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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: Malden

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 08/19/2015.

**Mandatory One-Year Compliance Date:** **08/19/2016**

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

| **Criterion** | **Criterion Title** | **CPR Rating** |
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| SE 2 | Required and optional assessments | Partially Implemented |
| SE 7 | Transfer of parental rights at age of majority and student participation and consent at the age of majority | 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 25 | Parental consent | Partially Implemented |
| SE 43 | Behavioral interventions | Partially Implemented |
| SE 48 | Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education | Partially Implemented |
| CR 6 | Availability of in-school programs for pregnant students | Partially Implemented |
| CR 7A | School year schedules | Partially Implemented |
| CR 9 | Hiring and employment practices of prospective employers of students | 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 |
| 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 18 | Responsibilities of the school principal | Partially Implemented |
| CR 24 | Curriculum review | Partially Implemented |

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| **Criterion & Topic:**  SE 2 Required and optional assessments | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that, across all school levels, the district does not consistently complete educational assessments, including a history of the student's educational progress in the general education curriculum and teacher assessments that address attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults. For elementary school students and students in out-of-district placements, record review demonstrated that consented-to occupational therapy evaluations, physical therapy evaluations, and home assessments are not consistently completed. | | |
| **Description of Corrective Action:**  M. Johnson will address all staff involved in student assessment process to review the above finding and to train these staff members about proper procedures moving forward. Staff will sign off to indicate participation in the training. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent for Student Services | | **Expected Date of Completion:**  02/15/2016 |
| **Evidence of Completion of the Corrective Action:**  Signed attendance sheet(s) and agenda will be submitted. | | |
| **Description of Internal Monitoring Procedures:**  M. Johnson will assign B. Hanafin, H. Whittington and Justin Muir (Program Managers) to select a random sampling from each school three times per year. They will review the folders for compliance, maintain a list of student names, grades, and date of reviews, and submit their findings to M. Johnson who will then take further action as required. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 2 Required and optional assessments | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 16, 2015, provide a narrative description of the corrective actions taken for each student identified in the Student Record Issues Worksheet which includes a completed occupational therapy evaluation, home assessment, physical therapy evaluation, a classroom observation and accompanying N1 forms for each student.  By November 16, 2015, submit a narrative description of the district's revised procedures and evidence (agenda, signed attendance sheets, training materials) that staff at all levels received training on the requirements of optional and required assessments including required Educational Assessments A (a history of the student's educational progress in the general education curriculum) and Educational Assessment B (Current Performance in the general curriculum that address attention skills, participation behaviors, communication skills, memory and social relations with groups, peers and adults) assessments consented to by parents.  By February 12, 2016, following completion of training and all corrective actions conduct 2 internal reviews of student records.  1) Choose a sample of 1) elementary records and 2) a sample of students placed out-of-district who had evaluations (initial or re-evaluations) conducted after November 14, 2015. Report the number of elementary records reviewed and the number of out-of- district records reviewed. Report the number that contained completed evaluation reports for all assessments that were consented to by parents identified on the proposed evaluation form for each. Report the number that contained completed Educational Assessments A (a history of the student's educational progress in the general education curriculum) and Educational Assessment B (Current Performance in the general curriculum) as required.  3. Choose a sample of middle and high school student records that had evaluations conducted after November 14, 2015. Report the number reviewed and the number that contained completed Educational Assessments A (a history of the student's educational progress in the general education curriculum) and Educational Assessment B (Current Performance in the general curriculum) as required.  If non- compliance is identified report the corrective actions taken to remedy each student file. If patterns of non compliance are identified at specific levels (elementary, middle school, high school, or out - of - district) provide a description of the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/16/2015  02/12/2016 | | |

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| **Criterion & Topic:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that when a student turns 18, the district does not obtain consent from the student to continue the current program of special education services; instead, the district waits until a new IEP is developed to seek consent for services from the adult student, which can be months after the student has turned 18. | | |
| **Description of Corrective Action:**  M. Johnson will train team chairs in the correct procedures which will be immediately implemented. A staff member will produce a monthly calendar of student birthdays so that team chairs can identify when a student approaches the age of consent. When a student turns 18, he or she will be invited to meet with the team chair to obtain written consent for the student to continue in the current program of special education services. Documentation of this meeting will be kept in the student folder. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Student Services | | **Expected Date of Completion:**  02/15/2016 |
| **Evidence of Completion of the Corrective Action:**  Agenda and signed attendance sheets will be provided as evidence of training.  List of students who will approach the age of consent will be generated.  Evidence of meeting with the student will be included in the student folder. | | |
| **Description of Internal Monitoring Procedures:**  Team chairs will send a list of students who have reached the age of consent each month with evidence of a meeting. M. Johnson or her designee will select folders for audit. A summary of the results will be kept on file. If necessary, re-training will take place if a folder does not indicate compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 7 Transfer of parental rights at age of majority and student participation and consent at the age of majority | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Prior to developing the district's corrective actions, review the Department's guidance on the transfer of rights under special education law when a student reaches age 18 at http://www.doe.mass.edu/sped/advisories/11\_1.html.  By November 16, 2015, submit evidence of staff training (agenda, signed attendance sheet, copies of the materials) on the district's revised procedures for obtaining consent from students who turn 18 to continue their special education services.  By February 12, 2016, following staff training and completion of all corrective actions, conduct a review of records of students who turned 18 after November 14, 2015. Report the number of students that reached age of majority and the number of those records that demonstrated that the district obtained consent immediately from the student(s) to continue their current IEP.  If non-compliance is identified, report the specific actions taken to correct each individual student file. If patterns of non-compliance are identified, provide a description of the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/16/2015  02/12/2016 | | |

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| **Criterion & Topic:**  SE 24 Notice to parent regarding proposal or refusal to initiate or change the identification, evaluation, or educational placement of the student or the provision of FAPE | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records and interviews indicated that when a student is referred for an evaluation to determine special education eligibility by a building-based support team, the district does not consistently send written notice to the student's parent(s) within five (5) school days of receipt of the support team's referral. | | |
| **Description of Corrective Action:**  Asst. superintendent or designee will complete a training with members of the student support teams regarding proper procedures regarding the documentation of timelines. SST referrals to special education will be date stamped to assure that written notice is sent to parents within five school days of receipt of the SST referral. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Student Services | | **Expected Date of Completion:**  02/15/2016 |
| **Evidence of Completion of the Corrective Action:**  Signed attendance sheets and training notice and agenda will be provided to document training. | | |
| **Description of Internal Monitoring Procedures:**  Program managers will conduct a review of documents three times per year. They will submit their findings to assistant superintendent who will then take further actions as necessary. | | |
| 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:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 16, 2015, submit documentation (agendas, signed attendance sheets) that training was provided to special education staff on the requirement to send written notice of proposed evaluations to the student's parent(s) within 5 school days of receipt from a building-based support team.  By February 12, 2016, following staff training and implementation of all corrective actions, conduct an internal review of student referrals from building based support teams proposed for evaluation with eligibility determinations after November 14, 2015. Report by school the number of referrals reviewed and the number that evidenced that written notices proposing evaluations were sent to the student's parent(s) within five (5) school days of receipt of the building based support team's referral. If any non-compliance is identified, report the specific actions taken to correct each individual student file. If a pattern(s) is identified, provide a description of the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/16/2015  02/12/2016 | | |

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| **Criterion & Topic:**  SE 25 Parental consent | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records demonstrated that although classroom observations are completed for students suspected of having a specific learning disability, the district does not obtain written consent from parents to conduct the observation. | | |
| **Description of Corrective Action:**  Maura Johnson will conduct a training session for team chairs and psychologists to assure that written consent for student observation is obtained when a specific learning disability is suspected. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Student Services | | **Expected Date of Completion:**  02/15/2016 |
| **Evidence of Completion of the Corrective Action:**  An agenda for the training and signed attendance sheet will serve as evidence of the training. | | |
| **Description of Internal Monitoring Procedures:**  Program managers will conduct a review of documents three times per year to ensure compliance with the indication. They will provide a summary to Maura Johnson who will take further action as necessary. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 25 Parental consent | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 16, 2015, submit documentation (agendas, signed attendance sheets) that training was provided to special education staff on the requirement to include and procure written parental consent for required classroom observations when proposing evaluation consent forms.  By February 12, 2016, following training and implementation of all corrective actions conduct an internal review of students referred for evaluations after November 14, 2015. Report the number of students whose suspected area of disability was SLD, and the number of those that contained classroom observations on the evaluation consent form proposed to parents. If any non-compliance is identified, report the specific actions taken to correct each individual student file. If a pattern(s) is identified, provide a description of the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/16/2015  02/12/2016 | | |

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| **Criterion & Topic:**  SE 43 Behavioral interventions | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records indicated that for students whose behavior impedes their learning or the learning of others, IEP Teams at the elementary level do not always consider positive behavioral interventions for students with disabilities other than emotional. | | |
| **Description of Corrective Action:**  Training will be provided for team chairs around analysis of behaviors for all students with disabilities. Additional training and information including examples of positive behavior interventions will be provided to building based teams. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent of Student Services | | **Expected Date of Completion:**  06/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Evidence of training will be provided through agenda and supporting materials as well as signed attendance sheets. A review of IEPs will reflect the inclusion of positive behavioral interventions for students whose behavior impedes learning. | | |
| **Description of Internal Monitoring Procedures:**  Program managers will review a sample of IEPs twice per year for compliance with this indicator. They will review for evidence of inclusion of positive behavioral interventions and submit a summary of their findings to Maura Johnson so that she may take further action as necessary. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 43 Behavioral interventions | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 16, 2015, submit documentation (agendas, signed attendance sheets) that training was provided to elementary special education staff on the requirement to consider positive behavioral interventions for students with disabilities other than emotional, whose behavior impedes their learning or the learning of others.  By February 12, 2016, following implementation staff training, conduct an internal review of elementary student records of IEPs of students whose disabilities are other than emotional but whose student records at annual review meetings demonstrates disciplinary or behavioral infractions, thereby impeding their learning or the learning of others. Report the number of elementary records reviewed and the number whose IEPs contained positive behavioral interventions. If non-compliance is identified, report the specific actions taken to correct each individual student file identify and report the root cause(s) of the ongoing non-compliance and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
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| **Criterion & Topic:**  SE 48 Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  Interviews, a review of student records, and schedules demonstrated that fifth and sixth grade students with disabilities at Forestdale Elementary School do not have access to social studies because of scheduling conflicts with their special education programming and related services. | | |
| **Description of Corrective Action:**  Assistant superintendents will review each individual student schedule to identify subject areas that are problematic and will present their findings to the superintendent and building principal. From there, the Team Chair and building principal will re-work each schedule to ensure compliance with the criterion. A summary of their work will be shared with the superintendent and assistant superintendents. Once the schedules are complete, the building principal and/or his designee will communicate with affected students and parents to explain any necessary schedule changes. All changes will be implemented no later than the start of the second marking term. | | |
| **Title/Role(s) of Responsible Persons:**  Forestdale Principal, superintendent, assistant superintendents | | **Expected Date of Completion:**  11/13/2015 |
| **Evidence of Completion of the Corrective Action:**  Updated student schedules; copy of agenda for parent communication; signed attendance sheets if communication takes place in person; any other written documentation provided to parents at the time of the communication. | | |
| **Description of Internal Monitoring Procedures:**  Assistant superintendent for student services will verify student schedules at the start of the year to ensure compliance. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  SE 48 Equal opportunity to participate in educational, nonacademic, extracurricular and ancillary programs, as well as participation in regular education | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 16, 2015, submit a description of the root cause that identifies why fifth and sixth grade students with disabilities at Forestdale Elementary School do not have access to social studies, and a detailed plan, along with proposed actions, expected dates of implementation, person(s) responsible, communication(s) with parents to remedy it.  By February 12, 2016, conduct an internal review of fifth and sixth grade special education students' schedules at Forestdale Elementary School. Report the number of students and the number who have access to social studies instruction. If non-compliance is identified, report the specific actions taken to correct each individual student schedule. If patterns of non-compliance are identified, provide a description of the report the root cause(s) of the ongoing and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/16/2015  02/12/2016 | | |

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| **Criterion & Topic:**  CR 6 Availability of in-school programs for pregnant students | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that pregnant students are required to obtain the certification of a physician that the student is physically and emotionally able to continue in school, but the district does not also require such certification for all students for other physical or emotional conditions requiring the attention of a physician. | | |
| **Description of Corrective Action:**  The current policy will be revised to include correct language. Updated policy will be presented to school committee for review and approval. Upon approval, administrators will receive training in the updated policy. In turn, administrators will share the updated policy with staff in their respective buildings. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent of Schools  Assistant Superintendent of Schools | | **Expected Date of Completion:**  02/12/2016 |
| **Evidence of Completion of the Corrective Action:**  Updated policy will be provided. Agenda with policy item will be provided. Notes from school committee meeting with this agenda item will be provided. Signed attendance sheets to acknowledge training in the new policy and signed document from principal’s indication that they reviewed updated policy with staff will be provided. | | |
| **Description of Internal Monitoring Procedures:**  Asst. Superintendent will address principals regarding the training and document her actions in writing. In addition, prior to the new school year, she will ensure that the policy is added to the manual and included in required district documents. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 6 Availability of in-school programs for pregnant students | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 16, 2015, submit a revised approved policy for pregnant students; school committee minutes approving the policy; and documentation that training or correspondence (agenda, signed attendance sheets, advisory memoranda) on the revised policy has been communicated to applicable staff (nurses, guidance counselors, administrators). | | |
| **Progress Report Due Date(s):**  11/16/2015 | | |

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| **Criterion & Topic:**  CR 7A School year schedules | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents and interviews demonstrated that Malden High School is in operation 179 days, rather than at least 180 days a year, because of one day of freshman orientation. | | |
| **Description of Corrective Action:**  The superintendent will create a 2016-2017 academic calendar that includes 180 days for ALL students. | | |
| **Title/Role(s) of Responsible Persons:**  Superintendent of Schools | | **Expected Date of Completion:**  06/01/2016 |
| **Evidence of Completion of the Corrective Action:**  A signed letter of assurance from the superintendent, stating that the 2016-2017 school calendar will include 180 days for ALL students, will be submitted with the first progress report. School committee agenda will note discussion of school calendar. Completed, approved 2016-2017 calendar will be submitted; school committee has typically approved the calendar in May, hence the June 1, 2016 expected date of completion. | | |
| **Description of Internal Monitoring Procedures:**  The central office team will meet to review the calendar before it is sent to school committee to ensure that it contains the required number of days for all students. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 7A School year schedules | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By February 12, 2016, submit the statement of assurance from the superintendent and a description of the district's plan to remedy the school year schedule to ensure that the high school is in operation 180 days for all students for the start of the 2017 SY.  By June 1, 2016, submit a 2017 SY calendar approved by the school committee and a copy of the school committee minutes evidencing compliance with school year schedule requirements at the High School. | | |
| **Progress Report Due Date(s):**  02/12/2016  06/01/2016 | | |

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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 student records, documents, and interviews indicated that although the district has community-based school-to-work programs and student internships, prospective employers of these students are not required to sign statements of assurance that the employer complies with applicable federal and state laws prohibiting discrimination in hiring or employment practices. | | |
| **Description of Corrective Action:**  The district will create a form - to be signed by prospective employers - that assures compliance with applicable federal and state laws prohibiting discrimination in hiring or employment practices. Once the form is developed, the assistant superintendent will meet with principal and program managers to instruct them in the use of the form. In a train-the-trainer model, the principal will then be required to train guidance counselors and/or appropriate staff in the use of the form. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent, MHS Principal | | **Expected Date of Completion:**  11/13/2015 |
| **Evidence of Completion of the Corrective Action:**  Evidence will include the completed form as well as signed documentation indicating receipt of training. In the future, the signed forms will provide additional evidence that the forms are in use. | | |
| **Description of Internal Monitoring Procedures:**  The principal will be required to submit a signed sheet from affected employees indicating training in this area as well as samples of completed/signed forms. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 9 Hiring and employment practices of prospective employers of students | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 16, 2015, submit a copy of the district's signed statement of assurance for prospective employers letter documenting they are in compliance with applicable federal and state laws prohibiting discrimination in hiring or employment practices. Identify and submit a list of those programs or courses (life skills, Pathways Alternative HS, internship, etc.) that would require statements of assurance and the person responsible for providing them to employers. Submit documentation (agenda, signed attendance sheets) that applicable staffs (guidance counselors, principals) have been trained on this requirement of hiring students by prospective employers.    By February 12, 2016, following staff training and implementation of all corrective actions, conduct an internal review of students placed in work programs in the community after November 14, 2015. Report the number of students and the number whose employers submitted signed statements of assurance that they comply with all requirements. If a pattern(s) of non-compliance is identified, report the root cause and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  11/16/2015  02/12/2016 | | |

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| **Criterion & Topic:**  CR 10A Student handbooks and codes of conduct | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of documents indicated that while the district's special education department has comprehensive procedures for the discipline of students with disabilities, the student code of conduct omits the disciplinary procedures for students on 504 plans and for students not yet determined to be eligible. In addition, student handbooks and the code of conduct do not contain a nondiscrimination policy that affirms the school's non-tolerance for harassment based on race, color, national origin, sex, gender identity, religion, or sexual orientation, or discrimination on those same bases. | | |
| **Description of Corrective Action:**  The assistant superintendents will work with the MHS principal to review the current handbook and identify resources for addressing the missing components. Entire handbook will be reviewed by central office designee and updated language will be presented to the school committee by the superintendent. Principal will work with the school committee to update the handbook as necessary and will post updated handbook to the website, along with a message that points out the updated language. | | |
| **Title/Role(s) of Responsible Persons:**  MHS Principal, School Committee, Assistant Superintendents | | **Expected Date of Completion:**  02/12/2016 |
| **Evidence of Completion of the Corrective Action:**  Draft of revised language and minutes from school committee meeting(s) showing discussion and approval of the updated handbook.  Updated handbook posted to website by expected date of completion noted above.  Statement of assurance from the superintendent will assure that the updated handbook will be printed over the summer in preparation for the new school year. | | |
| **Description of Internal Monitoring Procedures:**  School committee and superintendent will require MHS principal to submit updated language and completed draft of handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10A Student handbooks and codes of conduct | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  Submit revised handbook that includes 1) disciplinary procedures for students on 504 plans; 2) discipline procedures for students not yet determined to be eligible for special education; 3) a nondiscrimination policy that affirms the school's non-tolerance for harassment based on race, color, national origin, sex, gender identity, religion, or sexual orientation, or discrimination; 4) amendments to the district's Bullying Prevention and Intervention Plan that extend protections to students who are bullied by a member of the school staff; 5) the name(s) of the person(s) designated to coordinate compliance under Title IX and 6)the name(s), office address(es) and phone number(s) of the person(s) responsible for coordinating compliance under Section 504.  Submit documentation (school committee agenda, minutes) that the handbook revisions have been approved by the school committee.  Report the actions taken (school website update, faculty meeting agendas, parent communications) to disseminate revised content required in student handbooks to parents, staff and students and how this is communicated to non or limited English speakers.  This progress report is due by February 12, 2016. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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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:**  A review of documents demonstrated that the high school parent and student handbook does not contain amendments to the district's Bullying Prevention and Intervention Plan that extend protections to students who are bullied by a member of the school staff. As a result, the district has not given high school students, parents and guardians annual written notice of the student-related sections of the Plan. | | |
| **Description of Corrective Action:**  Assistant superintendent will work with superintendent to revise policy and obtain school committee approval as necessary. The superintendent will provide MHS principal with updated language to be included in the handbook. By 2/12/16, the updated handbook will be posted on the school website and a message indicating the changes will be included. A completed handbook, including all of the updates, will be disseminated in the 16-17 school year. | | |
| **Title/Role(s) of Responsible Persons:**  School Committee, MHS Principal, Assistant Superintendent | | **Expected Date of Completion:**  02/12/2016 |
| **Evidence of Completion of the Corrective Action:**  Draft of revised language and minutes from school committee meeting(s) showing discussion and approval of the updated handbook.  Updated handbook posted to website by expected date of completion noted above.  Statement of assurance from the superintendent will assure that the updated handbook will be printed over the summer in preparation for the new school year. | | |
| **Description of Internal Monitoring Procedures:**  School committee and superintendent will require MHS principal to submit updated language and completed draft of handbook. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 10B Bullying Intervention and Prevention | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  See reporting requirements for CR 10A. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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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 indicated that the name(s) of the person(s) designated to coordinate compliance under Title IX and the name(s), office address(es) and phone number(s) of the person(s) responsible for coordinating compliance under Section 504 are not included in the district's high school handbook. | | |
| **Description of Corrective Action:**  Assistant superintendent will revise the language in the high school handbook to reflect names and required contact information of the person(s) designated to coordinate compliance under Title IX and Section 504. The assistant superintendent will provide MHS principal with updated language to be included in the handbook. By 2/12/16, the updated handbook will be posted on the school website and a message indicating the changes will be included. A completed handbook, including all of the updates, will be disseminated in the 16-17 school year. | | |
| **Title/Role(s) of Responsible Persons:**  MHS Principal, Assistant Superintendent | | **Expected Date of Completion:**  02/12/2016 |
| **Evidence of Completion of the Corrective Action:**  Updated handbook posted to website by expected date of completion noted above.  Statement of assurance from the superintendent will assure that the updated handbook will be printed over the summer in preparation for the new school year. | | |
| **Description of Internal Monitoring Procedures:**  The assistant superintendent will check the website to ensure the updated copy has been posted by the stated date. She will provide a summary to the superintendent as to progress related to this criteria. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 12A Annual and continuous notification concerning nondiscrimination and coordinators | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  See reporting requirements for CR 10A. | | |
| **Progress Report Due Date(s):**  02/12/2016 | | |

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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 indicated that the district's procedures ensuring that counseling and counseling materials are free from bias and stereotypes do not address the protected categories of gender identity and homelessness. | | |
| **Description of Corrective Action:**  The assistant superintendent will revise the current procedures to include gender identity and homelessness. Upon completion, she will update principals regarding the changes; principals will sign off that they have received and understand the changes. In turn, principals will inform appropriate staff of the changes. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant Superintendent | | **Expected Date of Completion:**  11/13/2015 |
| **Evidence of Completion of the Corrective Action:**  Agenda and sign off sheets indicating attendance at training sessions. | | |
| **Description of Internal Monitoring Procedures:**  Assistant superintendent will check to ensure that updated documents replace outdated ones. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 14 Counseling and counseling materials free from bias and stereotypes | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 16, 2015, submit a revised counseling and materials review procedure that contains the protected categories of gender identity and homelessness.  Submit documentation (agenda's, signed attendance sheets, advisory memos) that training was conducted for principals and appropriate staff to include the two protected categories that were previously omitted from the district's procedures. | | |
| **Progress Report Due Date(s):**  11/16/2015 | | |

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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 demonstrated that the district sends written notice to students 16 or over and their parents/guardians within 10 days of the student's 15th consecutive unexcused absence to meet with school representatives to discuss why the student is leaving school; however, this notice does not offer an extension of not longer than 14 days for the meeting. | | |
| **Description of Corrective Action:**  Assistant superintendent will provide the MHS principal with a corrected, revised copy of the notice to students 16 or over. Assistant superintendent will train the high school principal, pointing out revisions and implications. MHS principal, in turn, will inform and train appropriate staff in the use of the updated form. | | |
| **Title/Role(s) of Responsible Persons:**  MHS Principal | | **Expected Date of Completion:**  11/13/2015 |
| **Evidence of Completion of the Corrective Action:**  Revised form; agenda; signed attendance sheet. | | |
| **Description of Internal Monitoring Procedures:**  MHS principal will submit copies of updated form upon request of the assistant superintendent. | | |
| 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:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:**  Please be aware that changes to MGL c76, s18 that went into effect July 1, 2014 will require the district to revise its procedures for students 16 and over leaving school without a diploma. Some key elements include shorter timelines for required notice, a designated team of personnel for the exit interview, and annual reporting to the DESE. | | |
| **Department Order of Corrective Action:**  Review the revised legislation and other resources at the Department's webpage http://www.doe.mass.edu/dropout/. Revise the district's procedures and initial notice to conform with the regulatory changes. | | |
| **Required Elements of Progress Report(s):**  Using the revised legal requirements, develop a procedure and initial/annual notice to students 16+ and their parents that conforms with MGL c76, s18 by November 16, 2015. Upon approval from the DESE, the district will train relevant staff and implement use of the notices/procedures. | | |
| **Progress Report Due Date(s):**  11/16/2015 | | |

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

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| **Criterion & Topic:**  CR 18 Responsibilities of the school principal | | **CPR Rating:**  Partially Implemented |
| **Department CPR Findings:**  A review of student records, documents, and interviews demonstrated that instructional support is not consistently available to meet a student's need in the regular education classroom across all grade levels, including remedial instruction, availability of reading instruction at the elementary level in all grades, appropriate services for linguistic minority students, and support services. Additionally, record review and interviews verified that the documentation of instructional strategies and results is inconsistent and therefore not always available as part of the evaluation information reviewed by IEP Teams when determining eligibility. | | |
| **Description of Corrective Action:**  Assistant superintendents will work with principals and our district consultant to conduct a needs assessment related to available and needed instructional support. Following the needs assessment, the assistant superintendent will develop a template for principals to complete; this template will require principals and their building teams to identify existing supports available at the elementary level for various tiers of instruction and need. Once this has been developed, it will be shared at the district and building level. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant superintendent, principals | | **Expected Date of Completion:**  06/01/2016 |
| **Evidence of Completion of the Corrective Action:**  Completed templates; agenda and attendance sheets to verify training; individual student data sheet to demonstrate implementation and analysis. | | |
| **Description of Internal Monitoring Procedures:**  Assistant superintendent will require principals to submit their plan at the beginning of the school year to ensure that it is up to date and accurate. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 18 Responsibilities of the school principal | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By February 12, 2016, submit a description of the results of the principals' needs assessments that identifies available and needed instructional supports for all grades in all schools and the district's action plan to ensure that instructional supports is consistently available to meet student need in the regular education classroom across all grade levels.  By June 1, 2016, following implementation of all corrective actions, conduct an internal review of students referred for special education evaluations by building based support teams after February 12, 2016). Report the number of student records reviewed from each school. Report the number of student records that contained general education instructional supports and strategies that were available as part of the evaluation information reviewed by IEP Teams when determining eligibility. If a pattern(s) of non-compliance is identified report the root cause(s) and a plan to remedy it.  \*Please note that when monitoring the district must maintain the following documentation and make it available to the Department upon request: a) List of student names and grade levels for the record review; b) Date of the review; c) Name of person(s) who conducted the review, their roles(s), and their signature(s). | | |
| **Progress Report Due Date(s):**  02/12/2016  06/01/2016 | | |

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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 interviews indicated that the district does not have a process to ensure that individual teachers review all educational and supplemental materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. | | |
| **Description of Corrective Action:**  Assistant will work with other districts to identify best practices in this area. Asst. superintendent will then develop a written product that highlights the process for ensuring that individual teachers review all educational and supplemental materials to address areas listed above. Procedures will be shared with building principals and curriculum directors, who in turn will train staff. | | |
| **Title/Role(s) of Responsible Persons:**  Assistant superintendent; building principals, curriculum directors | | **Expected Date of Completion:**  02/13/2016 |
| **Evidence of Completion of the Corrective Action:**  Copy of procedures. Agenda from training meeting; signed attendance sheets. | | |
| **Description of Internal Monitoring Procedures:**  Assistant superintendent will remind principals and directors to review procedures on at least a yearly basis and will provide further direction as necessary. | | |
| CORRECTIVE ACTION PLAN APPROVAL SECTION | | |
| **Criterion:**  CR 24 Curriculum review | **Corrective Action Plan Status:** Approved  **Status Date:** 09/29/2015  **Correction Status:** Not Corrected | |
| **Basis for Decision:** | | |
| **Department Order of Corrective Action:** | | |
| **Required Elements of Progress Report(s):**  By November 16, 2015, submit a description of the district process to ensure that individual teachers review all educational and supplemental materials for simplistic and demeaning generalizations, lacking intellectual merit, on the basis of race, color, sex, gender identity, religion, national origin and sexual orientation. Submit evidence (agendas, signed attendance sheet, training materials) by school that all teachers have been trained on how to evaluate all educational and supplemental materials for bias and stereotypes.  By February 12, 2016, following staff training, submit a description of teacher’s curriculum review results from each school demonstrating that teachers are reviewing all instructional materials for bias and serotypes. | | |
| **Progress Report Due Date(s):**  11/16/2015  02/12/2016 | | |