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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: Hopedale

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 09/10/2015.

**Mandatory One-Year Compliance Date:** **09/10/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 40 | Instructional grouping requirements for students aged five and older | Partially Implemented |
| CR 7 | Information to be translated into languages other than English | Partially Implemented |
| CR 17A | Use of physical restraint on any student enrolled in a publicly-funded education program | Partially Implemented |

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

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| **Criterion & Topic:** SE 40 Instructional grouping requirements for students aged five and older | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Observations and staff interviews revealed that instructional groupings for students on IEPs in Grades 2-3 Academic Resource Room, 208B, at the Memorial Elementary School exceed the group size requirements for eligible students assigned to instructional groupings outside of the general education classroom for 60% or less of the student's school schedule as follows:Instructional Period # of Teachers # of Aides # of StudentsMonday 8:45-9:15 1 1 14Tuesday 8:45-9:00 1 1 15 9:00-9:15 1 1 13Wednesday 9:15-10:00 1 1 13 Thursday 8:45-9:00 1 1 15Friday 8:45-9:00 1 1 13 9:00-9:15 1 1 16 |
| **Description of Corrective Action:** This finding resulted from the staffing structure in one classroom, where it was assumed that the presence of a 1-1 aide could justify the enrollment numbers at those times. DESE informed us that the 1-1 aide could not be counted as support to more than one student, thus raising the ratio beyond regulatory limits. This misunderstanding will be corrected and communicated to instructional staff as follows: Instructional staff will participate in training regarding size limitation requirements for instructional groupings outside of the general educational classroom. Training will consist of review of regulations, and completion of a standard template for daily and period schedules that will require input of staff names and number of students attending each period. Staff will be required to submit these schedule templates to building administrators, who will review for compliance. Staff will also be given instructions about how to address scheduling issues that result in non-compliance. |
| **Title/Role(s) of Responsible Persons:**Linda Gross, Interim PPS Director | **Expected Date of Completion:**04/01/2016 |
| **Evidence of Completion of the Corrective Action:**Training agenda/outline/sign in sheets.Schedule template to be used.Description of process to be used when scheduling demands anticipate the need to move staff/student ratios past regulatory limits. |
| **Description of Internal Monitoring Procedures:** Building special education coordinators and administrators will review staff schedules at least 2 x per year.In cases where instructional staff identify potential non-compliance, they and their building administrators, with support from the PPS Director, will provide appropriate interventions to prevent the need for non-compliant situations. These decisions will be documented by the building administrators and shared with the PPS Director. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** SE 40 Instructional grouping requirements for students aged five and older | **Corrective Action Plan Status:** Approved **Status Date:** 10/08/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2015, submit evidence of materials disseminated to appropriate staff for new procedures on requirements to ensure that the student-staff ratios in any special education instructional grouping are within regulatory limits and district need to submit written notification to the Department and the parents of all group members of the decision to increase the instructional group size and the reasons for such decision. Also submit names/roles of the designated persons conducting internal oversight and tracking including the date of the system's implementation.By March 18, 2016, submit the special education instructional grouping sheets, using the document/template located in the WBMS Public School Document Library for the Academic Resource Room at the Memorial Elementary School. |
| **Progress Report Due Date(s):** 12/18/201503/18/2016 |

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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:** Review of student records and staff interviews indicated that report cards are not always translated into the primary language of parents/guardians when necessary, as indicated by the Home Language Survey. |
| **Description of Corrective Action:** Translation of report cards into the primary language of parents/guardians was found to not always occur. This tells us that we need to strengthen the reminders and alerts to staff so that all required translations occur in a timely manner. To do this, we propose the following: 1. Our student data system allows us to design custom alerts, so that next to a student name can appear an icon that alerts staff to some special need or requirement. We will create an alert that identifies the need for translation of written materials. Teachers will see this any time they view student records, such as for grading, scheduling, etc. 2. Building secretaries will use the Home Language Surveys to post these alerts next to students whose families require translation. 3. Training will be held at each building level at faculty meetings. This training will explain the alert, and provide teachers will written protocols for communications with families of those students. Training will be provided by the building administrator and the PPS Director. |
| **Title/Role(s) of Responsible Persons:**Linda Gross, Interim PPS Director | **Expected Date of Completion:**04/01/2016 |
| **Evidence of Completion of the Corrective Action:**Training agendas and sign in sheetsChecklist that will be provided to staff indicating needs for translationCopies of translated documents will be kept in student filesWe can provide a screen shot of the icons in use if necessary. |
| **Description of Internal Monitoring Procedures:** Building administrators and secretaries will monitor correct application of the translation requirements for families by reviewing report cards against the data system alerts at least two times per year as report cards are created. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 7 Information to be translated into languages other than English | **Corrective Action Plan Status:** Approved **Status Date:** 10/08/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:**  |
| **Department Order of Corrective Action:** |
| **Required Elements of Progress Report(s):** By December 18, 2015, submit evidence of disseminated materials/appropriate staff sign-in sheets with name(s)/role(s) to ensure that report cards are translated into the primary language of parents/guardians when necessary, as indicated by the Home Language Survey. By March 18, 2016, submit samples of translated report cards and tracking log(s) for translations. |
| **Progress Report Due Date(s):** 12/18/201503/18/2016 |

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

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| **Criterion & Topic:** CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **CPR Rating:** Partially Implemented |
| **Department CPR Findings:** Staff interviews indicated that although the district has conducted annual training on the use of restraint consistent with regulatory requirements, some general education staff at the Hopedale Jr.- Sr. High School and Memorial Elementary School are not able to identify appropriately trained staff in the school responsible for the proper administration of physical restraint, if necessary. |
| **Description of Corrective Action:** Some general education staff were not able to identify trained staff in their buildings. This tells us that our efforts to internally communicate our available resources need to be strengthened. We will achieve this by doing the following:1. At the start of the school year meeting, all restraint trained staff were introduced and asked to stand up to be identified to the audience. This was also done at the building level meetings later in the day. 2. The District Emergency Management Guide will be updated to indicate the presence in each building of restraint trained staff. All classrooms carry a copy of this manual. 3. At least 2 x per year at faculty meetings, the Building Principals will repeat the reminder/stand up introduction of trained personnel. |
| **Title/Role(s) of Responsible Persons:**Linda Gross, Interim PPS Director | **Expected Date of Completion:**04/01/2016 |
| **Evidence of Completion of the Corrective Action:**1. Faculty meeting agendas2. Copy of page from Emergency Crisis Management Guide |
| **Description of Internal Monitoring Procedures:** PPS Director will repeat the introduction procedure each year at the start of school meetingBuilding Principals will repeat the introduction procedure each year at faculty meetings at least 2 x per year. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION |
| **Criterion:** CR 17A Use of physical restraint on any student enrolled in a publicly-funded education program | **Corrective Action Plan Status:** Partially Approved **Status Date:** 10/08/2015 **Correction Status:** Not Corrected |
| **Basis for Decision:** The district has proposed multiple trainings for staff throughout the year to ensure that all staff are able to identify appropriately trained staff responsible for the proper administration of physical restraint, if necessary. The district has not proposed an internal monitoring system that allows them to access the efficacy of these trainings, ensuring compliance. |
| **Department Order of Corrective Action:**Submit evidence of training on procedures to ensure that general education staff at the Hopedale Jr.- Sr. High School and Memorial Elementary School are able to identify appropriately trained staff in the school responsible for the proper administration of physical restraint, if necessary. Please submit agendas, training materials, and signed attendance sheets including names/roles and presenter. Additionally, submit a description of an internal monitoring process that allows the district to access the efficacy of these trainings, ensuring compliance. Please include a description of the administrative oversight and tracking system with name(s) role(s) of designated person(s). |
| **Required Elements of Progress Report(s):** Prior to training please refer to the following:Technical Assistance Advisory SPED 2016-1: Time-out and Seclusion @ http://www.doe.mass.edu/sped/advisories/2016-1ta.html andQuestion and Answer Guide Related to Implementation of 603 CMR 46.00 the Regulations for the Prevention of Physical Restraint and Requirements @ http://www.doe.mass.edu/sped/advisories/QuestionAnswerGuide-603CMR.pdf By December 18, 2015, submit evidence of training to ensure that all general education staff at the Hopedale Jr.- Sr. High School and Memorial Elementary School are able to identify appropriately trained staff in the school responsible for the proper administration of physical restraint, if necessary. Evidence may include agendas, training materials, and signed attendance sheets with names/roles and presenter. Also submit a description of developed internal administrative oversight and tracking system that enables the district to monitor compliance.By March 18, 2016, subsequent to all corrective actions, submit to ESE the results of the administrative internal review to ensure that general education staff at the Hopedale Jr.- Sr. High School and Memorial Elementary School are able to identify appropriately trained staff in the school responsible for the proper administration of physical restraint, if necessary. Indicate the staff number 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 note when conducting administrative monitoring the district must maintain the following documentation and make it available to ESE upon request: a) list staff names and responsible grade levels for employee data records reviewed; b) date of the review; c) name of person(s) who conducted the review, with role(s) and signature(s). |
| **Progress Report Due Date(s):** 12/18/201503/18/2016 |

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

District: Hopedale Public Schools

Corrective Action Plan Forms

Program Area: English Learner Education

Prepared by: Hopedale Public Schools/Linda Gross, Interim PPS Director

CAP Form will expand to as many lines as necessary. Before completing and emailing to pqacap@doe.mass.edu, please see separate *Instructions for Completing Corrective Action Plans.*

All corrective action must be fully implemented and all noncompliance corrected as soon as possible and no later than one year from the issuance of the Coordinated Program Review Final Report to the school or district.

**Mandatory One-Year Compliance Date: November 18, 2016**

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 5** **Program Placement and Structure** | **Rating: Partially Implemented** |
| **Department CPR Finding:** *A review of documentation and staff interviews indicated that ELLs at all WIDA proficiency levels, including Level 1 and Level 2 ELLs, receive only 20 -30 minutes of ESL instruction per week at the district’s elementary school. ESL instruction provided to ELLs is not sufficient to promote and support the rapid acquisition of English language proficiency by these students as is required in G.L. c. 71A.* |
| **Narrative Description of Corrective Action:** The cause of this area of partial compliance was determined to be lack of staff. Recognizing the need for additional staffing for ELE services, the District has increased staffing to 2.0 FTE teachers, effective at the start of school 2015. This enables all eligible students to receive sufficient instruction to promote growth and support the rapid acquisition of EL proficiency. |
| **Title/Role of Person(s) Responsible for Implementation:** Linda Gross, Interim PPS Director | **Expected Date of Completion for Each Corrective Action Activity:** Fall 2015 |
| **Evidence of Completion of the Corrective Action:** Student and staff schedules will be kept on file documenting amounts of ESL instruction sufficient to promote and support the rapid acquisition of English language proficiency.  |
| **Description of Internal Monitoring Procedures:** PPS Director and Principals will review schedules at start of the year with ESL staff, and will monitor for compliance at least two other times per year by reviewing updated schedules. PPS Director and Principals will include provision for adequate staffing in future year budget requests. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 5** **Program Placement and Structure** | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action: N/A** |
| **Required Elements of Progress Report(s):** Please complete district information in the attached spreadsheet labeled ELL List by school for each ELL student in the district. |
| **Progress Report Due Date(s): February 23, 2016**  |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 6 Program Exit**  | **Rating: Partially Implemented** |
| **Department CPR Finding:** *According to the “Reclassification Guidelines” submitted by the district students may be exited from the program if a team of professionals determines that a student will no longer benefit from ESL instruction due to some issues such as the years in the program, learning disability or emotional trauma even if this student is not English proficient based on ACCESS for ELLs results and other relevant data and therefore, cannot participate meaningfully in all aspects of the district’s general education program without the use of adapted or simplified English materials. Current practice of reclassification of ELLs as Former Limited English Proficient (FLEP) in Hopedale Public Schools is not consistent with the Department guidelines. Please see the “Guidance on Identification, Assessment, Placement, and Reclassification of English Language Learners August 2015” as found on*  [*http://www.doe.mass.edu/ell/guidance/guidance.pdf*](http://www.doe.mass.edu/ell/guidance/guidance.pdf) |
| **Narrative Description of Corrective Action:** The cause of this area of partial compliance appears to rest with the District’s previous misinterpretation of the requirements for reclassification. To respond to this, the District will take number of steps.1. The Guidance document provided by DESE in August 2015 will be used as a basis for training for ELE staff and building and district administrators. Special attention will be paid to the section on Reclassification. This training will be conducted by the Director. The District’s Reclassification Guidelines for students will be re-written to include the current regulatory expectations and practices. A copy of the revision will be provided.
2. Instructional staff will receive copies of the revised Guidance for their own purposes, and the revised Guidelines will be instituted.
3. Upon individual instances of reclassification, the Director will meet with ELE staff to review the processes used and the decisions made for compliance. These meetings will be documented.
 |
| **Title/Role of Person(s) Responsible for Implementation:** Linda Gross, Interim PPS Director | **Expected Date of Completion for Each Corrective Action Activity:** April 2016 |
| 1. **Evidence of Completion of the Corrective Action: 1.** Sign in sheets and agendas will be provided. 2. Revised guidelines will be kept on file and made available as requested. 3. Meetings to decide reclassification will be documented and steps taken will be aligned to the corrected guidelines.

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| **Description of Internal Monitoring Procedures:** PPS Director , Principals, and ELE staff will review guidelines at least once per school year and on the occasion of any reclassification activity. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 6 Program Exit**  | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** N/A |
| **Department Order of Corrective Action:** N/A |
| **Required Elements of Progress Report(s):** 1**-** Please submit a description of the criteria the district considers to reclassify ELLs as FLEP and other supporting documents such as annual review forms.2- Please submit a roster of the reclassified students with their most recent ACCESS scores and other relevant data the district considered for reclassification using the attached form. |
| **Progress Report Due Date(s): June 29, 2016** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 11 Equal Access to Academic Programs and Services** | **Rating: Partially Implemented** |
| **Department CPR Finding:** *Staff interviews indicated that at the high school, students do not earn credits toward graduation for ESL instruction.* |
| **Narrative Description of Corrective Action:** At the time of the CPR, there were no high school students who were receiving ELE instruction above and beyond their regular course load. Rather, the ELE instruction supplemented their course work, and appropriate credits towards graduation were provided through the course itself. Should a student receive ELE instruction in place of a full course schedule, the following procedures are proposed:Training will occur to responsible parties in the following steps:1. ELE staff, guidance staff, student, high school administration, and family would discuss the substitution of ELE credit for course credit.
2. ELE staff would structure time on learning to meet credit determination needs.
3. Guidance staff will communicate the technical needs (computer based grading and course descriptions) to the Principal and technology staff.
4. The detailed description of this process will be provided as part of evidence of corrective action.
 |
| **Title/Role of Person(s) Responsible for Implementation:** Linda Gross, Interim PPS Director | **Expected Date of Completion for Each Corrective Action Activity:** Training on steps 1-4 will occur by March, 2016, in advance of student scheduling and course selection activities at the secondary level. |
| **Evidence of Completion of the Corrective Action:** Training agenda and sign in sheets will be kept on file. Should any student receive ELE instruction in place of any full course, the documentation for that process will also be kept on file.  |
| **Description of Internal Monitoring Procedures:** PPS Director, Secondary Principal, Guidance staff , family, and any other relevant personnel will meet with ELE staff prior to student scheduling activities in spring and upon new move in, to determine the level of need and the correct steps to be taken. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 11 Equal Access to Academic Programs and Services** | **Status of Corrective Action:** [ ]  Approved [x]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** The district’s use of ELE instruction to supplement course work is not focused upon subject content areas; it is geared towards English language acquisition and meets the criteria for ESL instruction.  |
| **Department Order of Corrective Action:** The district must ensure that ESL/direct language instruction credits earned by ELL students are counted toward their graduation and that course credits earned by ELL students are weighted the same as those earned by students enrolled in the general education program.  |
| **Required Elements of Progress Report(s):** By **February 23, 2016,** submit a copy of the revised procedures to ensure that ESL/direct language instruction credits earned by ELL students are counted toward their graduation and that course credits earned by ELL students are weighted the same as those earned by students enrolled in the general education program. Provide evidence of staff training to appropriate staff on the district’s revised procedures. Evidence of training may include agenda, signed attendance sheets, and examples of training materials. By **May 23, 2016** submit samples of student report cards at the high school level indicating the credits earned towards graduation during ESL direct instruction.  |
| **Progress Report Due Date(s): February 23, 2016 May 23, 2016** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 16** **Equitable Facilities** | **Rating: Partially Implemented** |
| **Department CPR Finding:** *The ELL instructional classroom at the high school lacks a computer where as other classrooms have one available.* |
| **Narrative Description of Corrective Action:** At the time of the CPR, the ELE teacher had two i-Pads and one laptop available for student use. The teacher was itinerant and took technology with her as needed. For the 2015-16 school year, one additional laptop has been made available, and is kept at the Junior Senior High School. ELE staff are directed to notify the Technology department and Administrator if any student requires additional technology. |
| **Title/Role of Person(s) Responsible for Implementation:** Linda Gross, Interim PPS Director | **Expected Date of Completion for Each Corrective Action Activity:** Fall 2015 |
| **Evidence of Completion of the Corrective Action:** Inventory of computer technology available to ELE staff is kept with the Technology Director and copied to the PPS Director.  |
| **Description of Internal Monitoring Procedures:** PPS Director will meet with ELE staff at start of school to assure technology is available. PPS Director will meet with ELE staff upon determine of any newly developing needs and will coordinate with Technology Director to assure equitable provision of resources. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 16** **Equitable Facilities** | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** NA |
| **Department Order of Corrective Action:** NA |
| **Required Elements of Progress Report(s):** By **February 23, 2016,** submit evidence of availability of computers for ELL classrooms. This should include dissemination of protocols to access the technology to ELL teachers as well as a log of usage. Additionally, please submit the Superintendent’s and principal’s letters of assurance as to the remedies completed at the High School. By **May 23, 2016,** ESE will schedule with the district and conduct an onsite visit to verify the corrective actions.  |
| **Progress Report Due Date(s): February 23, 2016 May 23, 2016** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 17** **Program Evaluation** | **Rating: Not Implemented** |
| **Department CPR Finding:** *Documentation indicated that the district has not conducted periodic evaluations of the effectiveness of its ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the educational program.* |
| **Narrative Description of Corrective Action:** The District intends to contract with an evaluator familiar with the requirements of ELE instruction and programming to conduct a program evaluation during the 2015-16 school year. Results of that report will be shared by the appropriate instructional and administrative staff for suggested improvements and ongoing monitoring. |
| **Title/Role of Person(s) Responsible for Implementation:** Linda Gross, Interim PPS Director | **Expected Date of Completion for Each Corrective Action Activity:** Spring 2016 |
| **Evidence of Completion of the Corrective Action:** Program evaluation report will be kept on file in the PPS office and will be shared with appropriate constituent groups for review and action.  |
| **Description of Internal Monitoring Procedures:** District staff will review the findings of the report, and will create a timeline for implementation and review effective September 2016. |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 17** **Program Evaluation** | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** The district should note that a program evaluation is most effectively conducted by a team of educators who are involved in the program implementation. The purpose of a program evaluation is to identify the strengths and the weaknesses of the program in developing students’ English language skills and to make appropriate program adjustments or changes that are responsive to the outcomes of the program evaluation in order to improve the effectiveness of the program.  |
| **Department Order of Corrective Action:** * Please complete the program evaluation tool that is available at <http://www.doe.mass.edu/ell/resources/ProgramEvaluation.pdf> considering a variety of data to evaluate the effectiveness of the district’s ELE program in developing students’ English language skills and increasing their ability to participate meaningfully in the district’s educational program.
* Please provide information regarding the strengths and areas of improvement the district identified as a result of its ELE program evaluation.
* Please provide a plan of action to make appropriate program adjustments or changes that are responsive to the outcomes of the program evaluation to improve the effectiveness of the program at promoting and supporting the rapid acquisition of English language proficiency by ELLs as is required in G.L. c. 71A.
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| **Required Elements of Progress Report(s):** Please see above. |
| **Progress Report Due Date(s): June 29, 2016** |

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| COORDINATED PROGRAM REVIEWCORRECTIVE ACTION PLAN **(To be completed by school district/charter school)** |
| **Criterion & Topic: ELE 18** **Records of ELL Students** | **Rating: Partially Implemented** |
| **Department CPR Finding:** *Review of student records and staff interviews indicated that report cards are not always translated into the primary language of parents/guardians when necessary, as indicated by the Home Language Survey.*  |
| **Narrative Description of Corrective Action:** This area has already been addressed through the Civil Rights Corrective Action Plan as follows:Translation of report cards into the primary language of parents/guardians was found to not always occur. This tells us that we need to strengthen the reminders and alerts to staff so that all required translations occur in a timely manner. To do this, we propose the following: 1. Our student data system allows us to design custom alerts, so that next to a student name can appear an icon that alerts staff to some special need or requirement. We will create an alert that identifies the need for translation of written materials. Teachers will see this any time they view student records, such as for grading, scheduling, etc. 2. Building secretaries will use the Home Language Surveys to post these alerts next to students whose families require translation. 3. Training will be held at each building level at faculty meetings. This training will explain the alert, and provide teachers with written protocols for communications with families of those students. Training will be provided by the building administrator and the PPS Director.    |
| **Title/Role of Person(s) Responsible for Implementation:** Linda Gross, Interim PPS Director | **Expected Date of Completion for Each Corrective Action Activity:** Steps 1 and 2 are done. Step 3 is in process. |
| **Evidence of Completion of the Corrective Action:**  Training agendas and sign in sheets, Checklist that will be provided to staff indicating needs for translation, Copies of translated documents will be kept in student files. We can provide a screen shot of the icons in use if necessary  |
| **Description of Internal Monitoring Procedures:**   Building administrators and secretaries will monitor correct application of the translation requirements for families by reviewing report cards against the data system alerts at least two times per year as report cards are created.  |
| CORRECTIVE ACTION PLAN APPROVAL SECTION**(To be completed by the Department of Elementary and Secondary Education)** |
| **Criterion: ELE 18** **Records of ELL Students**  | **Status of Corrective Action:** [x]  Approved [ ]  Partially Approved [ ]  Disapproved  |
| **Basis for Partial Approval or Disapproval:** NA |
| **Department Order of Corrective Action:** NA |
| **Required Elements of Progress Report(s):**By **February 23, 2016,** submit evidence of disseminated materials/appropriate staff sign-in sheets with name(s)/role(s) to ensure that report cards are translated into the primary language of parents/guardians when necessary, as indicated by the Home Language Survey. By **May 23, 2016,** submit the results of an administrative review of a sample of student records from all levels for evidence that report cards are always translated into the primary language of parents/guardians when necessary, as indicated by the Home Language Survey*.* 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 charter school to address any identified noncompliance. **\*Please note when conducting administrative monitoring the district must maintain the following documentation and make it available to the ESE upon request: a) list of student names and grade levels for the records reviewed; b) date of the review; c) name of person(s) who conducted the review, with their role(s) and signature(s).**  |
| **Progress Report Due Date(s): February 23, 2016 May 23, 2016** |