criterion & Topic: ELE 10 Parent Notification** | | | **Rating: Partially Implemented** |
| **Department CPR Finding:** *Document review indicates the notice to be mailed to the parents or guardians if a student is identified as an ELL (English language learner)student, and annually thereafter, does not inform the parents of the following: the method of instruction; the specific exit requirements; the parents’ right to apply for a waiver, and if the student has additional educational needs that require special education services how the Title III program, if available, will meet the objectives of the Individualized Education Program (IEP).* | | | |
| **Narrative Description of Corrective Action:**  District forms have been created and/or updated and published in the district ELE program guide completed in December 2014. This guide was co-authored by the district ESL teachers and director, distributed and reviewed with the district administrative team and all school secretaries in the spring of 2015.  Beginning in May, 2015 the district Director of ELE will work collaboratively with district ESL teachers and principals to ensure that updated forms contained in the district English Language Programming Guide are distributed to parents in a timely manner, understood and signed by parents, and stored in student record files. The following forms are now published in the district guide:  Form 8: Parent/Guardian letter evaluation of newly enrolled students  Form 9: Parent Guardian letter: Annual Assessment  Form 10: School District program waiver  Form 11: Parent/Guardian Declines Services  Form 12: Parent Guardian Waiver application for Alternative ELL Program  Form 12: Parent Guardian letter W-APT and ACCESS testing Schedules  Form 13: Parent/Guardian Letter: W-APT and ACCESS Testing Schedules  Form 14: Parent/Guardian Letter W-APT  Form 15: Progress reports and descriptions of Levels for Identifying ELLS  Form 16: Parent/Guardian Letter: When student is proficient in English | | | |
| **Title/Role of Person(s) Responsible for Implementation:** District Director of ELE | | **Expected Date of Completion for Each Corrective Action Activity:**  January, 2016 | |
| **Evidence of Completion of the Corrective Action:**  Student records will contain appropriate documentation. | | | |
| **Description of Internal Monitoring Procedures:** The district Director of ELE will review student records on a quarterly basis to ensure that appropriate documentation of parent notification of program related information for ELL students is maintained. | | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION  **(To be completed by the Department of Elementary and Secondary Education)** | | | |
| **Criterion: ELE 5 Parent Notification** | **Status of Corrective Action:**  Approved  Partially Approved  Disapproved | | |
| **Basis for Partial Approval or Disapproval: N/A** | | | |
| **Department Order of Corrective Action: N/A** | | | |
| **Required Elements of Progress Report(s):** Please submit a copy of the new ELL Parent Notification Form (s) that will be utilized by the district to annually notify parents of:   1. The reasons for identification of the student as ELL; 2. The child’s level of English proficiency; 3. Program placement and/or the method of instruction used in the program; 4. How the program will meet the educational strengths and needs of the student; 5. How the program will specifically help the child learn English; 6. The specific exit requirements; 7. The parent’s right to apply for a waiver, or to decline to enroll their child in the program; and 8. If the student has additional educational needs that require special education services how the Title III program will meet the objectives of the Individualized Education Program (IEP).   Submit the Form(s) by **June 30, 2015.**  Please see a template for the Parent Notification Form at [www.doe.mass.edu/ell/resources.html](http://www.doe.mass.edu/ell/resources.html)**.**  Submit the results of an ELL student record review to ensure that the parent notification letter is sent annually and contains all required elements. Report the number of records reviewed and the number of records in compliance. For any records found to be out of compliance, the district must conduct a root cause analysis of the noncompliance and provide a description of the root cause along with a description of the district’s plan to remedy remaining non-compliance by **November 12, 2015**.  **\*Please note when conducting the internal monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the records reviewed; b) Date of the review; c) Name of person(s) who conducted the review, with their role(s) and signature(s).** | | | |
| **Progress Report Due Date(s): June 30, 2015; November 12, 2015** | | | |